



NOTICE OF MEETING

GOVERNANCE & AUDIT & STANDARDS COMMITTEE

FRIDAY, 30 JUNE 2017 AT 11.30 AM

CONFERENCE ROOM A - CIVIC OFFICES

Telephone enquiries to 023 9283 4058
Email: Vicki.plytas@portsmouthcc.gov.uk

If any member of the public wishing to attend the meeting has access requirements, please notify the contact named above.

Membership

Councillor John Ferrett (Chair)
Scott Harris (Vice-Chair)
Councillor Steve Hastings
Councillor Leo Madden
Councillor Hugh Mason
Councillor Neill Young

Standing Deputies

Councillor Alicia Denny
Councillor Paul Godier
Councillor Darren Sanders
Councillor David Tompkins
Councillor Matthew Winnington
Councillor Rob Wood

(NB This Agenda should be retained for future reference with the minutes of this meeting.)

Please note that the agenda, minutes and non-exempt reports are available to view online on the Portsmouth City Council website: www.portsmouth.gov.uk

Deputations by members of the public may be made on any item where a decision is going to be taken. The request should be made in writing to the contact officer (above) by 12 noon of the working day before the meeting, and must include the purpose of the deputation (for example, for or against the recommendation/s). Email requests are accepted.

AGENDA

- 1 Apologies for Absence

2 Declarations of Members' Interests

3 Minutes of the Meeting held on 3 March 2017 (Pages 7 - 14)

RECOMMENDED that the Minutes of the meeting held on 3 March 2017 be confirmed and signed by the chair as a correct record.

4 Updates on Actions identified in the Minutes

5 2017 to 2018 Audit Fee Letter (Pages 15 - 18)

Presentation of the External Auditor's Fee Letter for noting.

6 2016 to 2017 External Audit Progress Report (Pages 19 - 28)

Presentation of the Audit Progress Report from the External Auditors for noting.

7 Performance Management Update - Q4, 2016 - 17 (Pages 29 - 174)

The purpose of the report is to report significant performance issues, arising from Q4 performance monitoring, to Governance and Audit and Standards committee and highlight areas for further action or analysis.

RECOMMENDED that the Committee is asked to

- 1) note the report;**
- 2) note the overall improvement in quality of reports, and the commentary from the Deputy Chief Executive at section 5**
- 3) comment on the performance issues highlighted in section 3, including agreeing if any further action is required**
- 4) agree the actions proposed in section 4**

8 Draft Annual Governance Statement (Pages 175 - 214)

The purpose of the report is to seek comment from the Governance and Audit and Standards Committee for the council's draft Annual Governance Statement (AGS) for 2016/17 and for the associated framework for monitoring progress.

RECOMMENDED that the Committee are asked to

- (1) Note the progress and recommendations made against the 2016/17 annual governance issues as set out in Appendix 1**
- (2) Comment on the draft Annual Governance Statement 2016/17 (Appendix 2)**
- (3) Note the updated Local Code of Governance as set out in Appendix 3**

9 Consideration of the political balance rules in relation to the constitution of sub-committees considering complaints against Members (Pages 215 - 216)

The purpose of the report is to ask the Committee to consider whether it wishes to disapply the political balance rules in respect of its Sub-Committees which consider complaints against Members and to agree that the same rule shall apply to the Initial Filtering Panel.

RECOMMENDED that the political balance rules are disappplied in respect of Governance and Audit and Standards Sub-Committees which are considering complaints against Members and also the same arrangement should apply in respect of Initial Filtering Panel membership.

10 Proposed amendments to the Complaint Form submitted in relation to the Councillor Code of Conduct (Pages 217 - 224)

The purpose of the report is to ask Members to consider a proposed revision to the content of the Complaint Form submitted in relation to Councillor Code of Conduct complaints.

RECOMMENDED that the Committee

- 1) Considers the proposed amendments to the Complaint Form attached as Appendix 1 to this report**
- 2) Recommends to Council that the revised Complaint Form is adopted**

11 Exclusion of Press and Public

**That in view of the contents of the following items on the agenda the Committee is RECOMMENDED to adopt the following motion:
“That, under the provisions of Section 100A of the Local Government Act, 1972 as amended by the Local Government (Access to Information) Act, 1985, the press and public be excluded for the consideration of the following items on the grounds that the reports contain information defined as exempt in Part 1 of Schedule 12A to the Local Government Act, 1972”.**

The public interest in maintaining the exemption must outweigh the public interest in disclosing the information.

Under the Local Authorities (Executive Arrangements) (Meetings and Access to Information) England Regulations 2012, regulation 5, the reasons for exemption of the listed items is shown below.

Members of the public may make representation as to why the item should be held in open session. A statement of the Council’s response to representations received will be given at the meeting so that this can be taken into account when members decide whether or not to deal with the item under exempt business.

(NB The exempt/confidential committee papers on the agenda will

contain information which is commercially, legally or personally sensitive and should not be divulged to third parties. Members are reminded of standing order restrictions on the disclosure of exempt information and are invited to return their exempt documentation to the Senior Local Democracy Officer at the conclusion of the meeting for shredding.)

Item	Exemption Para No.*
12. Data Security Breaches Report -	paragraphs 1 and 2
13. Annual Audit Performance Report	paragraphs 1 and 2
1. Information relating to any individual	
2. Information that is likely to reveal the identity of an individual	

12 Data Security Breaches Report (Pages 225 - 226)

(NB Appendix A is exempt and provision has been made on the agenda for the meeting to be moved into exempt session if required)

The purpose of the report is to inform the Committee of any Data Security Breaches and actions agreed/taken since the last meeting.

RECOMMENDED that Members of the Governance & Audit & Standards Committee note the breaches (by reference to Exempt Appendix A) that have arisen and the action determined by the Corporate Information Governance Panel (CIGP).

13 Annual Internal Audit Report for the 2016/17 Financial Year (Pages 227 - 272)

(NB Appendix D is exempt and provision has been made on the agenda for the meeting to be moved into exempt session if required)

The purpose of the report is

- (1) to give the Annual Audit Opinion on the effectiveness of the control framework, based on the Internal Audit findings for 2016/17 and highlight areas of concern.
- (2) to advise Members of the Audit Plan for 2017/18.
- (3) To provide a summary of the Counter Fraud cases investigated and sanction results. Details of corporate cases investigated are contained within exempt Appendix D.

RECOMMENDED that Members

- (1) **note the Audit and Counter Fraud Performance for 2016/17.**
- (2) **note the highlighted areas of control weakness from the 2016/17 Audit Plan.**
- (3) **note the Annual Audit Opinion on the effectiveness of the**

system of internal control for 2016/17.

- (4) endorse the Audit Plan for 2017/18**
- (5) consider any additional actions to be taken in response to matters raised within this report relating to the reviews undertaken.**

Information

Members of the public are now permitted to use both audio visual recording devices and social media during this meeting, on the understanding that it neither disrupts the meeting or records those stating explicitly that they do not wish to be recorded. Guidance on the use of devices at meetings open to the public is available on the Council's website and posters on the wall of the meeting's venue.

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Agenda Item 3

DRAFT

GOVERNANCE & AUDIT & STANDARDS COMMITTEE

MINUTES OF THE MEETING of the Governance & Audit & Standards Committee held on Friday, 3 March 2017 at 10.30 am at the Conference Room A - Civic Offices

(NB These minutes should be read in conjunction with the agenda for the meeting which can be found at www.portsmouth.gov.uk.)

Present

Councillor Ian Lyon (in the chair)
Councillor Scott Harris (Vice-Chair)
Councillor John Ferrett
Councillor Frank Jonas
Councillor Leo Madden

Officers

Michael Lawther, Deputy Chief Executive, City Solicitor and Monitoring Officer
Jon Bell, Director of HR, Legal and Performance
Julian Pike, Deputy Section 151 Officer
Michael Lloyd, Directorate Finance Manager
Elizabeth Goodwin, Chief Internal Auditor

External Auditor

Jo Taylor, Manager

17. Apologies for Absence (AI 1)

Apologies for absence were received on behalf of Councillor Hugh Mason.

18. Declarations of Members' Interests (AI 2)

There were no declarations of members' interests.

19. Minutes of the Meeting held on 3 February 2017 (AI 3)

RESOLVED that the minutes of the meeting held on 3 February 2017 be confirmed and signed by the chair as a correct record.

20. Updates on actions identified in the minutes (AI 4)

The Chair asked that actions points from the minutes should be produced in a separate document and kept with the minutes.

The Chair referred to page 7 of the document pack where mention was made of a briefing session on MMD being arranged and asked that this be progressed.

With regard to the issues raised on page 8 of the document pack concerning the Treasury Management Monitoring Report, the City Solicitor said that he would brief the Chair about progress.

21. Audit Plan for 2016-17 External Auditors (AI 5)

(TAKE IN REPORT)

Jo Taylor introduced the report which summarises the external auditor's initial assessment of the key risks driving the development of an effective audit for the Council and outlines the auditor's planned audit strategy in response to those risks. An overview of the Audit Plan is outlined on page 18 of the documents pack. Ms Taylor said that they had identified one significant risk under the section headed Financial Statements Audit but said this was a standard risk on all audit engagements being the risk that management is able to override controls which otherwise appear to be operating effectively. There are also a number of other risks that will require audit focus during 2016/17 including:-

- Changes to the presentation of the Comprehensive Income and Expenditure Statement
- Review of the models which provide the accounting entries for the Highways and Waste PFI schemes
- The ongoing EU investigation into transactions between the Council and MMD (Shipping Services) Ltd and
- The Council's judgment that harbour accounts for the Commercial Port are not required.

More detail about these risks is contained in Section 2 of the Plan.

A discussion took place about the checks and balances that were in place to prevent blurring expenditure that was revenue and that which was capital ie to prevent items being posted to revenue when they were capital and vice-versa. In certain cases it would ultimately be up to the S151 officer to decide to which category items were posted. It was confirmed that an addition to the Capital Programme could only be made with Council approval.

The external auditor said that although they have identified certain risks, this was part of their work and they were not expecting to find anything untoward. They need to be aware of the processes the Council has in place and be assured that figures are posted to the correct accounts. Financial appraisals were undertaken and the advice of professionals such as surveyors would be sought to assist in deciding whether expenditure was capital or revenue.

With regard to a query about the Harbour Accounts, Julian Pike said that a meeting about this issue had taken place in February. The accounts were not yet completed but work had begun to see what would be needed in order to complete them.

Paragraph 4.2 of the report stated that uncorrected audit misstatements greater than £538,000 would be reported to the Committee. Members were advised that to reduce the threshold for reporting would mean a significant

amount of extra work for the auditors and this would then have to be reflected in the audit fee.

With regard to a query about who audits the auditors, (paragraph 5.2) members were advised that they work to internal ethical standards but are also inspected by Institute of Chartered Accountants in England and Wales (ICAEW) (the successors to Financial Reporting Council) as well as external regulatory bodies.

The external auditor explained that the Audit Letter seeking assurances has to be signed by the Chair of this Committee after 31 March and the audit will not be completed until that is done. The external auditor said that a copy of the Audit Letter would be sent to Committee members.

In response to a query about the second bullet point on page 23, this was a reference to the performance management reports that come to the committee on a regular basis. In future these reports will have a front sheet that will make it clear which departments have provided the information requested and which have not.

External Audit would raise any issues they had concerns about.

A significant risk was also identified under the heading Value for Money Audit which is focussed around the Council's arrangements to ensure decision making is properly informed. More detail about this is contained in Section 3 of the Plan. Ms Taylor said that the auditors were aware that there are many changes occurring across the organisation at present and that external audit want to ensure everything is in place to manage these changes and to check that the Council is getting value for money.

With regard to audit fees, these had been set in accordance with the PSAA scale fee. Ms Taylor said that additional fees could be incurred if the auditors had correspondence with members of the public as had happened during the last year as an objection had been received. It was not possible to charge the individual/s concerned and although members of the public could be advised how much the objection cost, the name of the person/s concerned could not be disclosed.

With regard to Private Finance Initiative (PFI) mentioned on page 20, the external auditor said they would be looking at 2 PFIs this year and would be doing more in depth work than last year.

The Chair thanked the external auditors for their report and for tailoring it to Portsmouth.

22. Treasury Management Policy 2017/18 (AI 6)

(TAKE IN REPORT)

The purpose of the report is to obtain the Council's approval for 2017/18 to the Treasury Management Policy Statement which includes the Annual Minimum

Revenue Provision for Debt Repayment Statement and the Annual Investment Strategy.

A discussion took place in relation to paragraph 8.4 concerning the Annual Minimum Revenue Provision (MRP) for debt repayment. Officers confirmed that the Council's policy on MRP for debt repayment was in line with government guidance and is also prudent as the debt cannot be paid off early without incurring a penalty. Officers said that the Council is providing for repayment of the debt through its assets. There is no specific loan for individual assets - there is a pool of debt. When an asset is acquired through borrowing, money is set aside throughout the asset's economic life to repay the debt. The Council maintains a pool of debt and loans are not linked to individual assets. If the asset's economic life is shorter than the Council's debt maturity profile, the funds set aside may be used to provide the cash flow to acquire a further asset".

In response to queries, the following matters were clarified

- With regard to investing in universities, there is no specific government guidance about this. The Council is able to decide what it invests in and this achieves diversity of investments -it is not an investment to build assets.
- With regard to 3.1d (iv) concerning buying and selling foreign currency, members asked about the volatility of these markets. Officers said that the council does not seek speculative returns in the foreign currency markets but sometimes contracts are denominated in foreign currencies - usually concerning the port, and it can be beneficial to buy Euros early to fund these projects and avoid the associated currency risk.
- With regard to page 63, item 10, the fee paid to these consultants is around £5 - £6k per annum.
- With regard to page 73, it was confirmed that MMD does not have a credit rating but it is a company that the Council owns and controls. Lending to MMD is through the Capital Programme. The City Solicitor confirmed that proper commercial rates are being repaid in a proper way.

RESOLVED that the recommendations set out in paragraphs 3.1a) to e) and 3.2(i) to (iv) be noted.

23. Audit Performance Status Report for Audit Plan to 6 February 2017 (AI 7)

(TAKE IN REPORT)

The Chief Internal Auditor introduced the report which updates the Committee on the internal audit performance for 2016/17 to 6 February 2017 against the Annual Audit Plan, highlight areas of concern and areas where assurance can be given on the internal control framework. She advised that Appendix A shows the areas of assurance on audits completed since the last meeting and Appendix B shows the results of follow-up audits.

In response to queries

- In relation to paragraph 5.3.1, the committee was advised that schools are not obliged to come to the City Council to complete their audits.
- The Chief Internal Auditor considered the process to be robust enough as deferment is usually for a reason such as the implementation of a new system. For internal clients, the audit is never removed - just deferred and if there was any suspicion that anyone wanted to hide something, a conversation would take place with the director concerned. The Chief Internal Auditor had no recollection of this ever having occurred though. Any deferral request is usually as a result of organisational change. There have been occasional instances where Internal Audit have refused to defer an audit.

The Chief Internal Auditor said that the Council generally responds well to areas of concern. With regard to the significant cuts that have been made, extra layers of control have been introduced to cope with the shift in responsibilities and the impact on the internal control environment. Members asked what assurances could be given to ensure the Council is coping with the changes. The Director of HR, Legal and Performance said that much work is going on in this regard. He was confident that through the EBS system and risk management, directors and managers are aware of their responsibilities. He said it was important that the Chief Internal Auditor, the Corporate Performance Manager and the Assistant Director of Contracts, Procurement and Commercial are all alert to these risks. The City Solicitor said that where audits show "no assurance" they are prioritised and matters are dealt with quickly by highly competent staff. A follow up audit is also carried out. With regard to Children's and Adults' Services, there are regulatory bodies such as Ofsted which have more onerous requirements to be fulfilled than within the City Council so this acts as an additional safeguard.

RESOLVED that Members noted

- (1) the Audit Performance for 2016/17 to 6th February 2017**
- (2) the highlighted areas of control weakness for the 2016/17 Audit Plan**

24. Quarterly Performance Management Update (AI 8)

(TAKE IN REPORT)

The report is part of the regular series of quarterly reports highlighting significant performance issues across the organisation and the first compiled against the areas identified in the previous baseline report presented to the committee in June 2016.

During discussion

- It was suggested that the appendices should be shared with the individual portfolio holders in some way - perhaps informally on a regular basis and depending on the portfolio holder, could be taken to their decision meetings.

- It was suggested that perhaps too much information was contained in the report and that consideration could be given to focusing on two directorates at each meeting. No decision was taken on this.
- It was suggested that perhaps directors could peer review one another's directorate's performance. No decision was taken on this.
- Members were concerned that educational standards in the city were not consistently good. Faith schools reached higher educational attainment than other schools in the area and members wanted to know what could be done to improve the situation.

Section 4 of the report is set out below as the proposed next steps form part of the recommendations.

1. As reported, improvements to reporting have been made since the last quarter. The summaries now focus much more strongly and analytically on the core performance indicators, and include a sharper focus on risks and projects. This will continue to be developed for the next quarter.
2. The next significant development for reporting will be the inclusion of reporting from Portsmouth International Port.
3. It is also necessary to consider more strongly the external perspective in the reports - currently these are focused on internal organisational process and more could be done to explore what this is achieving from a customer perspective.
4. Presentationally, future reports will include a table of contents and confirmation of when the last report was submitted when there are any omissions.

RESOLVED that the Committee

- 1) **noted the report;**
- 2) **noted the overall improvement in quality of reports and the commentary from the Deputy Chief Executive at section 5**
- 3) **commented on the performance issues highlighted in section 3, including agreeing if any further action is required**
- 4) **Agreed the actions proposed in section 4**

25. Member Training - Information Report (AI 9)

(TAKE IN INFORMATION ONLY REPORT)

The Chair agreed to vary the order of the agenda to take this item immediately after agenda item 5, but the item is being minuted in the order it appeared on the agenda.

A deputation on this item was made by Ms Hilary Reed and included the following

- A request for specific inclusion of public sector equality duty training in the councillor training programme.
- Her experience and monitoring of Council performance of the equality duty is of inconsistent application and also inconsistencies among councillors either to challenge or support EIAs

During discussion

- It was confirmed that members were aware of their duty to look at EIAs and this is part of their initial training. The EIA process was the subject of a report in November and the Chair said the committee had agreed to receive an annual summary report on the process.
- It was confirmed that this report was about training in general.
- Members agreed that training should be of a good standard and that this was not always the case.
- Members were concerned that there were members who had not received training on some things. They considered that more dates and times should be offered.
- Members said that there were no sanctions if they did not attend training other than not being allowed to sit on certain committees until they had received the training. Some training was too general for this sanction to apply.

Members asked that a more detailed decision report about member training should be brought to the next meeting to try to address some of the feedback that had been provided.

26. Independent Remuneration Panel (AI 10)

The City Solicitor introduced this item.

Under the Local Authorities (Members Allowances) (England) Regulations 2003, Portsmouth City Council is required to have an Independent Remuneration Panel to review the Members' Allowances Scheme. Where an Authority has regard to an index for the adjustment of allowance (as is the case with this Authority) where the scheme is linked with any annual adjustment which the officers receive, it must further review the scheme within a four year period.

In accordance with recommended practices, an Independent Remuneration Panel was formed to review the Portsmouth City Council Members' Allowances, as set out in the Constitution.

The following documents were circulated:-

- Membership details of the Independent Remuneration Panel (IRP)
- A summary of how those authorities who provided responses to the 2016 South East Employers' Survey index- linked their schemes, if at all.
- Recommendations from the Independent Remuneration Panel (IRP) that had met in February 2017.

The City Solicitor explained the process for the review which was to adopt a two stage process. The first stage was to recommend that members receive an index-linked increase in line with Portsmouth City Council staff pay awards. The second stage was to carry out a general review of the Members' Allowances Scheme with a view to making further recommendations (via Governance & Audit & Standards Committee) to a future Council meeting.

A short discussion took place during which

- it was confirmed that reviews have to take place

- it was confirmed that the Council was the body that had power to adopt the index-linked arrangement with staff pay awards but that the recommendation had to be made via this Committee.
- Members expressed differing views on whether or not they should accept any increase.

RESOLVED that Governance & Audit & Standards Committee

- (1) Noted the Independent Remuneration Panel's decision to adopt a two stage approach in their review of the Members' Allowances Scheme**
- (2) Recommended to full Council that the first stage (to continue to apply to Members' Allowances the index-linked arrangement with Portsmouth City Council staff pay awards) be adopted at the Council meeting on 21 March 2017.**

The meeting concluded at 1.00 pm.

Chair

David Williams
Chief Executive
Portsmouth City Council
Civic Offices
Guildhall Square
Portsmouth
PO1 2AL

21 April 2017

Direct line: 07974 007332

Email: hthompson2@uk.ey.com

Dear David,

Annual Audit and Certification Fees 2017/18

We are writing to confirm the audit and certification work that we propose to undertake for the 2017/18 financial year at Portsmouth City Council.

From 1 April 2015, the duty to make arrangements for the audit of the accounts and the certification of relevant claims and returns and to prescribe scales of fees for this work was delegated to Public Sector Audit Appointments Ltd (PSAA) by the Secretary of State for Communities and Local Government. In October 2015, the Secretary of State confirmed that the transitional arrangements would be extended for one year for audits of principal local government bodies only, to cover the audit of the accounts for 2017/18. The audit contracts previously let by the Audit Commission and novated to PSAA have therefore also been extended for one year to give effect to this decision.

From 2018/19, new arrangements for local auditor appointment set out in the Local Audit and Accountability Act 2014 will apply for principal local government and police bodies. These audited bodies will be responsible for making their own arrangements for the audit of the accounts and certification of the housing benefit subsidy claim. The PSAA will play a new and different role in these arrangements.

Indicative audit fee

For the 2017/18 financial year, PSAA has set the scale fee for each audited body, following consultation on its' Work Programme and Scale of Fees. There are no planned changes to the overall work programme for 2017/18. It is therefore proposed by PSAA that scale fees are set at the same level as the scale fees applicable for 2016/17. These fees reflect the significant reductions made to scale fees since 2012/13.

The fee reflects the risk-based approach to audit planning set out in the National Audit Office's Code of Audit Practice for the audit of local public bodies.

The audit fee covers the:

- audit of the financial statements;

- value for money conclusion; and
- whole of government accounts.

For Portsmouth City Council our indicative fee is set at the scale fee level. This indicative fee is based on certain assumptions, including:

- the overall level of risk in relation to the audit of the financial statements is not significantly different from that of the prior year;
- officers meeting the agreed timetable of deliverables;
- the operating effectiveness of the internal controls for the key processes identified within our audit strategy;
- we can rely on the work of internal audit as planned;
- our accounts opinion and value for money conclusion being unqualified;
- appropriate quality of documentation is provided by the Council;
- there is an effective control environment; and
- prompt responses are provided to our draft reports.

Meeting these assumptions will help ensure the delivery of our audit at the indicative audit fee which is set out in the table below.

As we have not yet completed our audit for 2016/17, our audit planning process for 2017/18 will continue as the year progresses. Fees will be reviewed and updated as necessary, within the parameters of our contract.

Certification fee

The PSAA sets an indicative certification fee for housing benefit subsidy claim certification work for each audited benefits authority. The indicative fee for 2017/18 will be based on actual 2015/16 benefit certification fees. As not all 2015/16 benefit certification fees have been finalised by PSAA at the time of writing, they have not yet set the 2017/18 certification fees.

The indicative certification fee is based on the expectation that an audited body is able to provide the auditor with a complete and materially accurate housing benefit subsidy claim with supporting working papers, within agreed timeframes.

The indicative certification fee for 2017/18 relates to work on the housing benefit subsidy claim for the year ended 31 March 2018. We will set the certification fee at the indicative fee level. We will update our risk assessment after we complete 2016/17 benefit certification work, and to reflect any further changes in the certification arrangements.

Summary of fees

	Indicative fee 2017/18 £	Planned fee 2016/17 £	Actual fee 2015/16 £
Total Code audit fee	149,438	149,438	149,438*
Certification of housing benefit subsidy claim	TBC	17,196	17,797

*A scale fee variation for work undertaken in connection with a 2015/16 objection has still to be finalised with the PSAA.

Any additional work that we may agree to undertake for 2017/18 (outside of the Code of Audit Practice) will be separately negotiated and agreed with you in advance.

Billing

The indicative code audit fee will be billed in four quarterly instalments of £37,360. Additionally, we will bill 25% of the indicative certification fee each quarter when it has been determined.

Audit plan

Our plan is expected to be issued in January 2018. This will communicate any significant financial statement risks identified, planned audit procedures to respond to those risks and any changes in fee. It will also set out the significant risks identified in relation to the value for money conclusion. Should we need to make any significant amendments to the audit fee during the course of the audit, we will discuss this in the first instance with the Director of Finance and Information Services and, if necessary, prepare a report outlining the reasons for the fee change for discussion with the Governance and Audit and Standards Committee.

Audit team

The key members of the audit team for the 2017/18 financial year are:

Helen Thompson hthompson2@uk.ey.com Tel: 07974 007332

Executive Director

Jo Taylor jtaylor5@uk.ey.com Tel: 07552 644322

Manager

We are committed to providing you with a high quality service. If at any time you would like to discuss with us how our service to you could be improved, or if you are dissatisfied with the service you are receiving, please contact me. If you prefer an alternative route, please contact Steve Varley, our Managing Partner, 1 More London Place, London, SE1 2AF. We undertake to look into any complaint carefully and promptly and to do all we can to explain the position to you. Should you remain dissatisfied with any aspect of our service, you may of course take matters up with our professional institute.

Yours sincerely

Helen Thompson

Executive Director
For and on behalf of Ernst & Young LLP

cc. Ian Lyon, Chair of the Governance and Audit and Standards Committee
Chris Ward, Director of Finance and Information Services

Agenda Item 6

Portsmouth City Council

Governance and Audit and Standards Committee
Progress Report

June 2017



Building a better
working world

Governance and Audit and Standards Committee
Portsmouth City Council
Guildhall Square
Portsmouth
PO1 2AL

13 June 2017

Audit Progress Report

We are pleased to attach our Audit Progress Report.

This progress report summarises the work we have undertaken since the last meeting of the Governance and Audit and Standards Committee in March 2017. The purpose of this report is to provide the Committee with an update of our plans for the 2016/17 audit, to ensure they are aligned with your service expectations.

Our audit is undertaken in accordance with the requirements of the Local Audit and Accountability Act 2014, the National Audit Office's 2015 Code of Audit Practice, the Statement of Responsibilities issued by Public Sector Audit Appointments (PSAA) Ltd, auditing standards and other professional requirements.

We welcome the opportunity to discuss this report with you as well as to understand whether there are other matters which you consider may influence our audit.

Yours faithfully

Helen Thompson
Executive Director
For and on behalf of Ernst & Young LLP
Enc.

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In April 2015 Public Sector Audit Appointments Ltd (PSAA) issued “Statement of responsibilities of auditors and audited bodies 2015-16”. It is available from the Chief Executive of each audited body and via the [PSAA website](http://www.psa.co.uk) (www.psa.co.uk)

The Statement of responsibilities serves as the formal terms of engagement between appointed auditors and audited bodies. It summarises where the different responsibilities of auditors and audited bodies begin and end, and what is to be expected of the audited body in certain areas.

The ‘Terms of Appointment from 1 April 2015’ issued by PSAA sets out additional requirements that auditors must comply with, over and above those set out in the National Audit Office Code of Audit Practice (the Code) and statute, and covers matters of practice and procedure which are of a recurring nature.

This Annual Plan is prepared in the context of the Statement of responsibilities. It is addressed to the Audit Committee, and is prepared for the sole use of the audited body. We, as appointed auditor, take no responsibility to any third party.

Our Complaints Procedure – If at any time you would like to discuss with us how our service to you could be improved, or if you are dissatisfied with the service you are receiving, you may take the issue up with your usual partner or director contact. If you prefer an alternative route, please contact Steve Varley, our Managing Partner, 1 More London Place, London SE1 2AF. We undertake to look into any complaint carefully and promptly and to do all we can to explain the position to you. Should you remain dissatisfied with any aspect of our service, you may of course take matters up with our professional institute. We can provide further information on how you may contact our professional institute.

2016/17 audit

Financial statements audit

We issued our 2016/17 Audit Plan in February 2017 where we outlined how we intend to carry out our responsibilities as auditor, including our proposed audit approach. Our Plan was presented to the March meeting of the Governance and Audit and Standards Committee.

Interim visit

We carried out our interim visit in February and March 2017, to undertake outstanding documentation and walkthroughs of material systems, complete controls testing and undertake early substantive and value for money testing. We have liaised with Internal Audit and where possible have placed reliance on the testing of controls which they perform in the normal course of their annual plan.

Post Statements audit

We are looking to start our post statements work on the 2016/17 statement of accounts during July 2017.

We will continue to use our computer-based analytics tools to enable us to capture whole populations of your financial data, in particular payroll and journal entries.

We will also review and report to the National Audit Office, to the extent and in the form required by them, on your whole of government accounts return.

Our audit results report, setting out the findings of our work and overall conclusions, will be presented to the Audit Committee at its September meeting. We note that the date for this meeting has not yet been confirmed. However, the meeting must be held before 30 September 2017 to ensure the statement of accounts is approved before the statutory deadline.

We have set out an outline timetable for the audit in Appendix 1.

Value for money assessment

We have identified one significant risk to our value for money conclusion, as reported in our Audit Plan.

We expect to complete our detailed work during our post statements audit visit.

2016/17 Grant Certification Work

Portsmouth City Council will be carrying out initial testing of cases for the 2016/17 housing benefit subsidy claim from June until August 2017. Our repeat performance work will be conducted in October 2017.

We will present our grant claims certification report to the early 2018 meeting of the Governance and Audit and Standards Committee.

Looking ahead

Local appointment of auditors for financial statements audits

As previously reported to the Committee, the Council has joined the PSAA Ltd sector-led process to carry out the procurement and appointment of external auditors on behalf of local government bodies for 2018/19 onwards.

Firms meeting the qualification criteria for the procurement process submitted tenders for the local government audit contract in May 2017. The contract is divided into six lots, with each firm eligible to win a maximum of one lot. The precise make-up of each lot will be determined in the period following the outcome of the tendering process and will be based principally on ensuring auditor independence, trying to achieve continuity of appointed auditor where possible, and appointing a common auditor for bodies with a close association between them.

Tenders are evaluated based on an assessment of audit quality and price, with a 50/50 weighting between these criteria.

The outcome of the tender is expected to be confirmed mid June 2017.

Existing external audit arrangements for the financial statements remain unchanged for the 2016/17 and 2017/18 financial years.

Local appointment of auditors for grant claim certification

As noted above, from 2018/19, the Council will be responsible for appointing their own auditor, including making their own arrangements for the certification of the housing benefit subsidy claim in accordance with the requirements that will be established by the DWP. This process will be outside the PSAA Ltd sector-led process described above, so the Council will need to make its own individual arrangements to appoint an auditor for this work. The appointment process will need to be completed by the end of February 2018.

Further information can be found at:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/585740/s1-2017.pdf

Existing external audit arrangements for housing benefit grant claim certification will remain unchanged for the 2016/17 and 2017/18 financial years.

Appendix 1 – Timetable for the 2016/17 audit

We set out below a timetable showing the key stages of the audit, including the value for money work, and the deliverables we will provide to you through the 2016/17 Committee cycle. We will provide formal reports to the Audit Committee throughout our audit process as outlined below.

Audit phase	EY Timetable	Deliverable	Audit Committee	Status
High level planning and liaison	Ongoing	Audit Fee Letter	November 2016	Complete
Risk assessment and setting of scope of audit	December 2016 – January 2017	Audit Plan	March 2017	Complete
Testing of routine processes and controls	February 2017	Progress Update	March 2017	Complete
Year-end audit	July - August 2017	Audit results report to those charged with governance Audit report (including our opinion on the financial statements and a conclusion as to whether the Council has put in place proper arrangements for securing economy, efficiency and effectiveness in its use of resources) Whole of Government Accounts Submission to NAO based on their group audit instructions Audit Completion certificate	To be confirmed	Not yet started
Annual Reporting	October 2017	Annual Audit Letter	To be confirmed	Not yet started
Grant Claims 2016/17	October 2017	Annual certification report	To be confirmed	Not yet started

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Ernst & Young LLP, 1 More London Place, London, SE1
2AF.

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Title of meeting:	Governance and Audit and Standards Committee
Date of meeting:	30 th June 2017
Subject:	Performance Management update - Q4, 2016-17
Report by:	Director of HR, Legal and Performance
Wards affected:	n/a
Key decision:	No
Full Council decision:	No

1. Purpose

- 1.1 To report significant performance issues, arising from Q4 performance monitoring, to Governance and Audit and Standards committee and highlight areas for further action or analysis.

2. Recommendations

- 2.1 The Governance and Audit and Standards Committee is asked to:
- 1) note the report;
 - 2) note the overall improvement in quality of reports, and the commentary from the Deputy Chief Executive at section 5
 - 3) comment on the performance issues highlighted in section 3, including agreeing if any further action is required
 - 4) Agree the actions proposed in section 4.

3 Background

- 3.1 This report is part of the regular series of quarterly report highlighting significant performance issues across the organisation, and is compiled against the areas identified in 2016/17 baselines report, presented to committee in June 2016.
- 3.2 In compiling reports, directors are asked to consider:
- 1) Priority performance areas
 - 2) Risks
 - 3) Projects
- 3.3 Previous meetings of GAS identified that the reports being received were falling short of the expectations of members, and Directors have been reminded of the expectations. There was a request for more contextualizing information, to allow members to make informed judgements about the information presented. It was

also made clear that the expectation is that reports cover the full breadth of Directorate activity. These messages were communicated to Directors, along with templates tailored to be more specific and ensure that there is broader coverage of activity. Directors have been asked to make use of readily understood RAG (red; amber; green) terminology to describe perspectives where:

- Green is improving; exceeding or on plan
- Amber is no change or some degree of uncertainty about performance
- Red is deterioration; failing to achieve plan; or a high level of concern.

- 3.4 In order to provide more assurance to members around the management of performance, projects and risk, and to enable discussion on these areas, the report is now presented with three appendices, focused on business as usual performance, projects (both business transformational and capital schemes) and risk.
- 3.5 It is clear that from the reports attached at Appendices 1-3 that improvements in quality of reporting continue to be made, and much more detail and analysis is provided. What is notable is that even where service performance can be described more easily in qualitative rather than quantitative terms, there is clear work to place parameters around what the service area is seeking to achieve, and to describe what this looks like, to enable informed discussion.
- 3.6 As is usual, as well as very specific indicators, there are some common themes emerging from the reports, and it worth noting that in some cases these link strongly with areas highlighted in the Annual Governance Statement. The implications of reducing capacity are noted in respect of a number of areas where performance levels may be reducing; but it is worth noting too that in many cases this is highlighted as a price worth paying in order to achieve a reduction in expenditure. Nonetheless, there is a recurrent concern that demand is outstripping capacity to respond. There is clearly a need to ensure that there are clear plans for the resilience of the business; a number of directorate reports make reference to this, including in terms of skills and workforce, and are reviewing services to achieve these. This work also includes reviewing service delivery to ensure statutory provision and provision for the most vulnerable is protected.
- 3.7 The reporting of risks has also moved on, and there is good development in terms of categorising risk likelihood and impact. Of note are significant risks flagged to the Committee for the first time by Adult Social Care.
- 3.8 Governance and Audit and Standards Committee are asked to consider the issues above, and also the summary highlight reports attached at Appendices 1-3, and agree where any further information or action is required.
- 3.9 The committee are also asked to note the contents of Appendix 4. This is a summary of monitoring and proactive activity in relation to asbestos and legionella monitoring in 2016 and is presented to the committee to provide assurance on these important areas of corporate responsibility as agreed in previous discussions relating to the Annual Governance Statement.

4. Next steps

- 4.1 As stated, improvements to reporting have been made since the last quarter. The summaries now focus much more strongly and analytically on the core performance indicators, and include a sharper focus on risks and projects. This will continue to be developed for the next quarter.
- 4.2 However, whilst the information provided is very extensive, the recent work by Internal Audit highlighted that the Directorate-specific nature of the reports does not necessarily help members to see which are the highest areas of impact in terms of achieving against the objectives of the organisation; and also noted that there are risks in terms of information that is missing, or difficult to triangulate.
- 4.3 The end of a reporting cycle provides an opportunity for the members of GAS to consider if there are changes they would wish to see to the content and format of reporting, and to set expectations for the coming year.

5. Comments from the Deputy Chief Executive

- 5.1 Reports that have been received continue to improve in quality and provide greater assurance around organisational performance than has previously been the case. The clarity of expectation from members of GAS in achieving this has been very helpful for all concerned.
- 5.2 The content of the reports clearly highlights service specific issues and allows wider themes to be discerned, which is helpful for the committee in identifying issues relating to the wider governance of the organisation. In general terms, the report shows that there are challenges associated with the ongoing reduction of resource and capacity, but that the impacts of these are being effectively mitigated as far as possible.
- 5.3 Some information from the Property directorate and the Port has been submitted for the first time in a considerable period. However, the report from the Property directorate does not cover issues of risk, and is extremely partial in terms of the areas of responsibility addressed. This is a significant ongoing gap in terms of the assurance the committee can derive around the management of performance, projects and risk in the organisation.
- 5.4 A report for the Directorate of Regulatory Services and Community Safety is included, although this directorate has now been disbanded, with areas of responsibility moved to other directors for management. Given the timing of this, it has made sense to present the report in the 'old' format, with returns from the relevant third tier managers provided. The functions will be incorporated in the reports for the new home directorates in the 2017/18 reporting structure.

6. Equality impact assessment (EIA)

6.1 Any equality matters arising through performance or value for money consideration will be considered as a discrete process, as separate EIAs will be completed for these areas of work.

7. Legal Implications

7.1 The report has incorporated legal implications and accordingly there are no other immediate legal implications arising from this report.

8. Finance Comments

8.1 There are no financial implications to bring to member’s attention at this stage. However, it should be noted that there could be further financial implications following further exploration of any of the performance issues raised in this report, and related future reports could result in financial implications. These will be flagged to members at the appropriate time.

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Signed by: Jon Bell, Director of HR, Legal and Procurement

- Appendices:**
- Appendix 1- Summary of directorate performance issues, Q4**
 - Appendix 2 - Summary of projects**
 - Appendix 3 - Summary of risks**
 - Appendix 4 - Asbestos and legionella monitoring summary**

Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location

Appendix 1: Directorate
Performance Reports Q4 2016-2017
(January 2017 – March 2017)

**Children's Services Q4
(January 2017 – March 2017)
Director: Alison Jeffery**

Children's Services : Quarterly progress report (1)

Function : Early Help and System Transformation (including Troubled Families)

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Commissioning and outcomes framework in place and delivered		In Progress	On track for completion		Completed	n/a	A new set of KPIs have been agreed for health visiting and school nursing; the intensive family support service has been retendered on a new KPI set; and KPIs are in place for the new city council targeted early help service. This will not need to be a separate line in the progress reports for 17/18
Increase in Single Assessment Frameworks	618 SAFs in 2015/16	207	135 (28 x SAF assessments and 107 x SAF reviews)	100 (24 x SAF assessments and 76 x SAF reviews)	183 (98 x EHA and 85 reviews)	Stable	There has not been an increase in 16/17 (625 as against 618). The restructuring and recommissioning this year creates the foundation for an increase in 18/17 but this will need close monitoring.
Number of trained family key workers	15	15	30.1	30.1	45	Improved	Restructuring of city council early help has created more capacity. This will not be monitored in 17/18
Number of families receiving targeted Early Help	n/a	Work well advanced and to be complete for end of 2016/17: new detailed performance framework agreed for both health visiting and early help services; clear commissioning responsibilities established					A new case management IT system was established in Q4 and is currently being populated. The expectation is that we will have reliable snapshot data on this indicator by June 2017. It will be monitored in 17/18.
% of ongoing social care cases with previous targeted Early Help Support	20%	Six monthly data			24% (rolling) monthly average	Stable	The lack of increase against this indicator reflects the low level of recorded targeted early help in 2016/2017. It will continue to be monitored in 2017/2018
At least 973 families attached to the Troubled Families programme by 31/03/17	387 families (March 16)	434 families (June 16)	478 families (Sept 16)	595 families (Dec '16)	1060 families (Mar 17)	Improved	A significant increase in families attached was achieved in Q4 through a determined approach to recording within the programme family support provided through a range of agencies. Continuing to attach new families at the rate required for the 5 year programme will be a challenge but should be supported by the 16/17 restructuring and recommissioning.
At least 309 Troubled Families PbR claims in total to have been made by 31/3/17	15 PbR claims made (March 16)	No PbR claims made in Q1	15 PbR claims made (Aug 16)	No PbR claims made in Q3	No PbR claims made in Q4	Stable	Processes are currently being set up to capture progress across the full set of families receiving targeted early help and social care, which should result in a significant number of PbR claims in 17/18. This will be monitored closely in 17/1

Children's Services : Quarterly progress report (2)

Function : Children's social care – assessment and intervention

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 Position	Trend	Director's Year End Commentary
Audit activity confirms compliance with MASH "front door" arrangement	Limited assurance	Reasonable assurance	No new measurement	No new measurement	See commentary		Multi-agency snapshot audit March 2017 offered assurance re information sharing and application of threshold. These indicators will be monitored through on-going quality control rather than through quarterly progress reports
Audit activity confirms that views of/feedback from service users are informing shape of service delivery	90%	90%	No new measurement	No new measurement	See commentary		
Statutory tasks completed in timely way and to high quality eg.							
Initial child protection conferences convened in 15 day timescale	62%	61% (30/49)	88% (51/58)	82% (76/93)	91% (59/65)	Improved	This is an improving position generally. The number of conferences being completed on time is increasing. There was a reduced percentage in quarter 3 but there were significantly more conferences than in the other quarters and therefore more were completed on time although the percentage slightly dropped. This will continue to be monitored
Case in the Public Law Outline and court proceedings are progressed in a timely way, measures through % court cases progressed within 26 week timescale	47%	67% (4/6)	40% (2/5)	58% (7/12)	100% (9/9)	Improved	Cases in PLO and Proceedings are tracked weekly through Legal Privilege Meeting so that any drift is avoided and work is achieved in a timely manner. Achieving proceedings within 26 weeks has increased over the year. The position at end of the year following data cleansing is that In the last 12 months, 77% (37/48) cases were achieved within the 26 weeks. This will continue to be monitored,

Children's Services : Quarterly progress report (3)

Function : Children's Social Care – Youth Offending Team

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director 's Year End Commentary
Transformation of YOT – reducing caseloads	77	80	73	88	89	Worsened	The YOT has had an increase in caseload over the year. There has been an increase in First Time Entrants to the system which follows the pattern in a rise in referrals regarding adolescents through the MASH. This will continue to be monitored
Transformation of YOT – reducing costs	£749,757 annual outturn	£636,800 projected annual outturn	£618,600 Projected annual outturn		£601,500	Improved	Spend has reduced in the YOT but demand for support has increased; the service is very stretched. Spend will not be monitored in 17/18 through this report.
Address first-time entrants to youth justice system (number of first time entrants in the quarter)	13	16	17	30	15	Stable	There has been an increase in first time entrants over the year, but it is positive to note a reduction in Quarter 4 after a spike in Quarter 3. Portsmouth remains slightly above the comparator average. This will continue to be monitored.
Reduce reoffending (data from Youth Justice Board – historical periods)	46% (April 13 –March 14)	47.2% (Jul 13- Jun 14)	45.5% (Oct 13 – Sep 14)	40.7% (Jan 14 – Dec 14)	42.8% (Apr 14 – Mar 15)	Improved	Reoffending rates have started to reduce in Portsmouth, It must be acknowledged that this data is 2 years behind. Portsmouth YOT has just started using a live reoffending Tracker through Core+, the computerised record system. This should be able to provide relevant and up to date information on reoffending when it is embedded. This will continue to be monitored.
Reduce use of custody	1	1	2	2	3	Stable	Use of custody has increased, but remains at very low numbers. With the small cohort of Portsmouth YOT any change can look more dramatic than it is. Over the last 3 years use of custody has continued to reduce. This will not be monitored in 17/18 through the quarterly report.

Children's Services : Quarterly progress report (4)

Function : Looked after children and care leavers

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director 's Year End Commentary
Increase number of in-house foster carers	178	190	181	192	196	Better	Improving trajectory of new foster carers. Strong fostering Brand and has offset a potentially greater dependency on IFA placements. This will continue to be monitored.
Reduce reliance on external foster carers (independent providers)	49	51	51	50	54	down	Significant increase in Unaccompanied Minors (UAMs) has impacted on the IFA numbers. This will continue too be monitored.
Ensure relevant and robust sufficiency plan in place	Sufficiency plan updated May 2016 (This will not be monitored through the quarterly report for 17/18)						
Increase stability in placements	Short-term 15.53% Long-term 54%	Short-term 14.03% Long-term 63.48%	Short-term 14.33% Long-term 66.09%	Short-term 15.32% Long-term 66.96%	Short-term 16.02% Long-term 65.04%	Worsening trend	141 new episodes of care this year and 358 placement moves/changes in the month demonstrates the huge activity involved at A to R. This has inevitably led to higher number of placement changes. Placement stability working group has been re-established.
Number of children subject to child protection plans (and compared to statistical neighbours)	267 Stat. neighbour rate per 10,000 = 63.4	219 PCC Rate per 10,000 = 50	216 PCC Rate per 10,000 = 49.32	241 PCC Rate per 10,000 = 55.02	242 PCC Rate per 10,000 = 55.25	Stable	The number of children on a Child Protection Plan has increased to be closer to last years figure and nearer to the number per 10,000 of stat neighbours. PCC continues to have a lower proportion of the population on a CP plan compared to Stat Neighbours. This will continue to be monitored.
Reduced care periods (measured by average days in care)	0-5 439 days 6-13 1263 days 14+ 2051 days	0-5 378 days 6-13 1233 days 14+ 1533 days	0-5 419 days 6-13 1290 days 14+ 1610 days	0-5 417 days 6-13 1264 days 14+ 1390 days	0-5 391 days 6-13 1279 days 14+ 1340 days	Improving	This is a positive news story. We will continue to monitor this indicator.

Children's Services : Quarterly progress report (5)

Function : Looked after children and care leavers

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 Position	Trend	Director 's Year End Commentary
Increase in numbers of children registered as privately fostered	7	4	3	3	3	Stable	This is still a low figure, suggesting registration rates do not fully reflect the reality on the ground. This will continue to be monitored.
Increase in numbers of children returning home from care	28/128 (21.9%)	3/32 (9.4%)	7/35 21.21%	5/28 (17.86%)	7/34 (20.59%)	Static	26 of the leavers last year were UAMs (20.47%), if you remove them from the total the result for the year is 21/101 (20.79%) Returned home Other outcomes were 50/101 (49.50%) were adopted, SGO, or CAO made 20/101 (19.80%) became 18 4/101 (3.96%) Recorded as any other reason 2/101 (1.98%) Left care to live with a person without PR (relative, other person or non PR parent) 2/101 (1.98%) Were sentenced to custody 1/101 (0.99%) Independent living - no formal support 1/101 (0.99%) Remand accommodation ended Recently agreed additional funding for reunification project.
Strength and Difficulties Questionnaire (SDQ) scores indicate increased emotional wellbeing	13.9 (stat neighbour avg 15.0 2014/15)	14.2	14.6	14.6	14.4	static	The system recently changed from health team sending out the SDQ forms to Through Care Team. This is a priority for the service. The system is being reviewed to ensure that carers/schools and Social Workers as well as young people receive the tool in advance of the health assessment.
Increase in number of SDQs completed	68.7%	61.8%	72.9%	63.8%	61.6%	static	Focused work is being developed for SDQs. Development sessions in the teams being planned to help staff understand the significance of the SDQ. Exploration of tools that can be used with care leavers(current process is up to age 16) All young people with high SDQ score are referred to CAMHs for assessment.
Adequate move-on accommodation available for care leavers	86%	83%	80%	77.1%	87.9%	improving	Slight improvement in 16/17. We remain concerned about a minority of care leavers who do not have or are unable to maintain adequate accommodation . Work is currently been done with the Housing department to explore options to improve the position. This will continue to be monitored.
Audit activity confirms strength of care planning and pathway planning arrangements with Through Care Team	96%	94%	No further audit activity this quarter	No further audit activity this quarter	No further audit activity this quarter	n/a	Quality will be monitored through the quality assurance framework processes. This will not be reported on through the quarterly reports.

Children's Services : Quarterly progress report (6)

Function : Safeguarding monitoring

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Improved practice demonstrated through audit activity	87%	90%	100%	82%	Not yet available	n/a	The audit sample is relatively small (12 cases per month). Learning from audit informs training and is cascaded through teams. Current high workload levels make it more difficult to embed best practice but key messages are identified for staff. We will continue to report on this.
Percentage of newly-qualified social workers	19.7	19.5	15.6	17.2	17.5	n/a	This remains relatively high and adds to pressure on front line managers. The indicator will continue to be monitored.
Retention of social work staff measured by % staff employed for over 2 years	Data available from Q3			64%	62%	n/a	This has slightly decreased in Q 4 in line with the slight increase of newly qualified social workers. Generally this is a positive picture . We will continue to monitor this as a key stability indicator.
Number of referrals to Local Authority Designated Officer	39	40	32	60	32	stable	This remains relatively stable; an increase in quarter 3 post the summer holidays is to be expected. This will continue to be monitored.
Number of issues resolved through challenge and escalation process	6	10	5	6	3	reduced	This is low and the process is being reviewed and relaunched to improve use of it. We will continue to report quarterly.
Number of staff accessing Social Work Matters Skills Academy and feedback	2	0	19	17	0	n/a	The academy ran Sept – Dec in 2016 and is planned to repeat this format in 2017. This allows for one group to complete the programme together. Detailed feedback from the 2016 cohort and their supervisors is being collated to inform the 2017 training programme. We will continue to report.

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Children's Services : Quarterly progress report (7)

Function : Education – inclusion

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
No. of SEN statements/EHC plans (% of SEN statements/EHC plans)	935 3.1%	Data not available	Data not available	Awaiting data	Awaiting data		
% of CYP (0-25) transferred from SEN statements to EHC plans	7.7%	Data not available	Data not available	Awaiting data	Awaiting data		
% of new EHC plans issued within 20 weeks (excluding exceptions)	84%	80%	86%	Awaiting data	Awaiting data		
% PEPs completed on time	62%	83%	97%	98%	Awaiting data		New indicator method: with data collected termly. Q3 values relate to autumn term 2016. Q4 values spring term 2017 - which is still underway at time of collation. Overall performance is much improved. This will continue to be monitored.
% Pathway plans completed on time	80%	70%	80%	Awaiting data	83%	Improving	This will continue to be monitored
Overall absence from primary schools (Number in brackets is national average)	4.3%	Available next quarter	4% (3.9%)	Available next quarter	4.1% (4.0%)	Improving	Situation improving but not as fast as national rate. Note: primary school absence rates are improving faster than secondary. This will continue to be monitored.
Overall absence from secondary schools (Number in brackets is national average)	6.4%	Available next quarter	5.9% (5.0%)	Available next quarter	6.2% (5.2%)	Improving	Situation improving but not as fast as national rate. N.b. primary school absence rates are improving faster than secondary. This will continue to be monitored.
Persistent absence from primary schools (Number in brackets is national average)	2.3%	Available next quarter	9.4% (8.8%)	Available next quarter	8.8% (8.2%)	New indicator	The indicator for PA has changed from 15% of possible sessions in 2014/15 to 10% for 2015/16, hence the increase. This will continue to be monitored.
Persistent absence (PA) from secondary schools (Number in brackets is national average)	7.3%	Available next quarter	17.6% (12.3%)	Available next quarter	17.7% (13.1%)	New indicator	The indicator for PA has changed from 15% of possible sessions in 2014/15 to 10% for 2015/16, hence the increase. This will continue to be monitored.

Children's Services : Quarterly progress report (8)

Function : Education – inclusion

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
No. of Permanent exclusions from school (Previous year's figure in brackets)	5	2	1 (3)	7 (10)	4 (6)	Relatively stable	Permanent exclusions remain low in comparison with statistical neighbours and national averages.
No. of fixed period exclusions from school (Previous year's figure in brackets)	620	454	211 (153)	383 (547)	599 (572)	Improved	Whilst we can see a slight increase in quarter 4, there is approximately a 14% decrease in fixed period exclusions this academic year compared to last. Individual school increases will be monitored by the behaviour and attendance group. We will continue to report through quarterly monitoring.

Children's Services : Quarterly progress report (9)

Function : Education – sufficiency, participation and resources

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Completion of 1000 place school rebuild of King Richard School by September 2017	Building works on site	Building works on site and on schedule	Building works on site and on schedule	Building works on site and on schedule	Building works on site and on schedule	On track	Progress as expected with this scheme and due to complete in September 2017. We will not need to report on this in 2017/2018/
Rebuilds and refurbishments for Beacon View, Arundel Court and Mayfield School	All with EFA for analysis	All at options appraisal stage	All at options appraisal stage	All at options appraisal stage	Options appraisal stage with EFSA – awaiting feedback – due in Q1	Near completion of appraisals	Scheme are being managed and delivered by the Education Skills Funding Agency. All schemes are at options appraisal stage . Progress has been slower than anticipated , although indications are that the appraisal is nearing completion. We will continue to report quarterly.
Completion of priority capital works to address urgent condition issues (school modernisation programme 2016/17)	Schemes underway	Schemes underway	Schemes underway	Schemes underway	Schemes underway	<p>All condition projects are progressing well or completed. There are no significant issues, aside from pressure on funding.</p> <p>All primary phase 2 sufficiency schemes are progressing well or have been completed.</p> <p>All secondary phase 1 sufficiency schemes are progressing well or have been completed.</p> <p>Secondary sufficiency Phase 2 programme has begun with feasibility studies being undertaken focusing on The Portsmouth Academy, Admiral Lord Nelson School and Charter Academy. £2.96m of secondary school basic need funding has been allocated for 2019/2020. It is hoped that a similar level of basic need funding will also be allocated in 2020/21 and 2021/22. A paper will be brought forward to lead member decision making outlining the 3-year secondary strategy to meet increasing pressure for secondary places, so that the LA can meet it's statutory duty.</p> <p>Prioritisation is being given to complete the remodelling of Cliffdale Primary for which there is sufficient funding. Funding is still required to complete the Redwood Park Project.</p> <p>We will continue to report on capital programmes in this report.</p>	
Primary sufficiency Phase 2 – deliver an additional 600 school places (Northern Parade, Craneswater, Langstone, Moorings Way, Arundel Court, Newbridge)	Schemes Underway	Schemes Underway	Schemes Underway	Schemes Underway	Schemes Underway		
Secondary sufficiency Phase 1 – provision of additional secondary school places to create 2-3% surplus in the short to medium term (Springfield, Miltoncross, St Edmund's, The Portsmouth Academy)	Feasibility to increase by Sept 17	Work underway and on track	Work underway and on track	Work underway and on track	Work underway . Minor delay at Springfield.		
Remodelling of Special School provision at Cliffdale and Redwood Park Schools	Feasibility underway	Detailed design is underway	Detailed design is underway	Detailed design is underway	Detailed design is underway. Cliffdale project is progressing.		

Children's Services : Quarterly progress report (10)

Function : Education – sufficiency, participation and resources

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
University Technical College completed by summer 2017 – to open in Sept 2017	Work underway	Construction commenced and on track	Construction in progress and on track	Construction in progress and on track	Construction in progress and on track	On track	Scheme is on track and the admission numbers for September 2017 are healthy. We will not need to report on UTC construction in 17/18.
Refurbishment of Vanguard Centre and relocation of Harbour @Fratton and Harbour @Milton by September 2017	Initial feasibility complete	Feasibility being reviewed in discussion with Delta	Detailed design is underway	Detailed design is underway	Detailed design is underway	On track	Detailed design will be completed in Q1, and it is expected that the project will go out to tender during Q2. The scheme is due to be completed ready for the 2018/19 academic year. We will continue to report quarterly.

Children's Services : Quarterly progress report (11)

Function : Education – sufficiency, participation and resources

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director 's Year End Commentary
Implementation of NEET and post-16 Strategy, measured by:							<p>Continued progress has been made in reducing the number of young people who are NEET. Action to reduce the number of young people who are unknown has been particularly successful South Downs/Havant, Highbury and Portsmouth Colleges and 10 secondary schools are participating in the Youth NEET Prevention Programme for 2017/18. We will continue to report through 17/18.</p> <p>KS5 Level 2 and Level 3 results in 2016 were impacted by the KS4 results of that cohort.</p> <p>There is an improving trend for starts at intermediate and advanced level. The Apprenticeship strategy also has a focus on success rates which will be reported in Q1 May 2017.</p>
% 16-18 year olds NEET	4.5%	4.4%	3.8%	3.8%	3.7%	Improving	
% 16-18 year olds unknown	1.7%	1.2%	6.7%	4.4%	0.8%	Improving	
% participation in education/training at age 16	93.5%	92.9%	88.7%	91.4%	95%	Improving	
% participation in education/training at age 17	86.1%	86.0%	81.1%	83.5%	86.8%	Improving	
Achievement of Level 2 (including English and Maths) by 19	61.7% (2015)	55.5% (annual indicator - 2016 final)				Declining	
Achievement of Level 3 by 19	49.5% (2015)	43.5% (annual indicator - 2016 final)				Declining	
Implementation of Apprenticeship Strategy , measured by:							
No 16-18 starts at Intermediate level	370 (2014/15)	290 (Aug 2015-April 2016)	Data not available	570 (Aug 16 – Jan 2017)		Improving	
No. of 16-18 starts at Advanced level	140 (2014/15)	110 (Aug 2015-April 2016)	Data not Available	410 (Aug 16 – Jan 2017)		Improving	
16-18 Apprenticeship success rate	77% (2015)	Annual data not yet available (due May 2017)					

Children's Services : Quarterly progress report (11)

Function : Education – school improvement

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Early Years Foundation Stage - % achieving Good Level of Development	69% (2015)	69.7% (annual indicator - 2016 final)				Above national average but gap has closed	New accountability measures for KS1, KS2 and KS4 mean that comparisons cannot easily be made with previous years. However, the outcomes for 2016 show that Portsmouth has fallen further behind the national average for both KS1 and KS2 attainment and progress. At KS4 the gap between Portsmouth and the national average has closed for A*-C in English and maths.
Year 1 Phonics Screening % working at the standard	74% (2015)	81% (annual indicator - 2016 final)				Major Improvement, now in line with national	
KS1 Reading, Writing and Maths combined % at least expected standard	New indicator	59% (annual indicator - 2016 final)				No national figure for this published by DfE.	Through the Portsmouth Education Partnership (PEP) the shadow operational group concluded an analysis of the 2016 outcomes against agreed criteria in Q3. This determined school improvement support in 2016/17 for LA maintained schools and flagged areas of concern for MATs / academies. All Priority 1 and 2 schools have now been visited with support in place for all of them. Some Priority 3 schools have been contacted. This will be completed in Q1 of 2017/18..
KS2 Reading, Writing & Maths - % at least expected standard	New indicator	48% (annual indicator - 2016 final)				Considerably below national	
KS2 Reading Average Progress Score	New indicator	-1.5 (annual indicator - 2016 final)				Sig below national average	
KS2 Writing Average Progress Score	New indicator	-1.3 (annual indicator - 2016 final)				Sig below national average	The Government has announced a bidding opportunity under the Strategic School Improvement Fund. First round of bids to be submitted in Q1. This is a significant opportunity for the PEP which the Teaching School will be co-ordinating on behalf of the PEP. This will complement and enhance the current school collaborative programme in Portsmouth.
KS2 Maths Average Progress Score	New indicator	-1.7 (annual indicator - 2016 final)				Sig below national average	
KS4 % 5 A*-C including English and maths	50.7% (2015)	52.6% (annual indicator - 2016 final)				Improving	
KS4 A*-C English and maths	52.6% (2015)	58.3% (annual indicator - 2016 final)				Change in indicator definition for 2016	Ofsted judgements for 2016/17 have been very positive. Only one school (St Jude's) has moved from Good to RI. All others have either moved from RI to Good (e.g. Mayfield), stayed as Good (e.g. Craneswater Junior) or Outstanding (e.g. Mary Rose Academy), or moved from Good to Outstanding (e.g. Cliffdale Primary)
KS4 Attainment 8	New indicator	46.3 (annual indicator - 2016 final)				Well below national	

Children's Services : Quarterly progress report (11)

Function : Education – school improvement

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
KS4 Progress 8	New indicator	-0.17 (annual indicator - 2016 final)				Sig below national	As set out on previous page
% entered EBacc	36% (2015)	37.9% (annual indicator - 2016 final)				Improving, above national	
% achieved EBacc	19.7% (2015)	18.9% (annual indicator - 2016 final)				Well below national	
% schools judged to be good or better (of those schools that have been inspected)	85.5% (March 2016)	84% (June 2016)	84% (September 2016)	84% (December 2016)	84% (March 2017)	Steady	

**Adults' Services Q4
(January 2017 – March 2017)
Director: Innes Richens**

Adults' Services : Quarterly progress report (1)

Function : Residential, Nursing and Domiciliary care

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Director's Year End Commentary
<p>Portsmouth has residential care beds available for those who are unable to live in their own home</p>	<p>New measure for ASC returns</p>			<p>Outstanding – 0.0% Good – 14.6% Requires improvement – 27.1% Inadequate – 2.1% No published rating – 56.3%</p> <p>From a CQC standards perspective (as of 1st November 2016) there are a number of homes requiring improvement with 2 nursing homes in special measures</p>	<p>Outstanding – 0 Good – 12 homes Requires improvement – 15 homes Inadequate – 2 homes No published rating – 20 homes</p> <p>From a CQC standards perspective there remains 2 nursing homes in special measures .</p> <p>Discussions regarding formation of a Care Home Support team with GPs linking to homes is being taken forward as part of MCP developments.</p>	<p>Portsmouth has not seen any major home closures in 2016/17.</p> <p>Harry Sotnick House has proposed a re-opening after a self-imposed restriction on admissions, this is expected during the first quarter of 2017/18.</p>
<p>Portsmouth has sufficient domiciliary care available to enable people with care and support needs to remain living independently in their own homes.</p>	<p>New measure for ASC returns</p>			<p>There are 20 domiciliary care services registered in Portsmouth, with the Council and CCG commissioning mainly from 8 preferred providers with others used when there are capacity issues.</p>	<p>Demand continues to grow. Local Health provider has proposed to develop End of Life care service to free up community dom care.</p>	<p>Portsmouth has seen two agency closures in 2016/17, carers from these agencies TUPE'd to new/existing providers. Capacity in the city remains tight and new providers rarely accept Council set rates for domiciliary care, which creates budgetary pressures.</p>

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Adults' Services : Quarterly progress report (2)

Function : Carer's Services

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend
Collaborative working with NHS Colleagues	New measure for ASC returns		Progress: Staff induction with PHT staff; Joint working to identify and support carers in AMH settings; E-learning package developed by the Carer's Service in partnership with PHT and Solent; Participation in the Virtual Wards to identify carers and ensure joined up support	E-learning package is being actively used by PHT, Solent and PCC staff. Carers Service Staff are providing ongoing support to PHT and Solent to achieve their organisational goals concerning carers. Please see Carers Service Annual Report for more detail.	There has been significant progress in organisational commitment to identifying, supporting and respecting the role of carers across PHT and Solent. The Carers Service would like to work towards this commitment to be developed in Primary Care to ensure that Carers are being identified and supported across the health and social care system.	
Implementation of the NHS England Carers toolkit	New measure for ASC returns		Progress expected over the next 12 months – embed the work we have done up to this point in terms of collaborative working with NHS colleagues.			
Review of the Carers Assessment process	New measure for ASC returns		As a result of FACE assessment, the decision to reduce the number of Carers Assessment Officers and the impact of a vacancy in the Carers Centre Reception role, there are challenges with capacity in this team, and this is having an impact on the number of carers being identified and the number of assessments being undertaken.	It is expected that the corporate intervention team will be working with the Carers Service to implement a new Carers Assessment Process in the first half of 17/18.		

Function : Integrated Learning Disability Service

Agreed measures of progress

Q4 position
Director's Year End Commentary

Day Service

We have de-commissioned 66% of the in house service much independent sector provision and re-commissioned services that focus on the 4 Preparing for Adulthood outcomes

- **Work**
- **Health**
- **Independence/Learning**
- **Relationships and Community**

We have replaced 'block contracts' where we agree to pay a provider a fixed amount with individual budgets so people can change their Service and the money moves with them. This approach works together with the introduction of a named worker for all service users and a focus on a support plan that identifies clear long and short term, aspirational outcomes for people. We have moved from a Supermarket model of provision where Day Centres try and do everything to a High Street Model where you go to a particular place for a particular purpose and the focus is on independence and personal development

We are currently reviewing services for people who would be described as 'at risk' under Transforming Care. We will look to integrate into other services where we can and provide specialist provision where we cant

Transition

Transition is perennial concern for young people and their families. Since the Children's Act statements have been replaced by Education Health and Care Plans which from 14 should focus on the 4 Preparing for Adulthood (PfA) outcomes. We have dedicated Transition Workers within the integrated Team and as a National Demonstration site are tackling 3 issues

- **Making sure that EHC Plans identify and support achievement of aspirational PfA outcomes**
- **Using information from planning to inform commissioning particularly for people who may 'fall between stools' for example people with autism**
- **Working with Colleges to make sure transition in and out of College is smooth and that we work together under the umbrella of the EHCP**

The re-design of Day Services supports the PfA focus

We are now a Partners in Policy making pilot working with Education, Portsmouth College and In Control to develop innovative ways of planning and to address many of the issues that affect Transition

Agreed measures of progress

Q4 position
Director's Year End Commentary

Housing & Support

In 2013 we set a target to reverse the res care/supported living ratio 40(SL)/60(Res Care) and we have done that. But often Supported Living is only understood as a service type and we need to make sure that people have as much choice and control as possible and that they are supported to be independent. The Local Government Association is clear that pressure on LD budgets is greater than on any other Care Sector and that the only sustainable approach to tackle this is by supporting people to be independent and part of their Communities

We are addressing 4 key questions

- How do we expand the range of housing and support options?
- How do we support people to explore what is right for them?
- How do we decide what is 'good' and how will we measure it?
- What are the rules around development?

We have had 2 stakeholder conferences to look at this and work is being led by a sub group of the Partnership Board that service users and carers are part of.

Our excellent collaborative relationship with Housing means that we can provide changing options 5 significant housing developments are underway. We are improving the quality of Services in terms of both Accommodation and Support, we are using assistive technology (Just Checking) to further independence, we are moving away from small 2-4 person shared houses for people with complex needs as they are both limiting and expensive, expanding floating support and increasing the number of up to 8 flats with communal areas

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Respite Care

Currently the basic offer is Russets a residential Care Home. Its expensive, it doesn't reflect the range of respite options that people want and it is expected to accommodate emergency placements and a range of needs often which are incompatible. So we are looking to move from a one stop shop to offer a menu

- Gig buddies
- Outreach Support
- Holidays
- Shared Lives

We have converted 2 houses to support emergency placements and provide for people who need a smaller quieter environment. This will be financed by ceasing independent sector respite, reducing cost of staffing that was required because of the unsuitability of Russets for some and by use of Russets by other Agencies

Function : Integrated Learning Disability Service

Agreed measures of progress

Integration

We have an exceptionally able and committed integrated team made up of Nurses, Social Workers, Psychology, Occupational Therapists, Speech and Language Therapy, Psychiatry. Integration is often a challenge but works well. CQC have rated the Service 'Outstanding' which they have stated is not the case in any LD Team in the UK. We have introduced Single line management and a Named Worker system. This reflects an asset based approach. Using a Support Planning tool the Team developed we focus on key outcomes - the things that matter to us all and proactive engagement and planning. This has meant we spend less time attending to what is not working. It also means that when opportunities occur because of the relationship and knowledge the Named Worker has referrals are readily forthcoming

Collaboration

The sixth theme is about doing things together. In terms of Carers - for example - we provide regular meetings and Newsletters. Carers welcome the Named Worker approach and the consistency of someone they know. All new contracts require that providers involve Carers and Service Users is measuring the quality of that service and support Carers and Service users to have their say. We have recently trained Service users and Carers to 'enter and View' for example Stakeholders are also involved in the design of services whether that's sitting down with architects plans or advising re colour schemes and furnishings

We also see providers as partners and have a provider forum and maintain regular contact. We encourage Named Workers to get to know providers well

This all comes together in the Partnership Board which has a very collaborative feel and which monitors the transformation programme as well as being the conduit for stakeholder views

Adults' Services : Quarterly progress report (4)

Function : Safeguarding Adults

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 54</p>	New measure for ASC returns			For the triage function in the Adult Multi-agency Safeguarding Hub (MASH), the team have access to the police, early intervention in psychosis, and the probation service. The team also have access to other systems – SystmOne (mental health), Illy (substance misuse) and some of housing options. This has been useful in enabling intelligence around cases.	The Adult MASH (commenced in April 2015) has all Adult and Children Safeguarding teams in one location in Portsmouth, enabling strategic discussions to happen swiftly for individual cases. This also enables intelligence and action when there is crossover when a vulnerable adult is at risk and a child is at risk in the same family.		
Timely intervention in safeguarding	New measure for ASC returns			The MASH has proved to be successful in allowing risk to be identified and managed quickly via conversations with the police and early intervention team, and instant access to the other systems we have.	<p>What works really well is being able to have instant discussions with the police so that we can quickly decide if there is going to be any criminal investigation /element to any concerns raised, and whether the enquiry will be single agency; or whether there is a need for a joint enquiry under section 42 of the Care Act.</p> <p>The challenge for the future will be whether it is possible to gain a presence from agencies such as Adult Mental Health in the MASH.</p>		

Adults' Services : Quarterly progress report (5)

Function : PCC owned and managed Residential Care

Agreed measures of progress	Baseline as at Q4	Q1 position	Q4 position	Director's Year End Commentary
<p>PCC own and manage 3 residential units for older people with dementia . This section highlights some of the work that is being done directly to the benefit of residents</p>			<p>Wifi will be put into our residential units to enable residents to skype and stay in touch with relatives.</p> <p>Ipads will be introduced into residential units to use as live time reminiscence sessions with residents with a dementia, this will enable the care worker to quickly bring up a picture on YouTube of, (for example) a car or singer from the era the resident remembers which will help facilitate meaningful conversations with residents</p> <p>Residents with a dementia will often become very frustrated when they try a door which is locked and will forget they have tried the door multiple times a day. this can cause distress and challenging behaviour in a resident in a residential care home environment. We have used 'library book' wallpaper to cover store room doors in one of the PCC residential unit as a trial with excellent results, the residents are now not attempting to open the store room doors. This will now be rolled out to the other residential units within PCC</p> <p>People with dysphagia or swallowing difficulties often require pureed diets and can miss out on foods such as biscuits/cheese and crackers etc as these are labelled difficult to puree. PCC has been exploring if pureed/soft diets can be made more appetising and enable residents in care homes to eat foods that are not traditionally pureed. People eat with their eyes, wanting to see food first and then taste. PCC have now employed a Catering manager who will work with cooks across the PCC homes in providing nutritional and appetising foods that still look like and taste like 'normal' food. The anticipated outcome will be an increase in appetite in our residents with a dementia and enable a person centred approach to nutrition of our most frail elderly service users and increase health & wellbeing.</p>	

Public Health Q4
(January 2017 – March 2017)
Director: Jason Horsley

Public Health : Quarterly progress report (1)

Function : Building a healthier city programme

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Develop new workplace incentives to promote employee health and cut sickness related absence Engage local businesses through forum networks to improve employee health and wellbeing and assess workplaces against the WW charter	15 workplaces engaged 1 accredited	20 workplaces engaged 2 accredited	2 further workplaces in line for accreditation for Q3	Forum in November 2016. One small business assessed in November. Kenwood assessed and accredited in January 2017. Total of 4 businesses accredited.	4 businesses assessed through the year. Workplace health position deleted as part of restructure.	Improving	Building a healthier city remains a priority for public health for 2017/18. During 2016/17 local businesses were engaged with the Workplace Charter showing greater awareness and recognition of the link between employee health and reduced absenteeism. Removing this post was necessary in achieving efficiency savings in the public health restructure. By focusing on improving the health of all Portsmouth residents in the coming year we aim to continue to demonstrate our commitment to a healthy workforce.
Ensure impacts on health are considered through implementation of the refreshed Portsmouth plan	Qualitative and quantitative public health evidence for the Placemaking Strategy	Public health evidence to Sustainability Plans	On-going engagement with City Dev Team and Transport to develop PH evidence and joint working	On-going engagement with City Dev Team and Transport to develop PH evidence and joint working	Attendance at City plan and transport workshop. Health impact assessment training planned.	N/A	Our joint working with the City Development Team and Transport has progressed over the last year. We hope to continue to strengthen this relationship through embedding Health Impact Assessments and a Health in All Policies approach. Improving the air quality in Portsmouth is becoming an increasingly important issue and is needed to reduce harmful health consequences, including early death. Public health has contributed to development of the refreshed strategy and we will continue to support implementation over the coming year. Our role in promoting active travel is a key strand in this agenda.
Support transport initiatives to increase the number of people using active travel for everyday trips; reduce RTAs; reduce air pollution	Evidence on the health impacts of air pollution produced for the refresh of the Air Quality Strategy	Joint bid for LSTF funding to improve transport systems that will increase active travel, reduce RTAs and air pollution	Joint bid for LSTF submitted Coordinated response with City Development and Transport on the Friends of the Earth report, <i>Walking in Portsmouth</i> . 1 st Draft of Air quality strategy	Draft of Air Quality strategy completed and awaiting ratification. Decision on bid for LSTF pending.	Attendance at City plan and transport workshop.	N/A	
Develop a health promoting environment that is ecologically and environmentally sustainable	See commentary	-	-	-	-	No Change	
Strengthen and link green and blue infrastructure in the city	See commentary	-	-	-	-	No Change	

Function : Health protection

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director 's Year End Commentary
Support local health resilience planning, for example, hot and cold weather	-	-	-	-	We are working with the emergency planning team to update hot and cold weather plans for Portsmouth	-	-
Screening and vaccination programme							
Cervical screening uptake (PHOF 2.20ii Cervical screening coverage 2015/16)	68.7% (Dec 2015) (PHOF 2.20ii 2015/16 coverage: 68.1% (2014/15: 69.6%))	Not available Coverage: 68.1% (16/17 Q1)	Not available Coverage: 67.4% (16/17 Q2)	Not available Coverage for 16/17 not available yet	Not available Coverage for 16/17 not available yet	n/a	Yea end data awaited to assess progress. The screening and immunisation Public Health England team embedded within NHS England commission these programmes across Wessex. The main public health function is to scrutinise delivery and be assured of plans to improve screening coverage. There is work to be done to improve screening in Portsmouth which the is being taken forward together with the Directors of Public Health in the other local authorities in Wessex.
Breast screening uptake (PHOF 2.20i Breast screening coverage 2015/16)	66.8% (Dec 2015) (PHOF 2.20i 2015/16 coverage: 72.2% (2014/15: 70.6%))	Not available Coverage: 71.7% (16/17 Q1)	Not available Coverage: 70.7% (16/17 Q2)	Not available Coverage for 16/17 not available yet	Not available Coverage for 16/17 not available yet	n/a	Nationally screening and immunisation programmes have been expanding in their aims through introduction of new screening (bowel cancer) or immunisation (flu in children, HPV) delivery – Introducing these has used a lot of the available capacity in the teams – as these new programmes become better embedded we would hope to see capacity released to focus on improving the uptake rates especially in the more deprived areas where low screening rates particularly have been a longstanding problem.

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Public health : Quarterly progress report (2)

Function : Health protection

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director 's Year End Commentary
Screening and vaccination programme							
MMR Uptake at 5 years	90.7%	90.7%	90.8%	90.4%	Not available	n/a	<p>Yea end data awaited to assess progress.</p> <p>The screening and immunisation Public Health England team embedded within NHS England commission these programmes across Wessex. The main public health function is to scrutinise delivery and be assured of plans to improve screening coverage.</p>
Flu uptake in the under 65s	45.7% (15/16)	49.5% (2016/17)				Increased from previous year but remains lower than the 55% uptake ambition	<p>There is work to be done to improve screening in Portsmouth which the is being taken forward together with the Directors of Public Health in the other local authorities in Wessex.</p> <p>Nationally screening and immunisation programmes have been expanding in their aims through introduction of new screening (bowel cancer) or immunisation (flu in children, HPV) delivery – Introducing these has used a lot of the available capacity in the teams – as these new programmes become better embedded we would hope to see capacity released to focus on improving the uptake rates especially in the more deprived areas where low screening rates particularly have been a longstanding problem.</p>
Flu uptake in pregnant women	45.8% (15/16)	54.2% (2016/17)				Increased from previous year but remains lower than the 55% uptake ambition	

Public Health : Quarterly progress report (3)

Function : Starting Well

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Year End Forecast	Director's Year End Commentary
<p>Improve health of the most vulnerable children and young people in Portsmouth : <i>number of families on the Health Visitor Universal Plus (UP) and Universal Partnership Plus (UPP) case</i></p> <p><i>Source: Solent NHS Trust Monthly Dashboard.</i></p>	Developing baseline data in 2016/17	Total UP + UPP 2,159 (data has been revised and current data sources indicates Q1 = 1,221) (UP = 665, UPP = 556)	Total UP + UPP = 1,205 (UP = 652, UPP = 553)	Total UP + UPP = 1,242 (UP = 692, UPP = 550)	Total UP + UPP = 1,115 (UP = 589, UPP = 526)	Trend indicates decrease in numbers but based on this data unable to judge whether this is positive.	<p>Commissioning of 0-19 services has been delegated to children's services under a Memorandum of Understanding. This includes provision of the early help and prevention team which is currently being implemented. As part of this implementation stage, clarity across pathways for young people will be needed and this is being developed jointly with the Children's team and service providers.</p> <p>The aim is to provide services which work in an integrated fashion with the early help offer for the city.</p>
Uptake of the Health in School/College public health programme	Developing baseline data in 2016/17	-	Pilot started with 9 settings will run initially over two terms.	Recommendations from the pilot are informing offer going forward and is due to end at the end of term (Easter)	Project on hold pending early help MOU	N/A	See above
Uptake of young carers assessments	Developing baseline data in 2016/17	-	New assessment and referral processes have been put in place from September 1 st for all new young carers coming into the system (local young carers services merged from this point)	Young carers services are co-locating into the new Early Help offer for the city and will come under a single management structure.	YC assessment process on hold until new early help service is in place.	N/A	See above

Public Health : Quarterly progress report (4)

Function : Living Well

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Increase physical activity levels through sports, play, leisure and recreation, with a focus on people who are inactive	To be developed in 2016/17	41 people have changed from inactive to active status	Only 1 referral specifically for Physical activity as primary reason. Physical activity is part of healthy eating and healthy weight support. 12 people have changed from inactive to active status.	WBS - Only 1 referral for Physical activity as primary reason. This client is still in the middle of intervention.	WBS = 2 referral recorded for Physical Activity Sport England expression of interest submitted	N/A (small numbers)	As a proportion of the total caseload, the wellbeing service have had only a small number of referrals specifically for physical inactivity. However, the service has shown a marked change in activity status of some individuals. The wellbeing service is currently undergoing a Vanguard redesign which will look closely at this, and other, elements of the service. Sport England have put out a number of calls for expressions for interest focused around improving physical activity for defined groups. Public health have led some of these bids and contributed to others, developing partnerships across sectors, leading to real opportunities for change in the City (irrespective of the bid outcomes).
Increase proportion of children and adults who are a healthy weight	<p>Healthy weight pupils: 76.0% Year R 64.8% Year 6 (NCMP, 2014/15)</p> <p>Healthy weight adults 46% of 16+yrs (Lifestyle Survey, 2015)</p>	Reported every 3 to 5 years.	Wellbeing service- 50 people have achieved weight loss of 5% or more	WBS - 74 people were engaged with healthy weight interventions and 40% have achieved 5% weight or more weight loss.	WBS = 107 referrals for Healthy weight; 21 for healthy eating only. Healthy Weight pupils:75.7% year R, 63.8 % year 6 (NCMP 2015/16)	(RAG rating) Amber NCMP years R&6	<p>NCMP data shows the proportion of children achieving a healthy weight in year R and year 6 had remained broadly similar comparing 2015 and 2016 data and is similar to England. In 2017/18, public health is keen to work with schools to encourage initiatives such as the Daily Mile and Golden Mile to help children become more active and for more children to achieve a healthy weight.</p> <p>For adults there is a recognition that delivering individualised services to the large proportion of the population who are overweight or obese is unrealistic, and public health interventions are increasingly going to focus on population level interventions to improve physical activity levels and diets (for example increasing the uptake of active transport in the city).</p>

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Function : Living Well

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Support local communities to create a smokefree culture for Portsmouth	None	Promotion of Smokefree sites across the city	Attended one meeting of NHS Solent Smokefree committee. Given Wellbeing Service Smoking cessation leaflets to be included in the take home drugs for MH in patients in Portsmouth. NHS Portsmouth – obtained list of smoking champions in view of offering smoking cessation training. Focus groups with midwives and pregnant women. Smoking cessation training for Respiratory staff and maternity staff planned.	Wellbeing Service now to be part of the initial booking in service for maternity at PHM. All maternity CO monitors repaired and calibrated and out for use my midwifery services. QA smoke free committee committed to jointly trying to implement smoke free NHS site, at the request of PHE. Green and Clean team successful in implementing 'No Littering' fines in QA grounds, with 44 penalty tickets being issued and one being prosecuted for littering (which includes cigarette ends)	Continuing to work with Maternity and QA smoke-free committee to promote NHS smoke-free sites.	N/A	Important steps have been achieved through on-going work with maternity services and QA hospital, including towards improving the external environment Achieving a reduction in smoking prevalence remains a real challenge for Portsmouth and will be a focus of our work for 2017/18.
Ensure mothers are supported around safe infant feeding with a focus on increasing breastfeeding	38% (% of infants being totally or partially breastfed, recorded at 6 to 8 weeks)	47%	47% (% of infants being totally or partially breastfed, recorded at 6 to 8 weeks)	47% (% of infants being totally or partially breastfed, recorded at 6 to 8 weeks)	45% (% of infants being totally or partially breastfed, recorded at 6 to 8 weeks)	improving	There has been an encouraging increase in the proportion of infants being totally or partially breastfed, recorded at 6 to 8 weeks. Public health will continue to support implementation of the infant feeding action plan.

Public Health : Quarterly progress report (6)

Function : Living Well

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Reduce smoking prevalence in Portsmouth	Wellbeing Service being implemented and now collecting baseline data	Reported annually. 515 setting quit date; 109 4 week quit and 90 of 12 week quit.	280 people referred for smoking and 111 in active interventions. 177 achieved 4 week smoking quit.	WBS – 650 people setting a quit date. 183 have a successful 4 week quit (28%). 23 pregnant women setting quit dates. 2 successfully quit (8.6%)	WBS = 41 referrals for smoking. 126 people setting a quit date. 96 had a successful 4 week quit. PHOF 2015/16 12.7% smoking status at time of delivery	(RAG rating) RED smoking status at time of delivery	See above for description of the wellbeing service and redesign process.
Make Portsmouth a city with an improved reputation, where alcohol is enjoyed responsibly and harm to individuals, families and communities is reduced	320 receiving alcohol treatment and a successful completion rate of 34.7% Wellbeing Service being implemented and now collecting baseline data	274 receiving alcohol treatment and a successful completion rate of 34.7% Wellbeing service delivered: 182 received Alcohol brief advice and 85 received Alcohol extended advice	234 people receiving treatment, successful completion of 31.6%.	181 people receiving treatment, 76 successfully completed treatment. Successful completion rate of 42%	163 people are receiving alcohol treatment, 72 successfully completed treatment. Successful completion rate of 44.2%.	See commentary	We have seen a significant reduction in the numbers of people receiving alcohol treatment in our community service, this is linked to the decommissioning of the Alcohol Interventions Team and other reductions in resourcing across substance misuse services. Although we are working with a lot less people, those we are working with are more likely to complete alcohol treatment successfully (44.2%), up from 34.7% in 15/16. This also compares positively with the England average which is 39.7%

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Public Health : Quarterly progress report (7)

Function : Living Well

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Continue to offer over-40 health checks Page 64	Number of eligible people who were offered a NHS Health Check 2,894 . - Number of people that received a NHS Health Check 1,158 . - Percentage of people that received an NHS Health Check of those offered 40%	Number of eligible people who were offered a NHS Health Check 3,219 . - Number of people that received a NHS Health Check 1,034 . - Percentage of people that received an NHS Health Check of those offered 31%	- Number of eligible people who were offered a NHS Health Check 2,809 . - Number of people that received a NHS Health Check 766 . - Percentage of people that received an NHS Health Check of those offered 27%	- Number of eligible people who were offered a NHS Health Check 2,559. - Number of people that received a NHS Health Check 711 - Percentage of people that received an NHS Health Check of those offered 28%	- Number of eligible people who were offered a NHS Health Check 2,516 - Number of people that received a NHS Health Check 655 - Percentage of people that received an NHS Health Check of those offered 26% - Total year: Percentage of people that received an NHS Health Check of those offered 28.5%	See commentary	There has been a reduction in the percentage of people that received an NHS Health Check of those offered in 2016/17 compared to the previous year (40%). This reduction was expected and is in line with budget reductions allocated to delivering NHS Health Checks.

Public Health : Quarterly progress report (8)

Function : Living Well

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director 's Year End Commentary
Improve the sexual health and wellbeing of the population of Portsmouth: <i>All new STI diagnoses (exc Chlamydia aged <25) / 100,000</i> Source: PHP.org.uk	2015 count 1,217 (851 per 100,000)	Reported annually	Reported annually	Reported annually	2016 data not yet available	N/A	2016 data awaited to assess progress.
Make Portsmouth a place where people are supported to choose not to use drugs and people that experience drug problems receive effective help to live drug free	859 people recorded as in drug treatment; 124 successful completions, 14.4%.	858 people recorded as in drug treatment; 116 successful completions, 13.5%.	849 people recorded as in treatment, 107 successful completions; 12.6%	824 people recorded as in treatment, 99 successful completions, 12%	808 in treatment 105 successful completions 12.9%	Stable	The number of people in treatment and % of successful completion has remained broadly stable each quarter.
Improve the mental health of the residents of Portsmouth and the treatment received by people experiencing problems	Mental Health & Wellbeing strategy signed off by HWB Board	Strategy action plan in development	Development of strategy action plan on hold pending service restructure	Service restructure complete – 17/18 objectives pending	Action plan developed with focus on suicide and self-harm prevention, in addition to promoting parity of esteem.	N/A	This action plan has been developed and will feed into the actions stated in the 2017/18 business plan.
Develop programmes of work to reduce the prevalence of diabetes	25.8% (25 out of 97 Health Checks (HCs) Percentage of people identified as high risk of diabetes from a HC, delivered within Pharmacy*	31.6% (18 out of 57 HCs) Percentage of people identified as high risk of diabetes from an HC, delivered within Pharmacy*	16.9% (10 out of 49 HCs) Percentage of people identified as high risk of diabetes from an HC, delivered within Pharmacy*	21.2% (14 out of 66 HCs) Percentage of people identified as high risk of diabetes from an HC, delivered within Pharmacy*	23.9% (11 out of 46 HCs) Percentage of people identified as high risk of diabetes from an HC, delivered within Pharmacy*	N/A	Identifying individuals at high risk of diabetes from an NHS Health Check is an example of how community pharmacies can utilise their skills to support aims of the wider system. These individuals will be highlighted to their GP.

Public Health : Quarterly progress report (9)

Function : Ageing Well

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Support Better Care programme needs analysis	-	-	-	-	-	-	-This line has remained in the plan but I am not sure specifically what work it refers to and due to the significant changes in the team I don't think we have the organisational memory to unpick this. Obviously we are keen to work with the Better Care programme but I am not sure specifically how to address this line.
Support the Integrated Commissioning Service in the implementation of the dementia strategy and the redesign of services across the pathway	-	-	-	-	We have worked with the ICS to look at potential uses of care technology to reduce dependence. This work is helping to inform the future commissioning strategy.	-	-
Increase dementia awareness and diagnosis	Provide dementia awareness to HC patients over 65 years old within Pharmacy. - Number of people 65+ - 6. - Number of people given dementia awareness information - 10	Provide dementia awareness to HC patients over 65 years old within Pharmacy. - Number of people 65+ - 14. - Number of people given dementia awareness information - 10	Provide dementia awareness to HC patients over 65 years old within Pharmacy. - Number of people 65+ - 13. - Number of people given dementia awareness information - 8	Provide dementia awareness to HC patients over 65 years old within Pharmacy. - Number of people 65+ - 13. - Number of people given dementia awareness information - 9	Provide dementia awareness to HC patients over 65 years old within Pharmacy. - Number of people 65+ - 10. - Number of people given dementia awareness information - 9	Although small numbers, provision of dementia awareness information to individuals over 65 years through their NHS Health Check is an example of how community pharmacies can utilise their role as a valuable source of health information and advice in our communities.	

Progress

Regulatory Services and Community
Safety Q4
(January 2017 – March 2017)

Regulatory services and community safety : Quarterly progress report (1)

Function : Environmental Health

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Shellfish: provide weekly specimens to FSA to secure shellfish bed designation	G	A	A	R	G	Steady	Yet to be confirmed however the FSA's requirements in terms of biotoxin sampling in both Portsmouth and Langstone harbour appears to be achieved (statistical analysis required). E-Coli classification sampling has been delivered in accordance with CEFAS monitoring protocols and the exploration of new classified areas has begun following the formal application from SOFA – CEFAS procedures are being followed in this regard. Demand for classification sampling remains high and therefore continued to be assessed in 2017/2018
Food hygiene: produce an annual plan in line with statutory requirements and minimise slippage against the plan	G	A	R	R	G	Steady	Analysis of 2016/2017 service delivery in accordance with the FLCofP demonstrates an improvement on previous years. Interventions however still below required levels and therefore remains a concern in 2017/2018. Annual FOP for 2017 / 2018 created in draft - forecast for Cabinet approval on the 14 th June
Port Health – Maintain income levels at £60,000 pa	G	A	A	A	G	Steady	Total income generated – IRO £75,000. Income target in 2017/2018 however to remain at £60,000
Pest control – exceed income target of £156,000	G	A	A	A	G	Steady	Total income generated – IRO £175,000. Income target in 2017/2018 however to remain at £156,000
Community burials: facilitate timely, dignified burials; aim to recover 80% costs from estates	G	A	A	R	G	Steady	New FD contract delivered. 64 referrals received. 59 funerals delivered. Full accounting still to be confirmed. Total outgoing £65,500 - total recovered currently unclear - if remaining 16 outstanding are representative of the 43 delivered –recovery could be IRO £58,000. Equating to 83% recovery rate
Air quality – ensure new DEFRA review and assessment annual reporting requirements are met	G	G	G	G	G	Steady	Monitoring of pollutants continues – data capture remains adequate in most areas. Next ASR to be submitted to DEFRA between June / September
Pollution control: continue to deliver all statutory environmental protection requirements with >95% satisfaction rate	G	G	G	A	G	Steady	Formal complaint level achieved. One LGO investigation undertaken into service delivery following Stage III – not upheld

Regulatory services and community safety : Quarterly progress report (2)

Function : Trading standards

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Primary Authority Partnerships – maintain the 10 current partnerships and pursue other opportunities as they arise	G	G	A	R	R	Deteriorating	A review of PAPs being undertaken. New FCR model devised within policy. One key PAP formally dissolved through the BRDO. Levels of income falling
Investigate consumer crime – intervene using civil and criminal law to assist consumers in recovering loss, and take court action where appropriate	G	G	A	R	R	Steady	Measures and targets set by previous TS Manager unhelpful in terms of monitoring - urgent need to recruit to vacant position – deliver PAP plan and BP – new measures to be set for 2017 / 2018
Alcohol and tobacco harm reduction – help businesses comply through visits and training, reduced numbers of test purchase failures, reduced amounts of illicit tobacco supplied in the City	G	G	A	A	R	Steady	Measures and targets set by previous TS Manager unhelpful in terms of monitoring - urgent need to recruit to vacant position – deliver PAP plan and BP – new measures to be set for 2017 / 2018
Proceeds of crime – maximise amounts of compensation and confiscation recovered and work in partnership with other local authorities	G	G	A	A	R	Deteriorating	Measures and targets set by previous TS Manager unhelpful in terms of monitoring - urgent need to recruit to vacant position – deliver PAP plan and BP – new measures to be set for 2017 / 2018. Ability to execute diminishing

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
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Function: Civil Contingencies

Exercise Golden Fox – rewrite pans to address new safety zone	G	G	G – complete	G	G	Completed	
Business continuity plans				A	A	New process agreed. Corporate BC policy and BC plan reviews will take place in 2017/18.	

Function: Stray Dog Kennels

Secure £50,000 income generation	£32 000	A	A £22000	R £28000	R £40,000	This target was increased to £50,000 from the previous year's target of £32,000. Therefore progress was made to increase income but did not meet the target. Further work to generate income will continue into the next financial year.	
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Function: Anti-social behaviour

Complete the complex needs review - now linked to Portsmouth Health and Care Blueprint demand management work	NA	R	G underway	A	G	Long term change required to commissioning in this area. Work to evidence need, explore and co-ordinate options is on going. Senior level oversight and SPP governance also required to make sure individual service reviews (i.e. supported housing/living and mental health transformation programme) and are joined up. Animation based on real case study commissioned and 2 further case studies completed. Progress report to SPP June 29 th .	
Establish city-wide early intervention /problem solving arrangements	NA	A	A -	A	A	Working with Police to reduce duplication of operational effort in relation to complex needs. Report to SPP 29 th June.	

Function: CCTV

Complete the income generation review		A	A report complete	N/A			This report was completed and identified some areas of change to the control room that is on-going. The Traffic Management Control Team is moving to the CCTV control room, the monitoring contract is coming in-house and work on reducing reliance on transmission line by use of wireless CCTV cameras continues to progress. This target can be removed for the next years report..
Implement recommendations as appropriate		A	A	A			

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
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Function: Domestic Abuse

Promote the UP2U service for perpetrators - success measured through income from sales		G	G	G	G		
Increase MARAC referrals from other agencies other than police , so the proportion of police referrals is lower than 81%	81.8% from police	R	R	R	R		

Function: Strategy and Partnerships

Research on costs of domestic abuse commissioned by LGA	NA	G	G-complete				Work to bring in income from OPCC for analysis across Hampshire stalled with new OPCC. Other research undertaken includes rough sleeping survey, mapping ASB associated with HIMOS, semi structured interviews with adults with complex needs, data modelling etc.
Complete strategic assessment	G		G-complete				This is an ongoing requirement – reduced financial resources has meant service review under taken in January 17. This will limit ability to income generate and produce the same level of analysis.
Complete the community safety survey - achieve a sample in excess of 1000 responses	G	G	G-complete				As above re on going research and analysis.
Complete the statutory SPP plan – agreed by the SPP and partner agencies including the city council	G	G	G	A	R		Current plan runs to 2018 – up date on progress planned for SPP June 29 th . Reduced resources in to support ongoing strategy development and delivery co-ordination mean SPP meetings may move to 6 monthly.

Function: Prevent

Ensure all activity from the action plan is delivered on time – measured by action plan monitoring	G	G	G	G	G		
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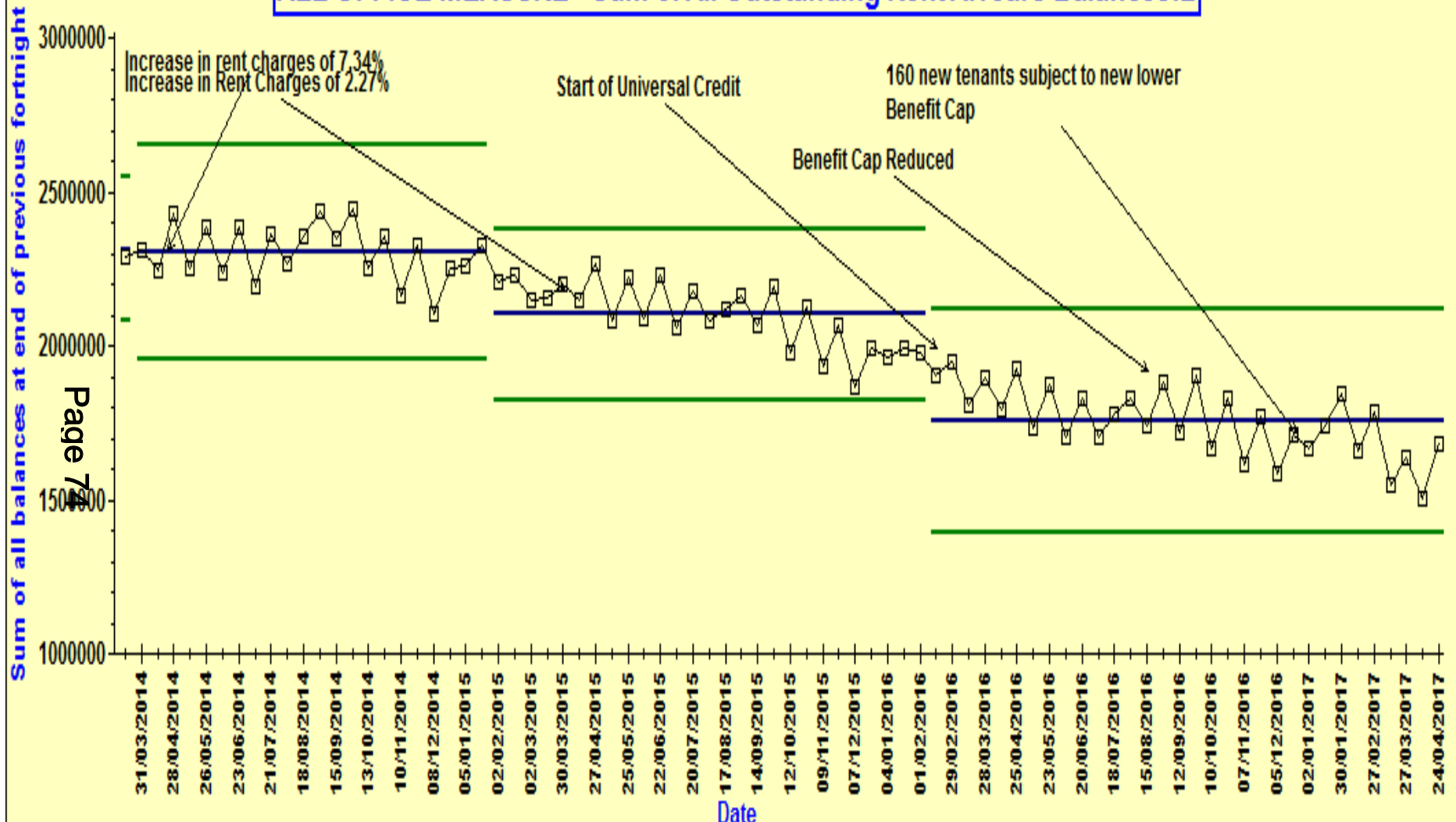
**Property and Housing Services Q4
(January 2017 – March 2017)
Director: Owen Buckwell**

Rental Income – Service Highlights

Purpose - To provide advice and support when needed, to enable people to solve problems and cope to stay in their homes

- Current Rent Arrears for Housing & Property Service stood has shown an ongoing reducing trend since September 2014
 - In that period Rent Arrears have reduced from £2.44 million to £1.68 million – a reduction of £756K in the last 2.5 years
 - The actual figure for Current Rent Arrears, as at April 2017 is £1,684,814
 - The current mean or average is £1.75 million, with an Upper Control Limit (UCL) of £2.12 million and a Lower Control Limit (LCL) of £1.39 million
- Current Performance levels have been stable since February 2016 (15 Months)

ALL OFFICE MEASURE - Sum of All Outstanding Rent Arrears Balances:2



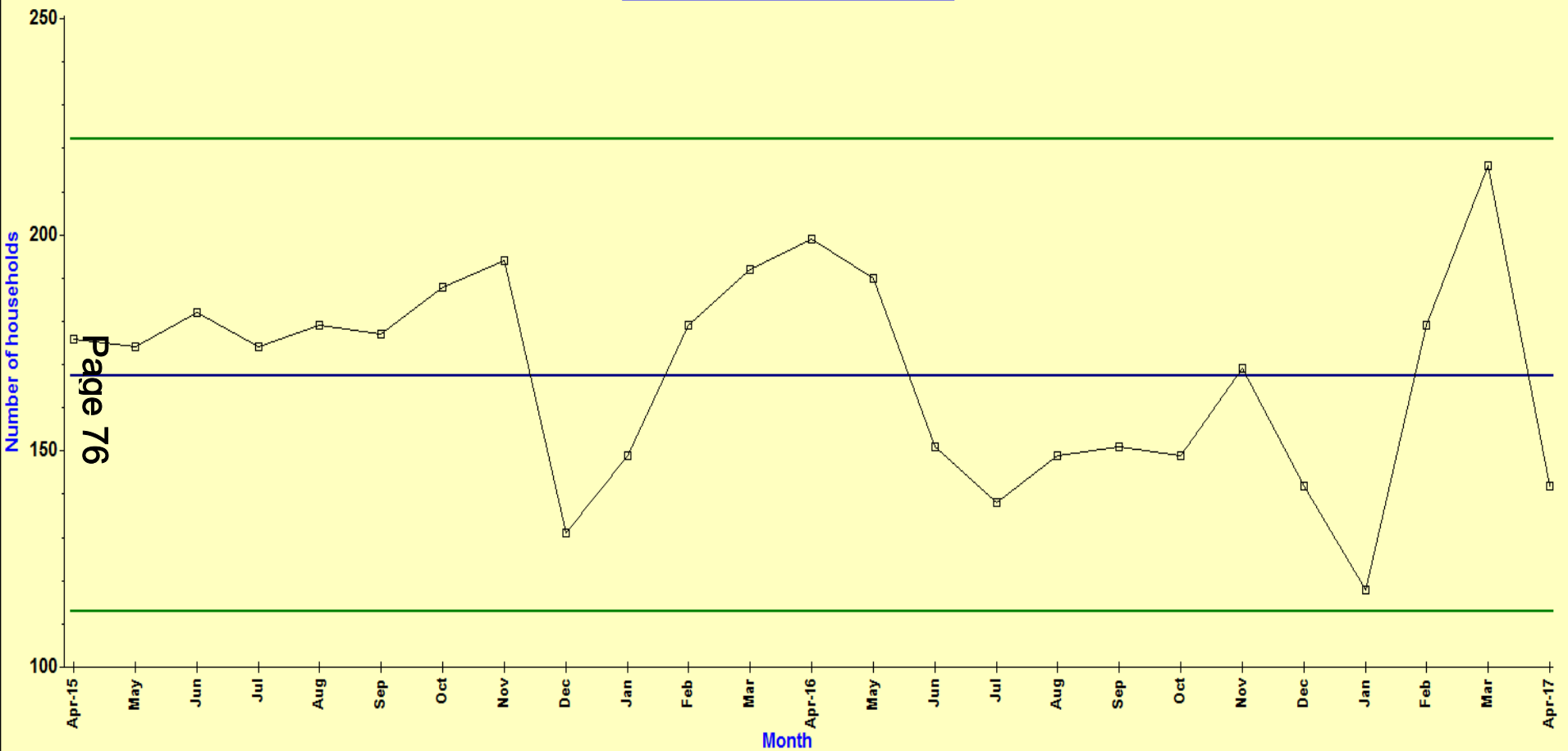
Split Start	01/04/2013	31/03/2014	02/02/2015	15/02/2016
U.C.L.	=2544603.0	2653628.0	2379428.0	2121111.0
Mean	=2314055.0	2304193.0	2100880.0	1756343.0
L.C.L.	=2083507.0	1954759.0	1822333.0	1391575.0

Housing Options - Service Highlights

Purpose - Provide a suitable home when needed.

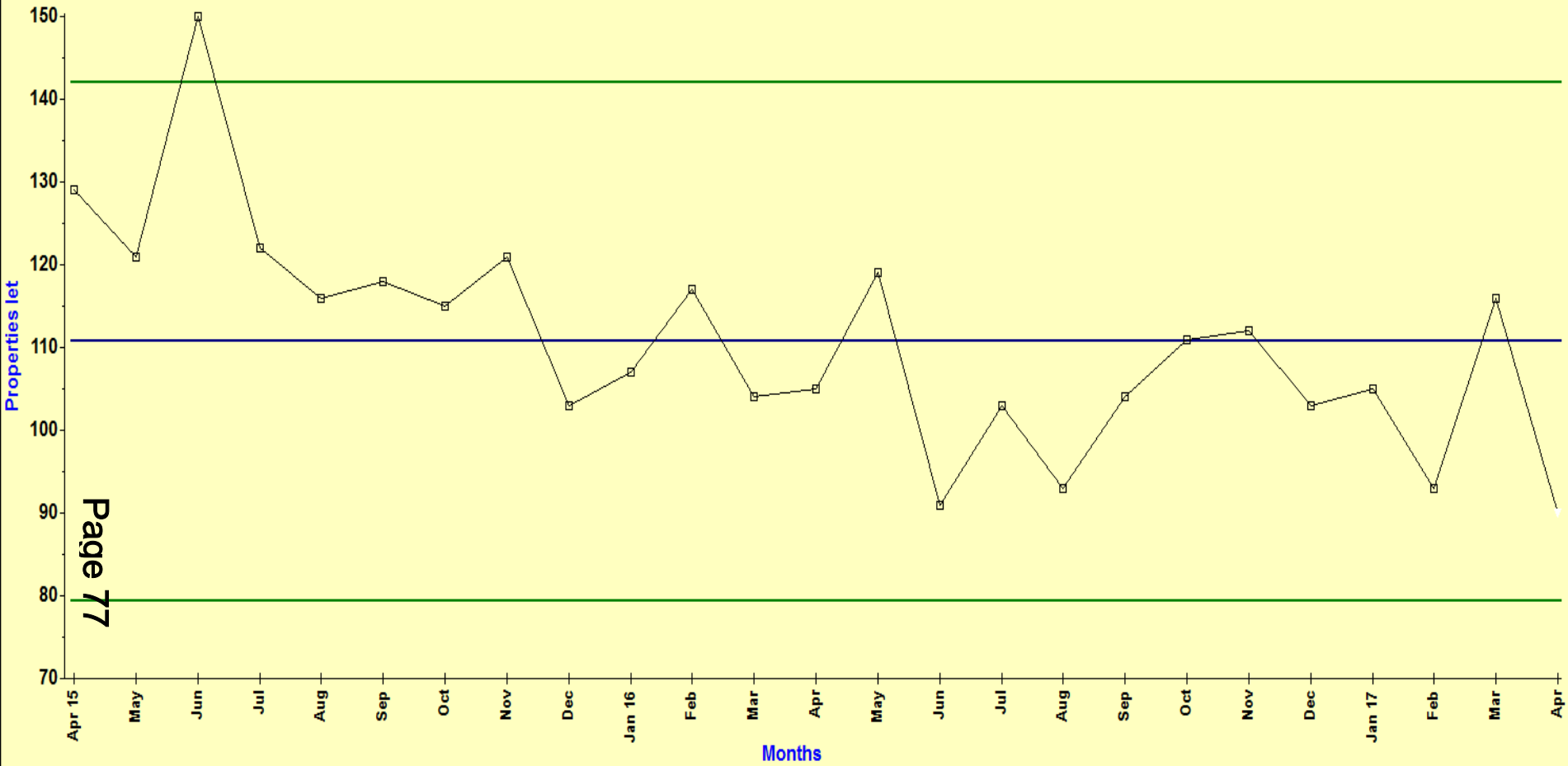
- The number of households joining the housing register each month is stable, with a mean of 167.5. It is normal for variation month by month to range from 113 to 222 households.
 - The total number of properties let across all tenures each month has a mean of 110 properties. It is normal for variation month by month to range from 79 to 142 properties.
 - The total number of homeless approaches each month has a mean of 91 approaches. It is normal for variation month by month to range from 46 to 136 approaches.
- The percentage of people presenting as homeless and found to have caused their own homelessness each month is stable with a mean of 11% of all the approaches we get.
- The number of bed and breakfast placements each month shows a stable trend with seasonal variations. The current mean is 18.8 placements. It is normal for variation month by month to range from 7 to 31 placements.

Households joining the list



Start Apr-15
U.C.L. =222.1
Mean =167.5
L.C.L. =113.0

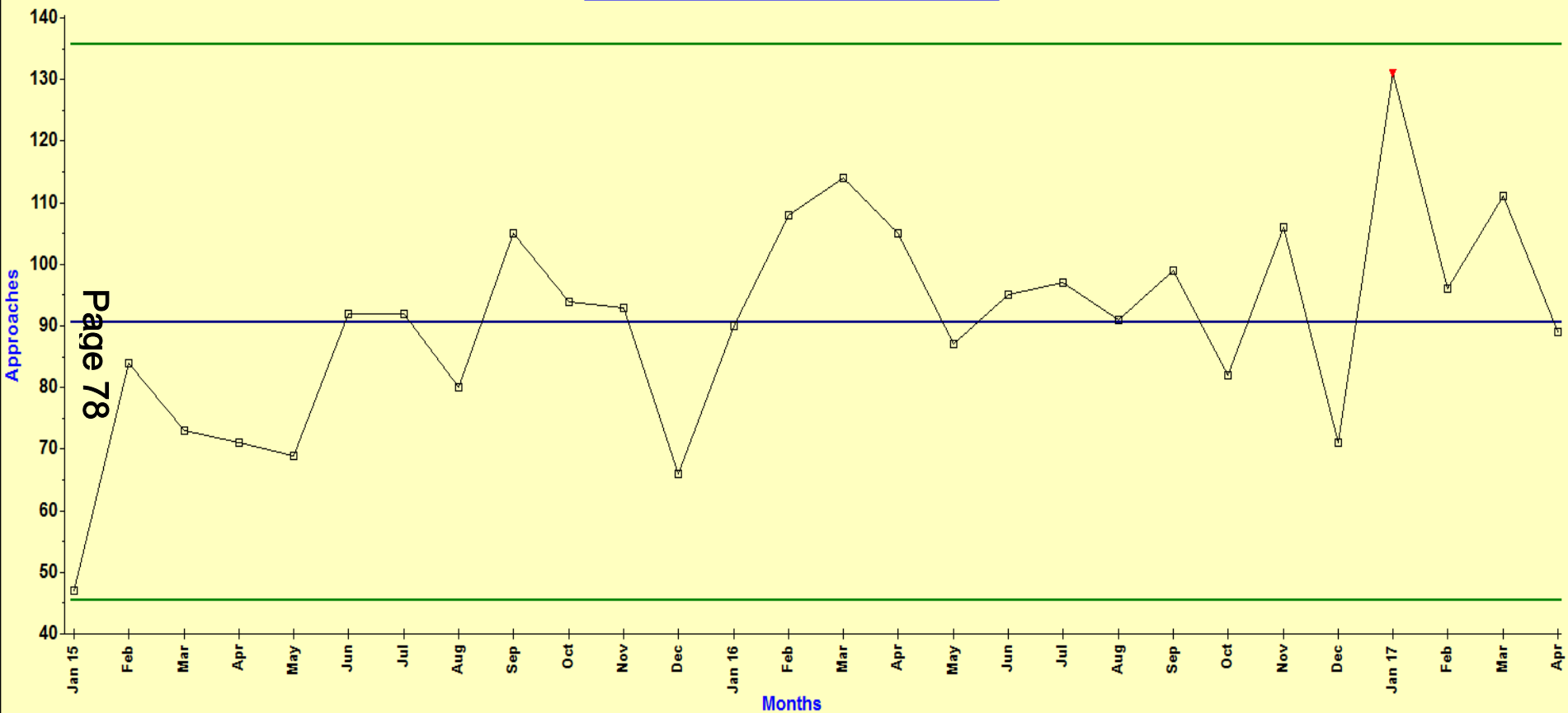
Properties let all tenures last 2 years



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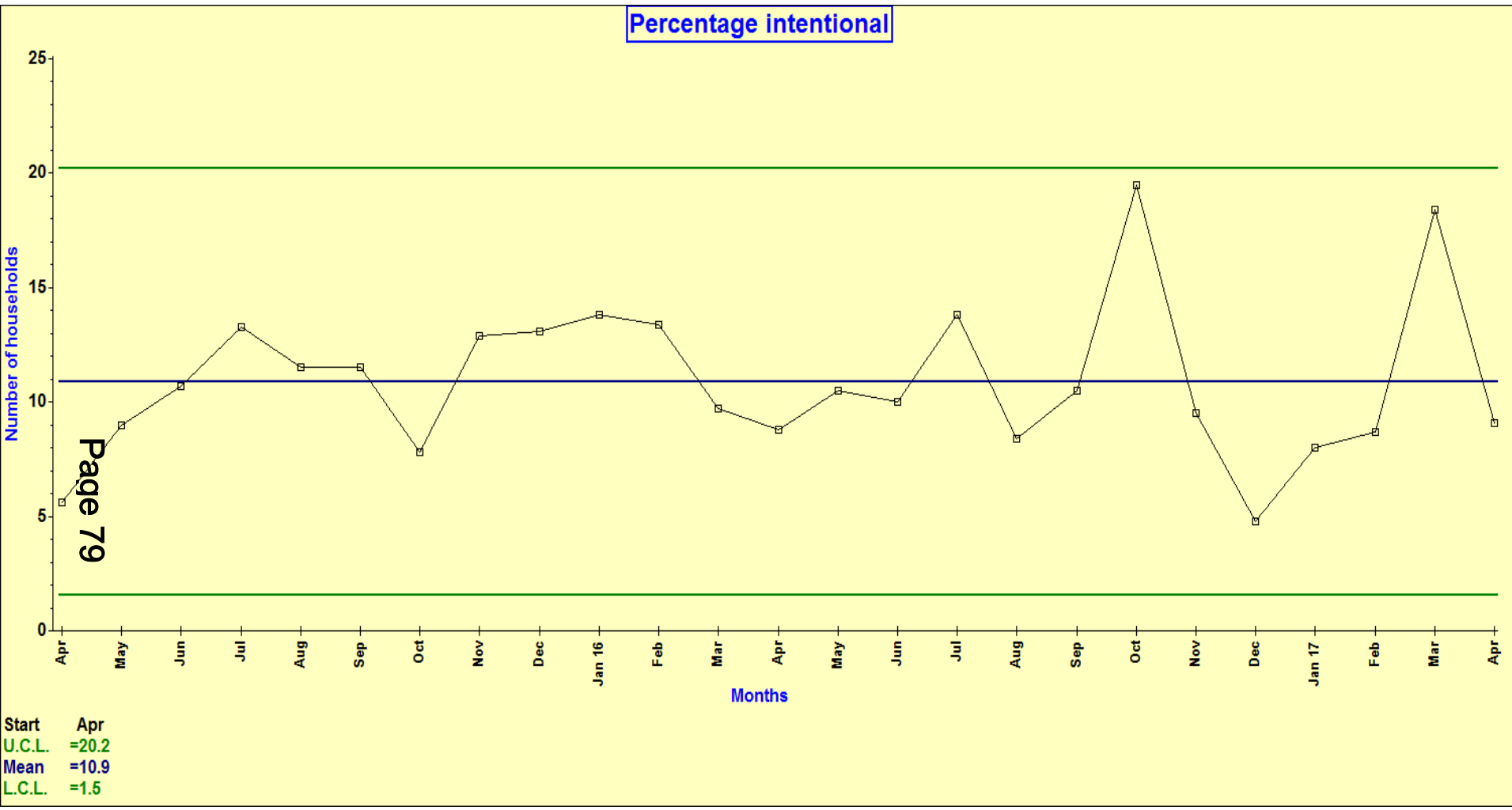
Start Apr 15
U.C.L. =142.1
Mean =110.7
L.C.L. =79.4

Homeless measures - Approaches

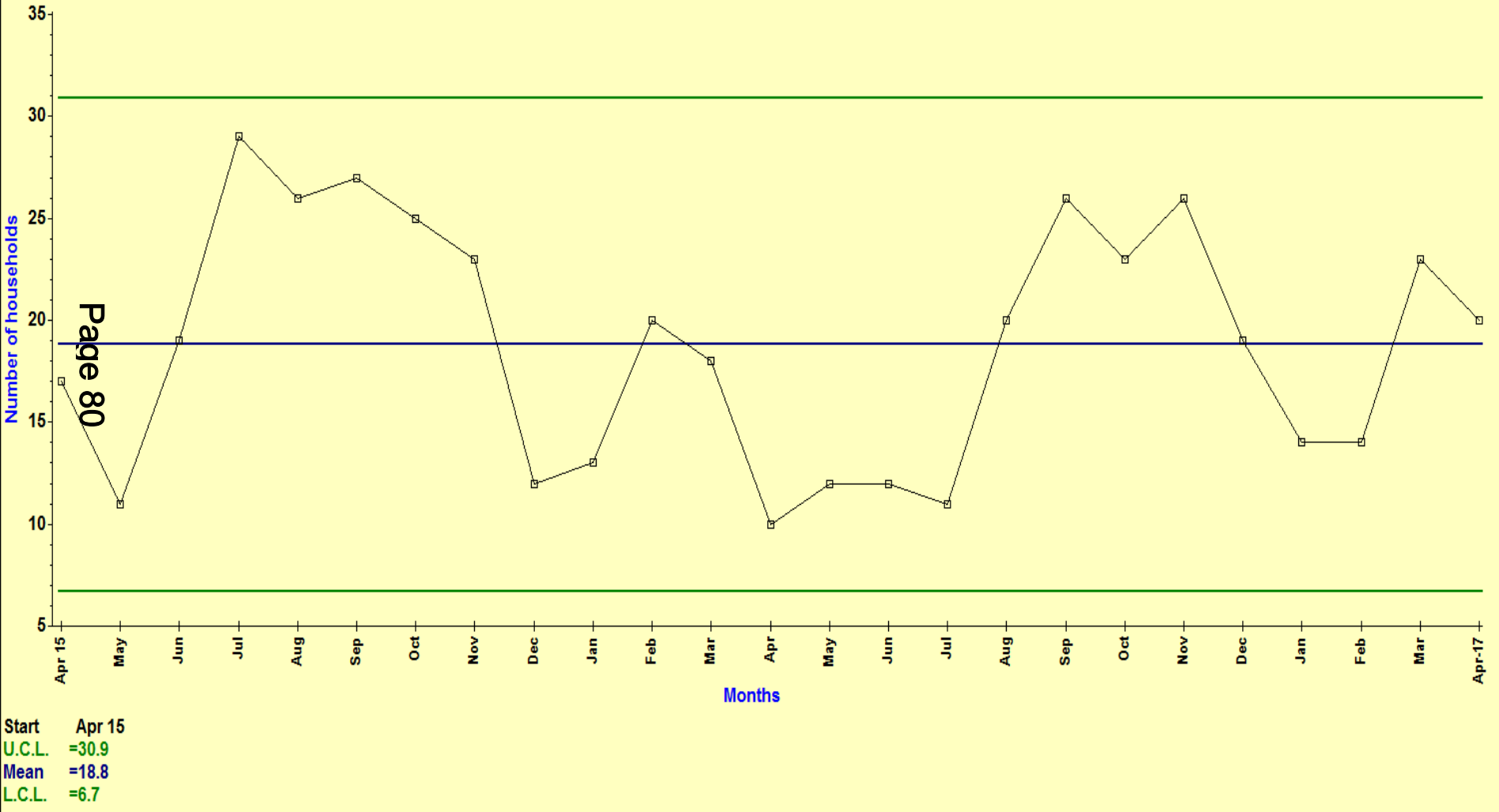


Start Jan 15
U.C.L. =135.8
Mean =90.6
L.C.L. =45.5

Percentage intentional



Number placed into B&B

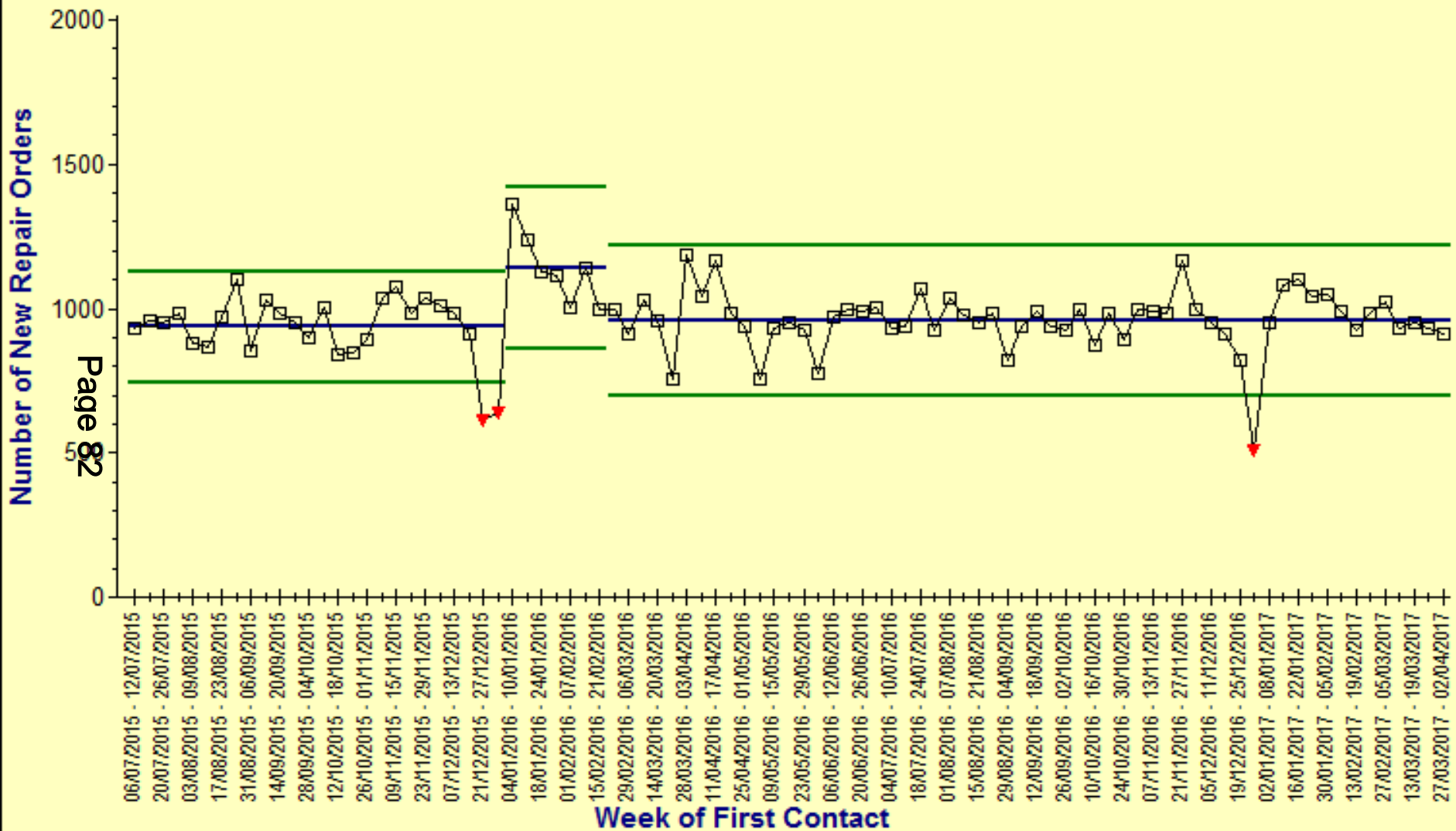


Repairs & Maintenance – Service Highlights

- **Purpose – The Right Repair at the Right Time**
- Demand for repairs has been stable for a significant period, the changes indicated to demand are seasonal every year with increased demand received for repairs during the winter period although this winter has been relatively dry and mild
- E2E and fixed first visit measures are stable but similarly indicate a seasonal variation due to the impact of the type of repairs received during the winter period such as roof repairs that require scaffold, which require more visits and a longer period of time to complete the repairs. The spike in repairs fixed first visit around Christmas week reflects the simpler nature of repairs reported.

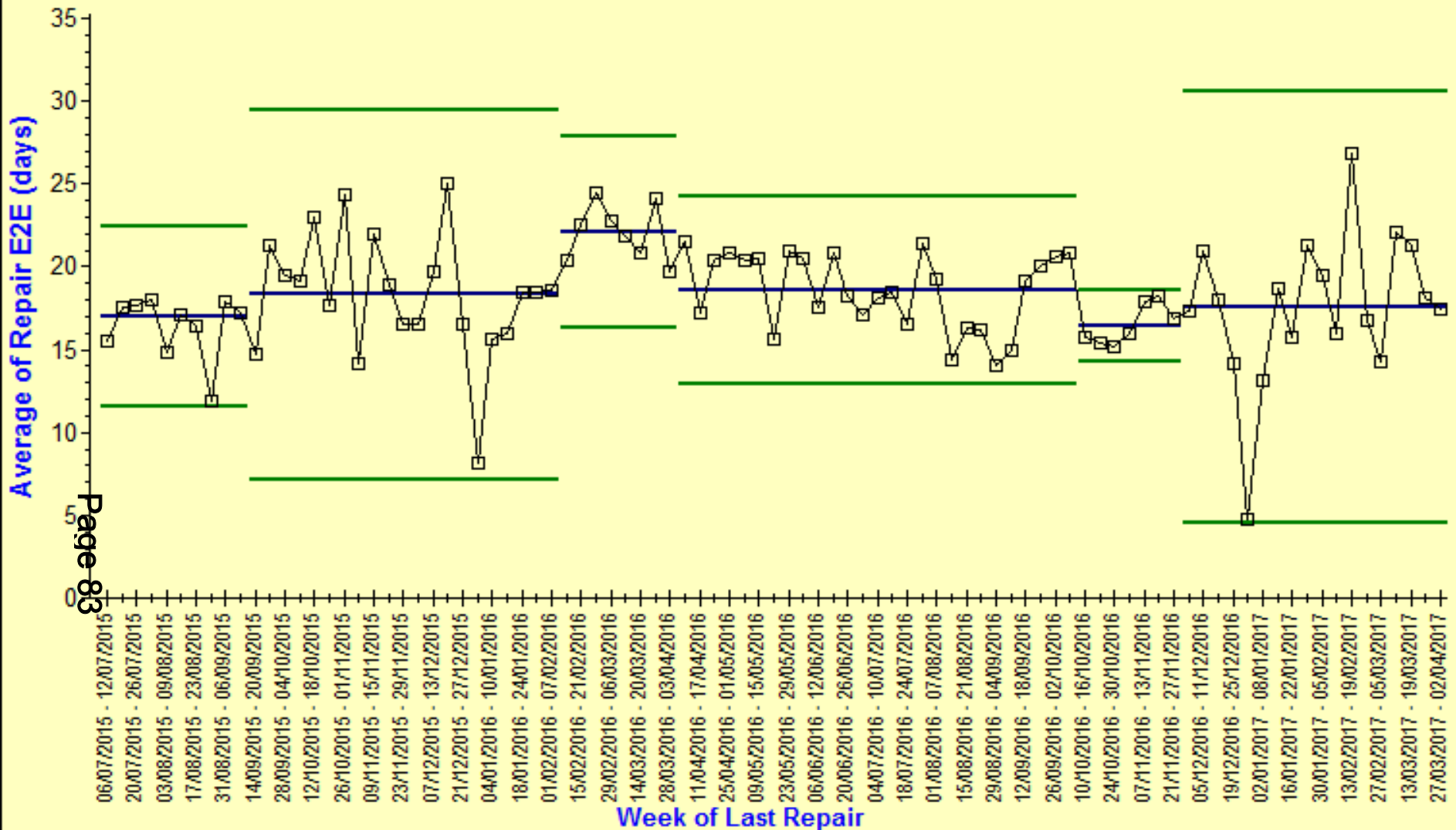
Repair fixed first time has been stable over many years but has seen a small but sustained improvement since August last year

Repair new orders per week - service wide measure:3



Split Start	09/03/2015 - 15/03/2015	04/01/2016 - 10/01/2016	22/02/2016 - 28/02/2016
U.C.L.	=1127.0	1419.8	1218.5
Mean	=935.3	1139.6	959.2
L.C.L.	=743.5	859.4	699.8

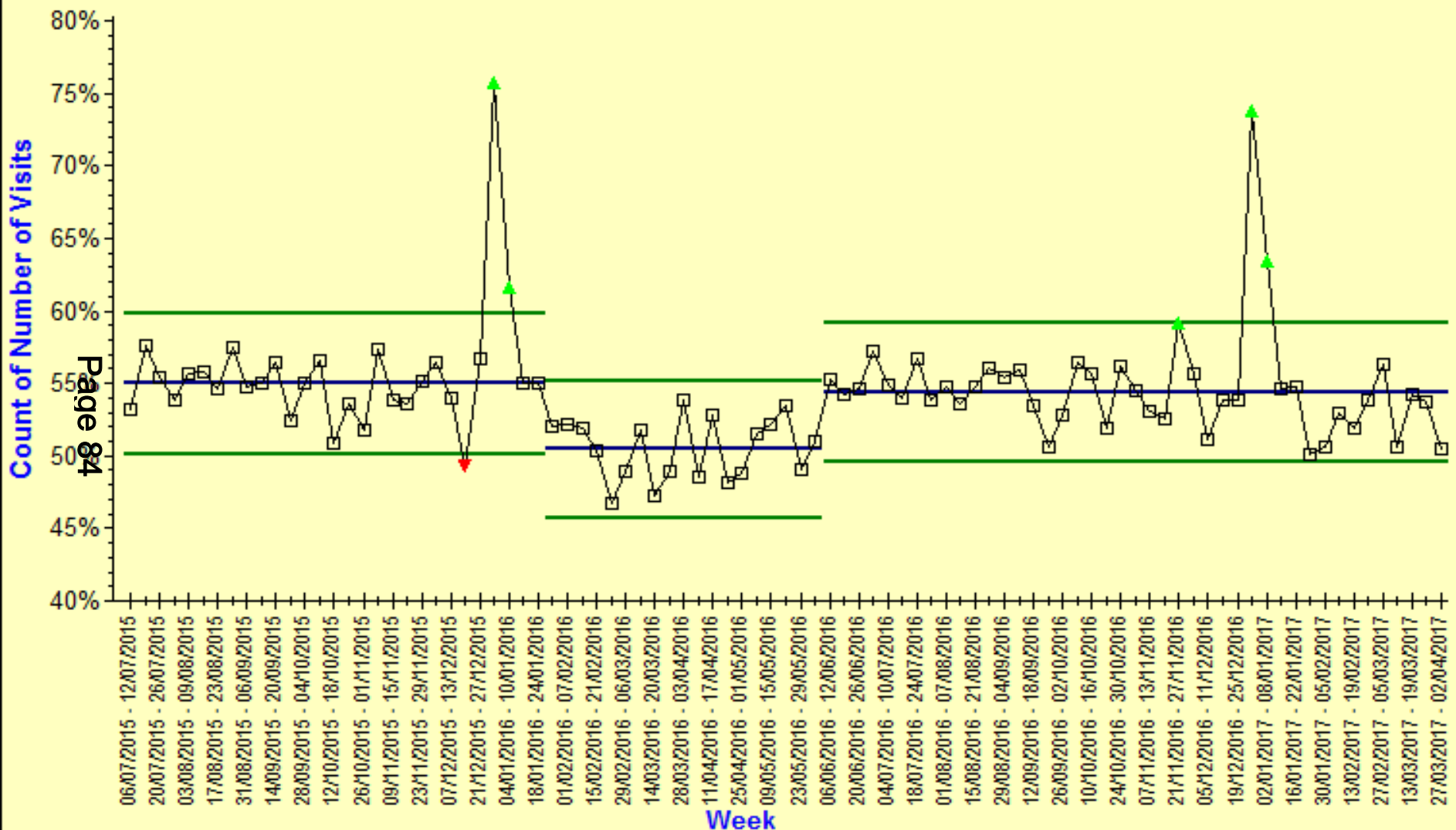
Repair E2E per week - service wide measure:3



Week of Last Repair

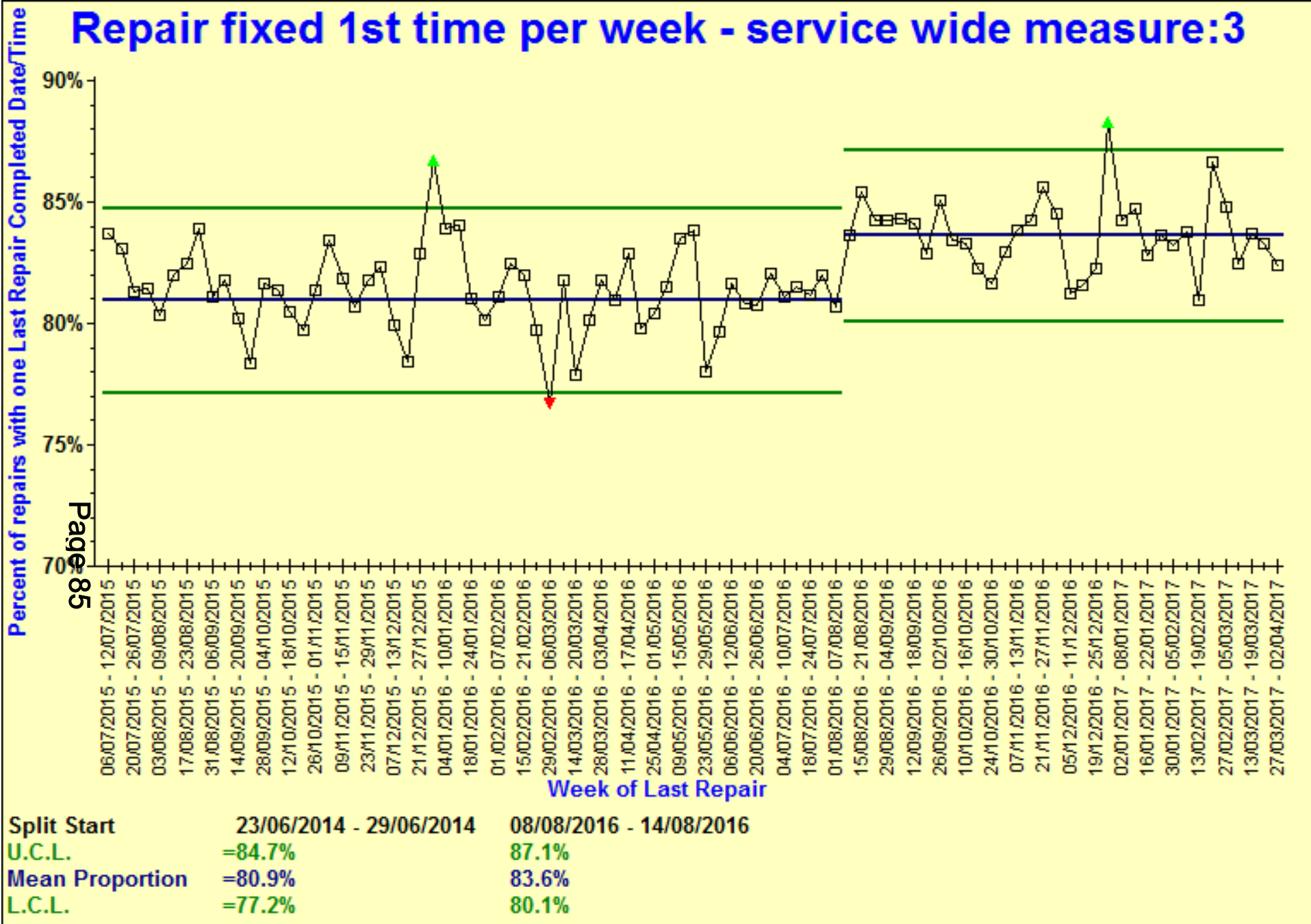
Split Start	23/03/2015 - 29/03/2015	14/09/2015 - 20/09/2015	08/02/2016 - 14/02/2016	04/04/2016 - 10/04/2016	10/10/2016 - 16/10/2016	28/11/2016 - 04/12/2016
U.C.L.	=22.4	29.5	27.9	24.3	18.6	30.6
Mean	=17.0	18.3	22.1	18.6	16.5	17.6
L.C.L.	=11.6	7.1	16.3	12.9	14.3	4.5

Repair fixed 1st visit per week - service wide measure:3



Split Start	02/03/2015 - 08/03/2015	25/01/2016 - 31/01/2016	06/06/2016 - 12/06/2016
U.C.L.	=59.8%	55.2%	59.2%
Mean Proportion	=55.0%	50.5%	54.4%
L.C.L.	=50.1%	45.7%	49.6%

Repair fixed 1st time per week - service wide measure:3



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Date	FPN Litter issued	Litter - prosecution at Court	No. Reports initially recorded as Fly tips reported to SCT	No. of actual Fly tip investigations and resolutions from all reports regarding waste matters.	Fly tip Prosecutions	Fly tipping £400 fine	Construction waste	Dog Patrols carried out	Dog control inc fouling - formal letters sent	Dog fouling - FPN issued	Graffiti reported	Waste other - reported	Waste Other - Resolved	Early Refuse Issues reported	Early Refuse Issues investigated & resolved
Jan-16	22	0	68	37	0	n/a	n/a	137	0	2	4	177	166	n/a	n/a
Feb-16	40	8	41	31	0	n/a	n/a	83	5	0	8	191	166	n/a	n/a
Mar-16	9	0	40	20	0	n/a	n/a	80	1	2	21	236	210	12	12
Apr-16	5	0	58	34	0	n/a	n/a	59	1	1	5	268	224	27	27
May-16	8	4	49	35	1	0	n/a	67	0	0	10	275	221	34	34
Jun-16	3	1	66	44	1	0	n/a	59	1	1	7	269	202	41	41
Jul-16	3	0	44	18	0	0	n/a	67	0	0	9	253	217	28	28
Aug-16	15	0	41	17	0	0	n/a	74	2	0	12	258	214	24	24
Sep-16	88	0	69	30	0	2	n/a	47	1	0	6	266	214	47	47
Oct-16	51	0	58	35	0	0	3	27	0	0	3	218	159	44	44
Nov-16	42	2	63	37	2	2	6	48	2	0	5	216	171	35	35
Dec-16	33	1	41	28	1	0	2	54	1	0	2	152	119	35	35
Jan-17	17	0	57	36	0	0	4	70	0	0	7	161	123	31	31
Feb-17	22	2	59	33	1	0	4	23	1	0	6	165	110	39	28
Mar-17	46	1	82	50	0	1	6	67	2	1	2	192	172	52	30

Purpose – *To Enable Recycling and Remove Waste on Collection Day*

Clean City - Waste Management

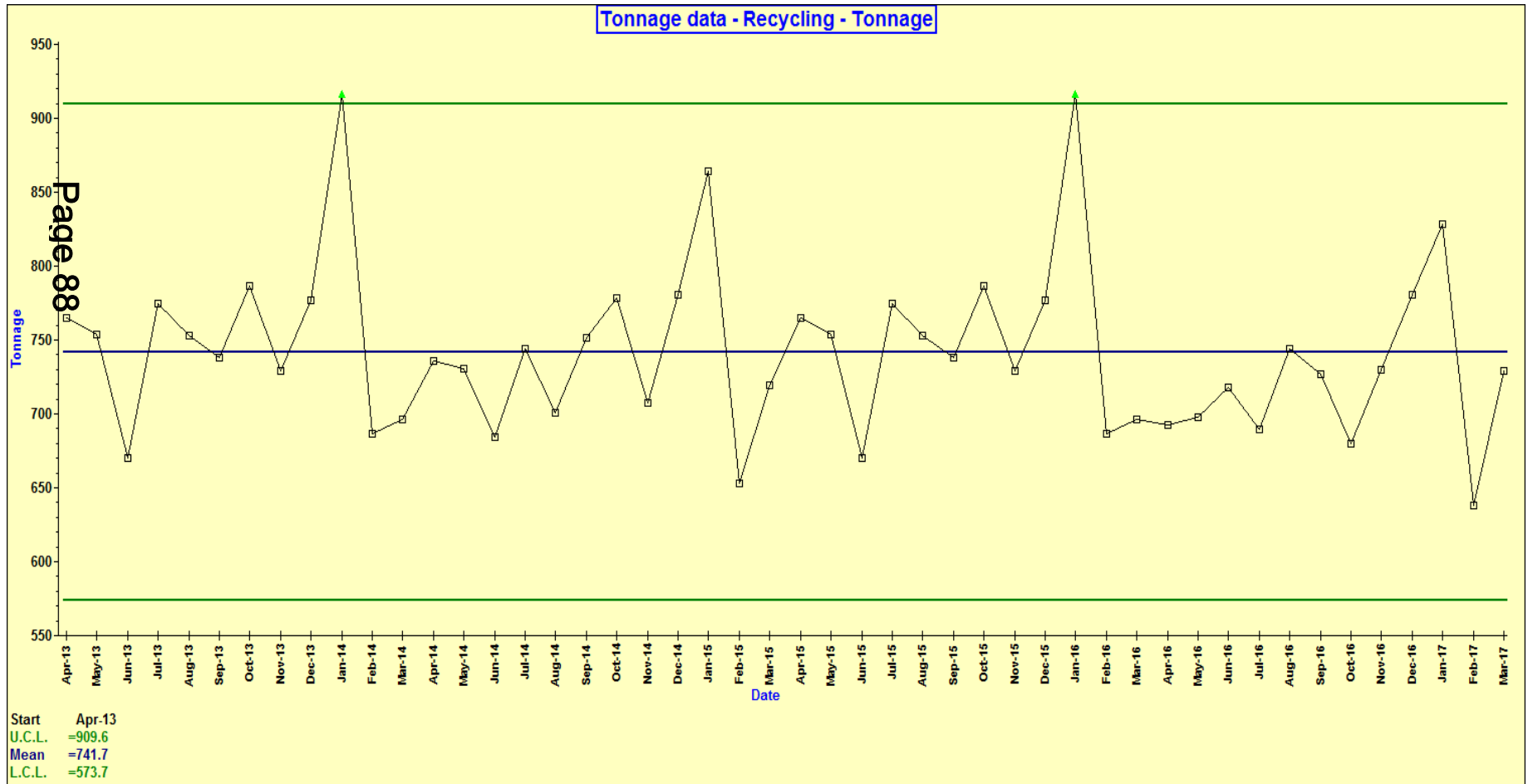
Service Highlights

- The first chart is the recycling tonnage for the same period, this has reduced when compared to the same point last year
- Second chart is the **Household waste collection** tonnage which has increased on the same point as last year. Portsmouth residents produce 239kg per head per year compared to an average for Hampshire of 186Kg per head per year.

Good news - Income from recyclables increased during qtr 4 – unexpected rise in price of paper and card in this qtr led to additional income of approx. £100k. However, prices already dropping so this is unlikely to be sustained. Overall income from recycling for 2016/7 was £382,159 (2015/6 was £280,351)

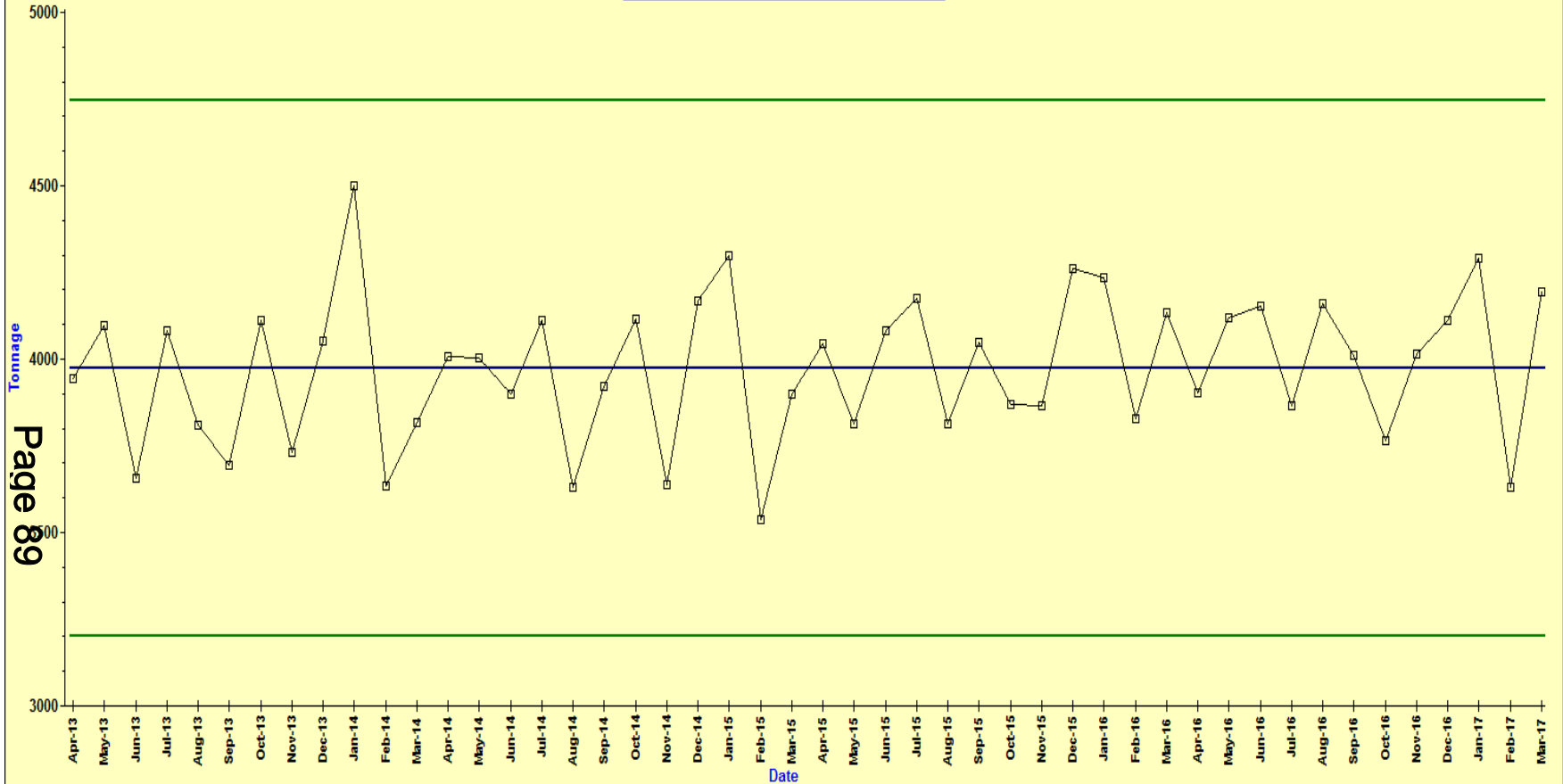
Waste Management

To enable recycling and remove waste on collection day



Waste Management

Tonnage data - Refuse - Tonnage



Start Apr-13
 U.C.L. =4745.7
 Mean =3974.0
 L.C.L. =3202.2

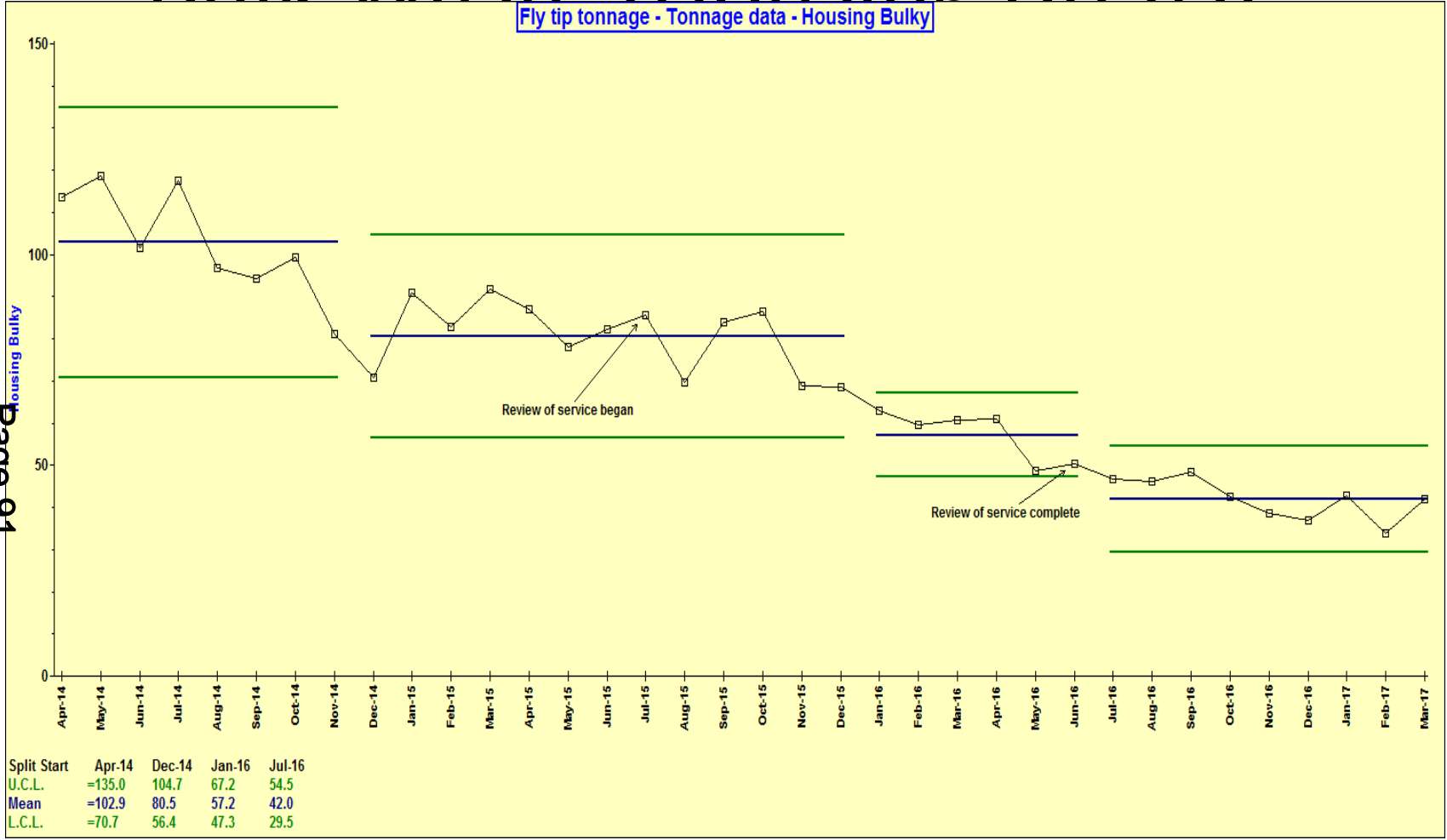
Clean City - Bulk waste Service Highlights

- Demand reduction being sustained. Estate Services now focussed on problem areas
- Collection Crew and support team utilising capacity to do income generating work
- Manager reviewing service to ensure correct capacity.

Bulk Waste (Housing Areas)

Fly tip tonnage - Tonnage data - Housing Bulky

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Transport, Environment and
Business Support Q4
(January 2017 – March 2017)
Director: Alan Cufley

Transport, Environment and Business Support : Quarterly progress report (1)

Function : Traffic and Network Management

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Complete the Traffic Management Centre IT system upgrade.	Upgrade to be completed by April 2017.	Specification and project requirements complete and a supplier identified. Pre- contract preparations underway.	Placing the order is underway and some preliminary work has been undertaken.	The order has now been placed and implementation planning has now commenced.	Implementation is underway and migration from the old system to the new system and traffic management centre is in progress.	Steady	The delivery of the system is complete. Final tests are underway, before it becomes operational. The final stages of this project will be reported on during 2017-18.
Delivery of the £1m Traffic Signal optimisation programme across the city.	Programme to be delivered over the next two years.	Feasibility completed. Preliminary designs in progress.	Preliminary designs are now complete . Procurement of the supplier of phase 1 began in Q2. Works are likely to begin in February 2017.	The final designs are complete. Procurement for Phase 1 and Phase 2 is underway.	All works are now out to competitive tender. Returns are expected in April 2017.	Steady	This programme is still in progress so will be included in performance reporting for 2017-18.
Traffic and transport management for the Americas Cup World Series, Victorious, Great South Run, Victorian Festival of Christmas and other special events.	Traffic Management plans for the events reviewed and updated for this year.	Traffic management and plans were in place for for the Americas Cup World Series event and the Victorious Festival.	Plans for events such the Americas World Cup Series and Victorious were successfully executed. Plans were put in place for the Great South Run, November fireworks and Christmas events.	Traffic management went well for these events. All proceeded as planned.	During this quarter there were no significantly large events requiring special arrangements.	Steady	Network and Traffic management is vital for the smooth running of Portsmouth's large scale events. We will continue to report on the performance of this in 2017-18.
Improved journey times on key routes in the city.	Plans to introduce journey time monitoring technology with the Traffic Management Centre system upgrade.	Trials underway for testing journey time measurement technology.	Two bids have been made for Department for Transport funding to add further traffic sensors and make improvements to the data analysis technology. Work continues to create more customer relevant information on different media platforms.	Bid announcements are awaited.	The Council was successful in securing DfT funding for further data analysis technology. The project to implement the technology will begin 2017-18.	Steady	As this will become a stand alone project for 2017-18, its implementation will be reported on as a project next year.

Transport, Environment and Business Support : Quarterly progress report (2)

Function : Transport planning

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Achievement of the Local Transport Plan (LTP) milestones for Transport Planning projects.	Transport Planning projects are due to be completed by March 2017.	2 projects in planning stage, 1 in implementation stage. Successful bid of £450k external funding for Sustainable and Connected City projects.	1 project is now complete, 2 are in implementation stage and a further 1 is in the planning stage. Delivery of the Sustainable and Connected City projects is progressing well.	All projects are in the implementation stage. Delivery of the Sustainable and Connected City projects is progressing well and on track to deliver by the end of the year.	2 projects are complete, with 1 due to be finished once the Hard interchange is handed over. Following successful delivery of all the Sustainable and Connected City projects, monitoring and evaluation is now underway for each of the schemes and final claim and output report are being submitted to the DfT.	Steady	The Local Transport Plan is an ongoing programme of projects funded by the Council's capital programme. This measure will be carried forward to next year, so reporting on current and new projects that are part of the overall plan.
Progress reviewing resident's parking zones (currently planned to be achieved in 2021)	8/35 schemes reviewed by Q4 2015-16	Consultation is underway on a new parking scheme in Cosham.	A new parking zone was approved for Cosham (BF zone) to commence at the beginning of December 2016. Work continues on the remaining zones to be reviewed as per the programme reaffirmed by the Traffic and Transportation portfolio holder in September 2016.	A new parking zone was introduced in Cosham (BF zone) in December 2016 and is operating successfully. Consultation was undertaken on the Old Portsmouth zone (KA).	In March the amendment to the free parking period within KA zone (Old Portsmouth) was approved (reduction from 2 hours to 1 hour). This will be implemented by the end of April.	Steady	The approved review of residents' parking zones is progressing well. The achievement of the milestones within the residents' parking review will remain an important measure until it is complete.
Increased patronage of the Park and Ride service	Sales and Revenue plan for 2016-17	A number of promotion initiatives have been developed to increase sales.	Q2 revenue was similar to 2015-16. Further work was commissioned on promotion activity and pricing strategy.	In Q3 2016-2017 there was a 3.6% increase in passenger numbers and a 6.7% increase in revenue compared to the same period in 2015-2016	In Q4 2016-2017 there was a 4.0% increase in passenger numbers and a 5.4% increase in revenue compared to the same period in 2015-2016	Steady	Patronage and revenue has been steadily increasing during the year. This measure will remain next year in line with the target to increase use of the Park & Ride service.

Transport, Environment and Business Support : Quarterly progress report (3)

Function : Transport planning

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Implementation of improvements to current driver and fleet management practices	Corporate drivers' licence checking service planned for introduction.	Service launched in May. Non-compliant drivers are being identified and managers informed. 195 drivers' licences checked in Q1.	A further 125 driver's licences were checked in Q2. Plans are in place to issue advice on car insurance in Q3.	154 driver's licences were checked in Q3.	37 driver's licences were checked in Q4.	Steady	511 driver's licences were checked during 2017-18. This is not a mandated service but a demand led one that provides managers across the Council with accurate information on the validity of a member of staff's driving licence with advice on any action required in line with the PCC's Driving at Work policy. Meeting this demand has become business as usual so this measure will not be carried forward for performance reporting in 2017-18.
Integration and commercial success of the Fleet Management Service (income and satisfaction)	650 users of the Home to school and college supported transport service.	Integration of Fleet Management and the passenger transport unit to include Adult Day Services is underway.	Integration of Fleet Management and Adult Day Services is complete and proving successful. With good client feedback.	The Integrated Transport is successfully providing transport for two day care centres in their transition from PCC run day care services to other providers.	The recently appointed Fleet Manager is now working with our marketing team to develop our traded services offer.	Steady	The Fleet Management service with the new manager in place is preparing to fulfil its targets. This measure will remain but be amended to reflect the current position in this services' development.

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Transport, Environment and Business Support : Quarterly progress report (4)

Function : Road safety and active travel

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Traffic safety schemes within the LTP delivered on time, to budget and standard	8 traffic safety projects due to be completed by March 2017.	6 projects are in the planning stage, 2 in implementation stage.	7 projects are now in the implementation stage. 1 project has been put on hold, subject to review.	7 projects are now in the implementation stage . 1 project is awaiting a decision in Q4.	6 projects have been implemented. 2 have experienced some delays and will now be implemented by summer 2017.	Steady	The Local Transport Plan is an ongoing programme of projects funded by the Council's capital programme. This measure will be carried forward to next year, so reporting on current and new projects that are part of the overall plan.
Reduce road casualties Year on year reduction of casualties compared with the five year baseline.	Q1 2011 to 2015 5 year average baseline is 136.8 collisions.	Q1 2016 collision figure is 116. A reduction of 15.2%.	The Q2 2011 to 2015 5 year average baseline is 163 collisions. In Q2 2016 there were 146 collisions, a reduction of 10%.	The Q3 2011 to 2015 5 year average baseline is 159 collisions. In Q3 2016 there were 147 collisions, a reduction of 7.7%.	Full Q4 figures will not be available from Hampshire Constabulary until mid June 2017.	Improving	The overall figures show a reduction in collisions against a baseline average. We will continue to monitor casualty figures and design road safety initiatives aimed at those at the highest risk.
Delivery of programme of Active Travel events	High participation at events such as Bike Week and Pedal Portsmouth 2016.	Good participation in the Tour Series cycle event in the centre of Portsmouth (80 children). 1,500 at the Pedal Portsmouth event.	Planning began for the next Pedal Portsmouth event in October - Glow Ride. Design work began for the schools walking programme funded by the Sustainable Cities bid and research into Quiet (cycle) routes has begun – expected finalisation in Q3	Successful Glow Ride in October with in excess of 1,000 participants . The Quiet Routes research is progressing well. Pompey Monster Walk to School Campaign will begin as planned in Q4.	More than 1,000 pupils from three schools completed the Pompey Monster 'Walk to School' challenge and early feedback for the campaign is very positive. The Be Bright campaign engaged with over 600 people. The Family Cycle grant has provided over 50 bikes for low income families in the city.	Steady	Some initiatives such as Bike Doctor at Cosham High Street and Commercial Road will continue into next year. Quieter cycle routes around the city have been identified, and promotion of these takes place on Q1 of 2017-18. Consideration will also be given to running the Pompey Monster 'walk to school' programme in another cluster of schools A wider series of publicly accessible cycling events are also planned for 2017-18.

Transport, Environment and Business services: Quarterly progress report (4)

Function : Management of Parking Operations

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 Position	Q3 Position	Q4 position	Trend	Director's Year End Commentary
Strategic parking review milestones achieved	At scoping and initiation stage	The project plan is in place to enable phased delivery of the review.	Implementation of the plan is underway. Good progress is being made towards implementation of the plan.	Review report prepared.	The report was reviewed by the Director of TEBS and outcomes accepted.	Steady	This report confirms the role of Parking Operations in enabling the free movement of traffic around the city whilst realising income from on and off-street parking services. Agreed action will be included in future performance reports.
Channel shift and greater efficiency of parking operational services	Use of Automatic Number Plate Recognition technology began in Q4	Channel Shift for Residents Parking Zone Permits is underway. Automated detection of parking on Zig-zag lines is planned for Q2.	On-line Residents' Parking Zone permits is due to be launched in Q3. Launch of automated detection of parking on zig-zag lines has been postponed until Q4.	On-line Resident's Parking Zones permits are live. Automated detection of parking on zig-zags lines is planned to begin in Q4.	Preparation work for moving to virtual permits including testing has taken place. Should go live Q1 of next year. Camera enforcement of school zig-zag went live as expected in Q4.	Steady	The Parking Operations service will continue to explore and pursue opportunities for Channel Shift to provide better parking services in the city.
Additional parking services for business clients	Services provided for the University of Portsmouth, PCC Property Directorate and other local authorities.	The Parking Service is currently contracting to supply expertise to a training company for the supply of services to further local authorities.	The new contract to supply expertise to a parking training company for the supply of services to further local authorities has been signed.	The team are continuing to discuss opportunities with potential customers.	Conversations are ongoing with existing and new customers over opportunities.	Steady	Parking Operations have been successful in renewing and winning contracts to provide services and expertise to other organisations with some interest coming after recent, publicised litigation. We will continue to develop this element of the service whilst ensuring that our core service is maintained.
Increased compliance with the Blue Badge schemes.	124 blue badges retained due to offences 2015-16.	45 blue badges retained in Q1 compared to 37 in Q1 2015-16.	A further 43 badges were retained in Q2 this year compared to 16 in Q2 2015-16.	60 badges were retained in Q3 compared to 39 in Q3 2015-16	50 badges were retained in Q4 compared to 10 in Q4 2015-16	Steady	The majority of badges retained in the last quarter were due to Civil Enforcement Officer business as usual interventions, which is a positive outcome from the time spent training the enforcement teams. The figures highlight that despite our success in detection and prosecution there is still a

Transport, environment and business support : Quarterly progress report (5)

Function : Highways and coastal management

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
LTP Highways schemes delivered to budget, quality and on time	Provide design / engineering support for 5 Highways projects within the LTP due to be completed by March 2017.	All 5 projects are in the design stage	1 project is in the design stage. 3 are in the implementation stage. 1 project has been put on hold.	1 project is in the design stage, consultation will be complete by end of February. 3 are in the implementation stage. 1 project on hold awaiting decision in Q4.	1 project has been completed. 2 projects are in construction stage. 1 project is in the design stage. 1 project will be subject to further review before proceeding.	Steady	The Local Transport Plan is an ongoing programme of projects funded by the Council's capital programme. This measure will be carried forward to next year, so reporting on current and new projects that are part of the overall plan
All highway alterations carried out by private developers and other non-Highway Authority bodies meet the standards of the Highways Authority	This area of work is demand led responding to the amount of development taking place in the city.	19 Highway schemes related to development are currently in progress. All schemes are compliant or responding to advice/instruction provided by the Highways Design team.	Some schemes have been completed and new ones started . All schemes currently in progress are complying with our requirements as the Highway Authority.	All schemes in progress are compliant except one which was completed without notification to the highways team. We are using our powers under the Highways Act to ensure the scheme becomes compliant retrospectively.	There are now 21 Highways schemes related to development in progress. We are continuing to use our powers under the Highways Act for the one non-compliant scheme.	Steady	The amount of development in the city has been steadily increasing creating increased demand for support from the Highways Design team. Generally these schemes have complied with our requirements as the Highways Authority.
Completion of the 2016/17 phases of the North Portsea Flood Defence Scheme and preparation for the Southsea scheme.	See major project progress report (Appendix 2).						

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Transport, environment and business support : Quarterly progress report (6)

Function : Enterprise centres management

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director 's Year End Commentary
Commercial success of the Enterprise Centres, measured through occupancy levels	Victory – 78% Portsmouth- 84% Challenge – 99%	Victory – 93% Portsmouth 100% Challenge - 88%	Victory 93% Portsmouth 100% Challenge 90%	Victory 90% Portsmouth 96% Challenge 100%	Victory 90% Portsmouth 92% Challenge 100%	Steady	The centres remain popular with small businesses. Some businesses have moved on which is both positive and encourages as it creates spaces for new business which are filled quickly resulting in high occupancy rates.
Commercial success of the Enterprise Centres, measured through income	2015-16 Income: £980,000	£248,000 rental income	£244,000 rental income	£240,000 rental income	£239,000 rental income	Steady	Rental income plus income from other Centre related services has resulted in the facilities exceeding the income target set for the financial year
Increased business support delivery and increased customer satisfaction.	Business networking service introduced. High satisfaction with rent, location and premises. Customer demand noted improved IT connectivity	Land has been rented to an IT connectivity provider and a mast installed that will serve two of the centres. In the feasibility stage for broadband at the third centre.	The monthly networking event with regular speakers has been popular and well attended. The Mast for better IT connectivity is now in place. An offer for business centre management services at other PCC sites has been accepted.	The networking events remain popular. Southern Entrepreneur events are also hosted. The IT mast is now in operation. The team are now providing management services to the new Limberline industrial estate.	The networking event is still popular with new attendees each meeting. Information on other events is also communicated to businesses. Business Support continues to be offered and Solent Growth Hub information shared.	Steady	It is an extremely positive situation for local businesses being able to attend the networking events as our Business support offer is not limited to just the occupants of the centres. A new measure will be introduced next year to evaluate this.

Transport, environment and business support : Quarterly progress report (7)

Function : Employment, learning and skills service and PCMI manufacturing

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Delivery of the first phase of the City Deal employment programme	Performance and delivery aims of the programme based on City Deal pilot.	Mainstream programme launched May 2016. 20 participants engaged in Q1.	A further 70 candidates were engaged in Q2.	An additional 65 participants have joined the programme in Q3	A total of 160 participants are now actively engaged on the programme.	Steady	The programme is gaining momentum in terms of recruits and achieving outcomes and will continue for at least a further year.
Successful delivery of all ELS contracts to meet the requirements of funding bodies.	Contract delivery requirements set by major clients.	Currently on target to deliver.	Currently on target to deliver to the requirements set by major clients.	Currently on target to deliver to the targets and outcome levels set by Prime Contractors and Funding Bodies.	Continuing to achieve contractual expectations in all areas.	Steady	The Work Programme has now recruited its last customers and will continue to support them for a further year. Work Choice has been extended until at least October 2017 and we will continue to support customers for another 12 months beyond this date.
Financial viability for ELS and manufacturing service (income v expenditure)	Budget as at Q4 and income projections for the year.	ELS currently on target to achieve income projections. Manufacturing below income projections.	ELS currently on target to achieve income projections. Manufacturing continues to be below income projections	ELS currently on target to achieve income projections. Manufacturing income continues to be lower than expected, although costs have also reduced.	ELS on target to achieve income projections and a financial surplus at year end. Manufacturing to end the year slightly below income expectation.	Steady	ELS have performed very well in the last year and their financial position reflects that endeavour. Income for both ELS and Manufacturing will be closely monitored in 2017-18 with appropriate action taken on costs and revenues to achieve a balanced budget by year end
Number of people supported to acquire skills for work	Projections of people to be supported under the contracts to be delivered this year.	92 new starts in period Apr to June	A further 90 new starters commenced the programmes in Q2.	105 new starts in Q3	110 new starts in Q4	Steady	This activity is a vital one supporting, as it does, people back to work some of whom have been a long way from the labour market for a variety of reasons. The programme will run again in 2017/18 and hopefully will be as demonstrably successful
Number of people supported to move into sustainable employment		58 people entered employment	A further 37 people entered employment in Q2.	An additional 56 people have entered employment in Q3	62 additional people have entered employment	Steady	We will continue to focus on securing employment for customers during the whole life of the respective contracts including their 'wind down' periods.

Culture and City Development Q4 (January 2017 – March 2017) Director: Stephen Baily

Culture and City Development : Quarterly progress report (1)

Function : Libraries and Archives

Agreed measures of progress	Baseline as Q4	Q2	Q3	Q4	Trend	Director Commentary
Delivery of SCL Universal Offer & Promises :						Targets set which show an increases , without additional resource, is ambitious. The increase in virtual engagement whilst physical football is sustained is a positive picture . We continue to explore alternative delivery models moving forwards such as shared services
Reading Total Loans/issues	623,147	Q2 307,791	Q3 440,844	Q4 570,646 total for the year	Deteriorating	This is less than last years figures but in line with national trends. In 2017/18 stock focus groups and a stock selection review will seek to increase issues
Information enquiries	109,800	Q2 Total will be provided for the year Q4	Q3 Total to be provided for the year in Q4	Years total 113,350	Improving	A significant increased resulting from targeted support for identified vulnerable groups
Digital: 55 of Peoples network	122,820	Q2 47,036	70,756	Q4 105,840 total PN hours	Steady	Negative trend due to IT “downtime” caused by problems with the line and individual faults in various locations making the PN unavailable for public use. Still a significant demand for this service
Health & wellbeing: proposal for health hub	Proposal Report	Proposal Report Costings and Meeting with Adult Social Care	Proposals for a Health Hub included in ACE bid Jan 2017	ACE bid was unsuccessful but furniture is being purchased using funds from the Macmillan project	Steady	This aspect of the ACE bid will be funded via Macmillan Cancer Support and ongoing work with Public Health and Adult Social Care will seek to increase accessibility and increase use and partnerships
Learning: taster sessions	1049 learners	Q2 382 learners	Q3 861 learners	Q4 1,107 total for the year	Improving	Target achieved through engagement with learning providers Highbury and Portsmouth College
Cultural: Bookfest participants	819	Total available Q4	Q4 results	Q.4 945 total	Improving	Increase on previous year participation due to increased engagement with cultural sector and diverse choice of speakers
Children Promise: Summer Reading Challenge	2,700 participants	Q2 2,846	Total for the year – completed and achieved		Improving	Participation figures supported by comprehensive promotion programme to schools ahead of the event and engaging “Roald Dahl” theme
Six Steps: V1 Helpline Enquiries	4,304	Q2 2,591	Q3 3,102	Q 4 4,610 total	Improving	Achieved through ongoing engagement with VI community

Culture and City Development : Quarterly progress report (3)

Function : Libraries and Archives

Agreed measures of progress	Baseline as at Q4	Q2 position	Q3 position	Q4 Position	Trend	Director Commentary
Continue to Increase virtual visits by 5% from 2014 to 2017 to 5% annually	56,796	Q2 Virtual issues 23,404 Virtual enquiry 24,687 Total 48,091	Q3 Virtual issues 34,204 Virtual Enquiry 35,212 Total 69,416	Q4 Virtual issues 45,928 Virtual Enquiry 49,178 Total 95,106	Improving	Increase due to the introduction of new services, therefore this level use should sustain but level of increase will be less acute unless new services are identified.
Retain 1m physical visits	973,00	Q2 493,098	Q3 713,471	Q.4 974,631` Total visits for 2016/17	Improving	Visits increase achieved due to increasing diversity of building uses, i.e. for community groups and activities, by third party organisations, class visits, events etc
ACE funding bid to develop the central library information hubs 1 st Floor	Scope Project	Scope Project Costings obtained	Feasibility reassessed Q3 for inclusion in ACE bid submitted Jan 2017	Bid reported unsuccessful March 2017	ACE confirmed bid met all categories but funding stream was 4x oversubscribed. Aspects of this bid, i.e. Information Hubs and Portsmouth Stories will go forward as separate bids to Libraries ACE funding	
Update the archive catalogue to Spydus 10 and develop web access by : Transfer LMS server to hosting civic server Implement E DI invoicing model Develop events booking functions Develop Volunteer access Develop Mobile app	Contract set up Civica Awaiting move to Civica server to deliver functionality	Contract set up Civica Awaiting move to Civica server to deliver functionality Q2 - awaiting construction of VPN tunnel (delay)	Q3 Move to Civica Server now scheduled for Q4 due to staff sickness at Civica and technical issues	Q4 Server move achieved Jan 2017 Spydus 10 training and testing March 2017 Upgrade to Spydus 10 scheduled for May 2017	Steady	Upgrade to Spydus 10 will begin Q4 but Project dates reassessed September 2016. Remain on track for revised dates completion June 2017
Retain SLS traded service buy back SLS Reader development participants	97% 8047	8047 Q2 Total in Q4	Total in Q4	97% Buy back Total Portsmouth Book Award and Literature Quiz participation 8,377	Steady	Achieved buy back supported by additional level 2 service and provision of services to some West Sussex schools Reader development participation increase due to increased offer of activities

Culture and City Development : Quarterly progress report (3)

Function : Museums

Agreed measures of progress	Baseline as at Q4	Q2 position	Q3 Position	Q4 Position	Trend	Director Commentary
Continue to deliver the 5 year transformation of the D-Day Museum in– start work on site (now May 17; new museum open revised date Easter 2018)	See Project list					
Delivery of the new Butterfly House for Cumberland House <ul style="list-style-type: none"> - Demolition phase - Restoration phase 	Project manager budget and core funding secured	-Communication & engagement events held in Q2 and views collated -Contract for Demolition prepared and submitted out for tender including repairs and restoration	Contractor in place for demolition ready to start early 2017. New glasshouse with Procurement for defining the remaining process	Demolition complete - some remedial works still to finish. Contract developed for the new build	Steady	Works on track for completion 2 nd Quarter 2017
Increasing cash donations as part of the savings programme :Generate additional £7k through cash donations: total £18k	£11,000 secured 2015/16	6,600	£9,500	Achieved Q3	Improved	2 year Target achieved
External funding secured from HLF for the Edward King collection	Political agreement	Bid submitted Q2 .HLF declined bid and no obvious way forward for alternative as HLF are the main funder of heritage			Deteriorated	Although bid declined there will be some modest conservation work enabled through cash donation target which will be achieved
Sustain visitor numbers 300,000 across all museums in 16/17	294,590	204,326	243,311	Total 267,100	Deteriorated	Overall visitor figures decreased by 9.32%. Lower figures due to the closure for refurbishment of both Cumberland House and D Day Museum. Positive figures at Southsea castle and Charles Dickens . Plans for increasing visits at City Museum are the new café and shop will encourage new and repeat visits along with redisplay in the Decorative Art Gallery and re programming and events planned for a range of audiences

Culture and City Development : Quarterly progress report (4)

Function : Community Centres

Agreed measures of progress	Baseline as at Q4	Q2 position	Q3 Position	Q4 Position	Trend	Director Commentary
Continuing to broaden the programmes in all centres through the actions plans based on the 2014 bi annual surveys .	Overall usage of 5 to 15 year olds is 11.3% . 5% increase over 2 years by 2017	Discussion completed with each association their strategy to increase usage	Programme - discussed, with positive responses from associations, one or two need to focus on their operational management as a priority	Increased by 2%	Improved	Increased by 2% represents an improvement but target not achieved . This work is ongoing
Increase the overall centre building utilisation figures	Utilisation ranges from 70% to 30% averaging 46%. Target to increase overall by 5%	Discuss with associations their individual target increases and actions to achieve	discussions held with the associations and actions discussed / planned	Increased by 3 %	Improved	Increased by 3% represents an improvement but target not achieved . This work is ongoing
Develop, complete and analyse the 2016 to 2018 bi annual surveys	3,000 annual surveys completed 2014	<ul style="list-style-type: none"> - Feedback forms collated and inputted - Associations promoting 	Over 3,000 surveys within deadline by the end of Q3 Report to be produced for Q4	Surveys and reports completed and fed back to associations in February 2017	n/a	Draft report for CLS Q4 : summary and action plan
Achieve 2016/17 savings target (£42,000) by ceasing to second PCC staff, and replace with grant aid for staffing , where appropriate	2015/16 community associations budget was a mix of directly funded staff and grant funding	Savings achieved in April 2016 as no PCC staff in centres managed by associations	Achievement Q1		n/a	

Culture and City Development : Quarterly progress report (5)

Function : Parks and Open Spaces

Agreed measures of progress	Baseline as at Q4	Q2 position	Q3 Position	Q4 Position	Trend	Director Commentary
<p>Begin work to implement a new grounds maintenance contract in house by January 1st 2017</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 109</p>	Political agreement secured	<p><i>Vehicles</i> : order for hire prepared</p> <p><i>Plant & Machinery</i>: procurement option for hire / purchase/ ex-demo / used exploring all options</p> <p><i>TUPE</i> : measures letter sent to idverde for comments</p> <p><i>Training</i> : courses identified</p>	<p>-<i>Vehicles</i> : order delivered and stored at City Museum</p> <p>-<i>Plant & Machinery</i>: procurement completed for 1st phase of equipment for next quarter a mix of hire / purchase/ ex-demo / used</p> <p>-<i>TUPE</i> and H & S training meeting held and FAQ developed</p> <p>-Employer liability information delayed but finally received .</p> <p>Outstanding issue is the longer term north depot see below .</p>	Project in full operational phase and being maintained to specification and task frequency of former contract for initial period. Final phase of equipment Procured.	Steady	Staff transfer and new operation was achieved on target under PCC management for 1 st January 2017 .
Provision of new premises at Northharbour for council and contractor staff to accommodate vehicles, workshop and storage by December 2016	Agreement to move from current site Ave de Caen	<p>Current parks staff planned to move from civic end for November 2016</p> <p>New grounds maintenance staff IT set up on target for set up December</p> <p>Client services planed move from Avenue de Caen site for end of year</p>	<p>Political decision to commercially let premises at Northharbour road and alternative options developed and actioned :</p> <p>-parks staff moved to 5th floor civic offices</p> <p>-Key staff and managers from idverde also located at civic offices</p> <p>-Provision of premises in the South at Ave de Caen to accommodate vehicles, workshop and storage</p> <p>-Provision of premises in the North continue to be explored</p>	<p>Decision to commercial let Northharbours premises has been re-visited but remains unchanged.</p> <p>Also operational at the Burrfields road depot this quarter</p>	Not on track	Currently operating at serval satellite sites and long term premises solution still to be confirmed .

Culture and City Development : Quarterly progress report (6)

Function : Parks and Open Spaces

Agreed measures of progress	Baseline as at Q4	Q2 position	Q3 Position	Q4 Position	Trend	Director Commentary
Develop options for community-based management model to improve the Parks service and to develop a more dynamic service responsive to local communities opportunities for real localism.	Briefing paper on community-based management model to explore options	Continue to explore options on: -friends groups -Volunteer model -Enterprise and voluntary sector and with local communities -partnerships with organisations and groups representing people with learning disabilities -potential for improved access to external funding.	As Q2 : as this is a longer term plan to be explored once transfer completed and schedules of work in place To be explored Q1 2017	Nursery and growing project in early stages of inception at Ave de Caen. Small commercial venture with opportunities of support from volunteers including this with learning disabilities	Steady	To develop framework for community-based management model
Review current grass areas and consider meadowland replacements, and undertake ecosystem survey	Will be addressed as part of the Green Review 2017 Property and Housing		Will be addressed as part of the operational review in 2017 Within Culture and City Development	Meadow areas sown across the city as part of Portsmouth in Bloom initiative and monitored during summer seasons 2017	Improving	
Spending on parks and open spaces to be within all budgets set for 2016/17	The 2015/16 cash limited budget outturn was an overspend of £6,626.	The parks budget forecast outturn as of the end of Q2 is a projected surplus of £23k but it is anticipated the service will come in within approved budgets	The savings realised from transferring the GM contract in house will be invested in operational assets as planned in Year 1 and this will be a balanced budget position	Parks & open spaces ended the year with no budget variance . The service will continue to operate within approved budgets	Steady	Operational assets planned purchase for Yea 1 for the in house service remains in budget with a balance budget position

Culture and City Development : Quarterly progress report (7)

Function : Registrars and Coroners

Agreed measures of progress	Baseline as at Q4	Q2 position	Q3 position	Q4 Position	Trend	Director Commentary
Achieve 100% birth registrations with 5 working days	100%	Data available April 2017		100% achieved In 5 working days	Retained high performance	Remaining Data available April 2017 Able to offer appointments within 2 working days of appointment request. Customer does not always wish this and chooses a later date that is more suitable for them.
Achieve 100% still birth registrations with 5 working days	100%	Data available April 2017		100% achieved In 5 working days	Retained high performance	
Achieve 100% registrations of death within 2 working days of appointment request	95%	National problem registering deaths as delays in medical certificate cause of death .All registers working closely with general registrars to resolve nationally	National problem registering deaths within 5 working days of death as delays in medical certificate of cause of death . Working closely with QA to identify the areas that are causing this within their systems and working towards solutions with them.	Achieved appointments offered same day of next day . National problems with Registering deaths in 5 days of death . This is due to Drs not signing the MCCD in time and also delays caused by Bereavements Services not issuing MCCD's to relatives in a timely manner On going discussions with QA to reduce waiting times	See commentaries	
Achieve 100% declaration of marriage and civil partnership within 10 working days of appointment request	100%	Data available April 2017		100% achieved In 10 working days	Retained high performance	
Customer satisfaction with registrars service	98.2%		New survey being conducted. Results will be known from 1 st April 2017.	99.05%	Improved	
Implement replacement coroners IT caseload management system	Feasibility complete		System testing completed. Staff training w/c 13/2/17 and go-live 20/02/17.	WPC system successfully implemented . As training and processes in place	n/a	

Culture and City Development : Quarterly progress report (8)

Function : Registrars and Coroners

Agreed measures of progress	Baseline as at Q4	Q2 position	Q3 position	Q4 Position	Trend	Director Commentary
Achieve timeliness targets for inquest for those cases that take over 1 year	394 Inquests 14 over 12 months amounts to 3.5%	Increase in Inquest cases continues . Data is in calendar year so available January 2017	682 Inquests in 2016 13 over 12 months Amounts to 1.9%	Achieved in Q3	See commentary	Increase in cases is over 73% yet despite this increased workload the timelines targets have improved and reduced to only 1.9% of cases taking more than a year - an improvement of 1.6%
Complete options appraisal re mortuary and bereavement service	Agreement to explore options	Investigation and regional benchmarking	Feasibility and costings modelling continues. Meeting taken place with Home office pathologist In Q3 to discuss feasibility of in house pathology team	Feasibility phasing continues .The preliminary option appraisal identify West Sussex as a key partner to support the business model and discussions are ongoing .	n/a	

Culture and City Development : Quarterly progress report (9)

Function : Seafront Services

Agreed measures of progress	Baseline as at Q4	Q2 position	Q3Position	Q4 Position	Trend	Director Commentary
Increase visitor numbers for events by 5%	710855	Q2 - 452,500 Accumulative 549,289	Q3 - 94,250 Accumulative - 643,539	Q4 4315, Total 647,884I	Steady	A growth of 3% was achieved if the consideration of the 100K less in Americas cup attendances is considered .Number of events increased and were well attended. KPI will be reconsidered for 2017 to reflect KPI in our control such as number of day of events as or depth and breadth KPI
Review byelaws and review and simplify byelaws of restriction	BBQ Byelaws Dog orders Byelaws	Dog Byelaws: instigated legal review to explore options in parks and open spaces including the seafront . Dog bylaws current legislation does not expire until October 2017 BBQ : briefing to portfolio order in Q3	BBQs Q3 review has been undertaken & CS&L report being taken in Q4. Dog Byelaws - Q3 whole city review initiated and timeline drafted for implementation of new options using the PSPO legislation to come in from 1 st October. Consultation on new options will be undertaken in Q1 of 2017-	The current legislation enables a direct transfer from DCO to PSPO. Q1 consultation for PSPO is still planned	Steady Steady	
Deliver two concessions options in pilot form for delivery and evaluation	Research on possible concessions	NMRN concession delivered Q2 for July / August and currently under evaluation -Option for HotWalls studio being developed as a pilot in Q3 -3 rd pilot explored but infrastructure not in place in time for height of season but will be option for 2017	Two concession options have been delivered - National Museum of the Royal Navy in Q2 and in Q3 with new models of artist's initiatives at the Hotwalls. Evaluations from these will inform a new Pop-up options for 2017-18.	Pop ups concession feasibility explored for next year summer season .	Steady	Target Achieved in Q3 Targeted to launch four new pop-pop food and retail sites across Southsea Seafront for the summer months as part of the 'POP Portsmouth: Reducing Barriers to Entrepreneurialism' project

Culture and City Development : Quarterly progress report (10)

Function : Seafront Services

Agreed measures of progress	Baseline as at Q4	Q2 position	Q3Position	Q4 Position	Trend	Director Commentary
Complete Beach Huts costs analysis weekly and annual and options for change	Previous full Cost full analysis not completed. Annual income target was £89,447	Income target achieved for annual lets in Q2 despite higher than average fees and charges % increase. Weekly lets marketed and income increased but more to do . Full cost appraisal to be completed for portfolio member Q3 to inform fees and charges	Benchmarking completed in Q3 and informed Fees and Charges report to CLS in Q4 . Proposal on fees and charges is overall increase 1.2% and weekly lets increased by 20% and will be full refurbished and marketed to build on income stream	Completed q3	Improving	
Poster sites : Full cost analysis and identify areas to increase income and advertising opportunities	Income target: £32k Income actual :£29k No advertising packages	Income Target : 32k Income actual: 16k 2 advertising packages in place	Income actual: 24k Branding map developed to illustrate extensive footfall and traffic flow on various strategic site locations. E-marketing shot to new database targeted along the M27 corridor. Stringent programme of removal of fly posters on leisure land continues to be an opportunity to convert illegal fly posting into advertising income	Achieved £31,833	Improving	Achieved target
Full cost analysis of splash pool to inform programming and opening times in 2016/17	Previous Cost analysis not completed so baseline not available	Successful Q2 season with over 30k visits throughout the season ending September Cost analysis to be completed Q3	Costs analysis completed and to be discussed with portfolio member on options . Pre season recruitment and pre season planning Q4	Proposal to commercial sector and alternative delivery options but as a complex delivery model there was no not interest received	Steady	Will continue to deliver in house and date of opening on target for May 1 st bank holiday to attract over 30K visits

Culture and City Development : Quarterly progress report (11)

Function : Visitor services

Agreed measures of progress	Baseline as at Q4	Q2 position	Q3 Position	Q4 Position	Trend	Director Commentary
Increase in visits from “staying visitors” over 3 years of 8% from 2016 to 2019	726,000	As Q4	The South East data shows an increase in domestic overnight trips regionally of around 5% and international overnight trips of around 9% so this would indicate positive trending for the city in September data Continuing this momentum through the initiatives outlined in 2017 -2020 marketing strategy to be adopted at PRED in Q4	2017 -2020 marketing strategy adopted at PRED and action plan will be implemented	Steady	Data is bi- annual and 2016 data will be presented in September 2017 . Hampshire CC data will be available mid year which will give a regional indication of visits and spend . Continuing to develop options for accommodation in the city is key to encourage overnight stays
Increase visitor spend of 10% over 3 years from 2016 to 2019	£463Million	As Q4	The South East data has an increase in associated in visitor spend indicating a positive outlook for Portsmouth figures to be released in Q3 2017	2016 data is on target to be released Q3 2017	Steady	As above

Function: Economic Growth

Improve skills levels	Strengthening of post given the importance of the priority for the city	Employment and Skills post selection and interviewing process completed	Economic Growth Skills Officers in post Q3	Objectives agreed. First objective achieved of Future Portsmouth skills events held in Q4	Steady	
Increase Foreign Direct Investment (FDI)in the city	Collection of intelligence of current investment in the city		7 successful projects and reported to Department for International Trade	8 successful projects reported to DTI setting new standard for success	Improved	Economic dashboard produced quarterly to underpin all economic growth interventions. Quarterly dashboard will be presented to members
Increased business survival by providing business with targeted business support	Signposting to Enterprise First and Solent Growth Hub		The EG team won innovative business initiative award from FSB for this support work to business in partnership with UOP and Shaping Portsmouth.	Funding obtained for Entrepreneurial Spark programme launched in June 27 th 2017.	Steady	Total funding obtained is £10K from NatWest and it is for a pilot programme of 3 months
Review Market offer within the city		undergoing a wider consultation to inform re-procurement	Appointed consultants to produce a 5 year Street markets strategy	Draft street market strategy produced for further consultation Received member feedback and currently under revision	Steady	All market contracts in place for 2017

Culture and City Development : Quarterly progress report (12)

Function : Development Management

Agreed measures of progress	Baseline as at Q4	Q2 position	Q3 position	Q4 Position	Trend	Director Commentary
Ensure applications dealt with in national standard timeframes: major applications (target 60%)	89%	100%	80%	100%	Stable	The Major ‘application type’ achieved 85% for the year end. This is substantially above the national target, however it does not improve on the 2015/16 year end which was 89%. The resourcing challenges in the service area have impacted on performance
Ensure applications dealt with in national standard timeframes: minor applications (target 65%)	80%	86%	88%	91%	Improved	The Minor ‘application type’ achieved 82% for the year end. This substantially exceeds the national target and is 2% above the performance for the 2015/16 year end.
Ensure applications dealt with in national standard timeframes: other applications (target 80%)	83%	92%	87%	91%	Improved	The Other ‘application type’ achieved 89% for the year end. This is 9% above the national target and 6% above the performance for the 2015/16 year end

Function: Sports and Leisure facilities management

Procurement of a new leisure facilities contract for the management of our 6 leisure facilities	Q4- Prepare Stage 1 ITT submission deadline on 8th August Q1-Prepare Stage 1 ITT submission deadline on 8th August Q2- Stage 1 approved at the gateway board .Stage 2 bid went forward in September to Gateway 4 . Analysis of 3 bidders to select preferred bidder assessed against the criteria of a Specific Specification to announce the decision in November.				Completed
Develop new Sports Facilities and Playing Pitch Strategy in partnership with stakeholders – approval in municipal year	Fieldwork in progress	Audits and interviews largely completed	Audits and interviews largely completed		On track

Function: Building control

Explore expansion of the BC partnership and options for Trading Company	Fareham & Gosport already combined with Portsmouth Aim : 1 st phase end of December				Havant and EHDC taking reports to various decision making processes to agree moving into the extended Partnership – report to be prepared for Cabinet to agree extending partnership
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Culture and City Development : Quarterly progress report (13)

Function : Planning

Agreed measures of progress	Baseline as at Q4	Q2 position	Q3 position	Q4 Position	Trend	Director Commentary
Review of Local plan to take plan period to 2034 and identify how employment and growth will be accommodated in the city	Resources now in place to take forward	Draft development sites report is under preparation. On going retention issues regionally and nationally	AS Q3	Delay of 2 quarters	Steady	Early 2019n adoption due to additional technical s Assessments , extensive stakeholder consultation and government process
Adopt a contaminated land strategy to agree the Councils approach to identifying and bringing about the remediation of statutory contaminated land. Its primary aim is to address the legacy of historical contamination and the harm that pollution can cause to health or the environment	Draft 'Part 2a' Strategy available	Agreement for decision report at PRED	Consultation continues and plan adoption is now anticipated June 2017		Steady	
Complete a public realm strategy including a strategy for concessions and street trading		On going preparation of document for public consultation	Work progressing slower than anticipated due to loss of staffing capacity		delayed	
Implement a revised CIL neighbourhood spend process	Spend profiles	Projects to be agreed on a case by case basis against the agreed framework CIL monies allocated to projects in Milton ,Paulsgrove , Cosham and Hilsea . Ongoing discussions over allocating funds in other wards, for example improvements to adventure playground in Charles Dickens	Funds continue to be allocated against various projects across wards with the support of ward members and the local community	Funds continue to be allocated against various projects across wards with the support of ward members and the local community. significant spends in Charles Dickens and Eastney & Craneswater on public improvements	Steady	

Culture and City Development : Quarterly progress report (14)

Function : Planning

Agreed measures of progress	Baseline as at Q4	Q2 position	Q3 position	Q4 Position	Trend	Director Commentary
Complete a heritage strategy	Draft strategy in place	Discussion held with Historic England to discuss development of an implementation strategy	Historic England unable to provide the support previously envisaged considering other options on how it will progress		Delayed	Adoption anticipated Q2 2017
Continue to work with landowners and other public bodies to maximise development opportunities in the city		For the local plan , Landowners invited to submit sites for consideration	Continuing discussions with city centre land owners in connection with the road		Steady	

Community and Communications
Q4
(January 2017 – March 2017)
Director: Louise Wilders

Community and communications : Quarterly progress report (1)

Function: Channel Shift Programme and City Helpdesk

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	trend	Director's Year End Commentary
Reduction in PCC spending on post/carriage and print by 5%	Reduction of £258k achieved 15/16, creating a baseline of £225,320 for print and advertising	Total spend on print and advertising in Q1 was £74,511	Total spend on print and advertising in Q2 was £59,386 - 10% down on Q2 in 2015/16	Total spend on print and advertising in Q3 was £47,233 – 11% down on Q3 15/16	Total spend on print in 16/17 was £135,170 compared with £140,419 in 15/16 – down 3.7%	improving	<p>2017/18 measures:</p> <p>Change this measure to the 2 below:</p> <p>MAP project – corporate spend on print, recorded through Panacea, remains below £150Kpa</p> <p>MAP project – corporate spend on advertising and public notices, recorded through Panacea, remains at less than £120K pa</p> <p>Total spend on print and advertising recorded in Panacea in 2016/17 was higher than for 2015/16 – this is because public notice spend was added part way through 2015/16 so the two years do not provide a direct comparison. Measure will remain for 17/18 but the potential for savings decreases annually as the numbers are now very low.</p>
No reduction in levels of customer satisfaction	94% rated service good or very good	Next survey July 2016	Customer satisfaction survey in July – 91% rated service very good or good with 63% of customers scoring 10/10	Customer satisfaction data in Nov/Dec – 94.4% rated service good/very good – 73% of customers scored 10/10	Customer satisfaction data from Jan/Feb/March - 92% rated service 8, 9 or 10 out of ten	steady	<p>2017/18 measures</p> <p>Change this measure to the 2 below:</p> <p>NEW: City helpdesk: maintain customer satisfaction levels above 90%</p> <p>NEW: City helpdesk: reduction in overall offline customer contacts</p> <p>Customer satisfaction is now measured continually rather than six monthly, creating a more stable measure. This will continue to be measured</p>
Increase in online payments, direct debits or other automated channels	£8.8m online payments 2015/16 984 online direct debit forms 33% in person payments at quick pay kiosks	£2.487m in Q1, up 15% on Q1 in 15/16	Online income £2.509m in Q2 – up 11% - 1138 direct debit forms in Q2, representing 77% of all direct debit set-ups quick pay handled 5,500 transactions in first six months – 26% of all cashiers transactions 2,836 sign-ups to the new My Portsmouth account in Q2	Online income was £2.530m in Q3 – up 9% Quick pay handled 2024 payments – 22% of cashiers transactions There were 2337 new sign-ups to the My Portsmouth account in Q3	Online income was £2.358m in Q4, up 11% compared with Q4 15/16. In person cashier payments fell by 21% in Q4 compared with 15/16. There were 2,913 sign-ups to the My Portsmouth Account in Q4	improving	<p>2017/18 measure</p> <p>Change this measure to: Increase in payments made online, through direct debit and via other automated channels</p>

Community and communications : Quarterly progress report (2)

Function: Channel Shift Programme and City Helpdesk

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	trend	Director's Year End Commentary
Increase in web enquiries submitted via online forms	14197 forms submitted in 2015/16	4735 in Q1 (including app forms)	6790 online forms (from web, app and firmstep) submitted in Q2, 64% increase on Q2 15/16	5447 online (web, app and firmstep) forms were submitted in Q3 - a 79% increase on Q3 in 15/16	5,818 online (web, app and firmstep) forms submitted in Q4, a 37% increase on Q4 15/16	Improving	2017/18 measure Change this measure to: Increase in digital transactions via web and app forms
Reduction in spend on small IT systems							Remove for 2017/18 as not responsibility for us
Ongoing savings target achieved	Predicted 2015/18 - £1m Actual so far - £1.7m						Remove for 2017/18 pending next capital bid

Community and communications : Quarterly progress report (3)

Function : Revenues and Benefits

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director 's Year End Commentary
Council Tax collection rate	95.83%	28.56%	55.23%	81.83%	95.33%	Steady	<p>All of these measures will continue for 2017/18</p> <p>apart from remove: processing accuracy due to changes in what is being measured here) and;</p> <p>Council Tax & NNDR Debt recovery , currently responsibility split between 2 directorates so will review this measure Q2</p> <p>For council tax, whilst collection % was less than 15/16, at 95.33% the improvement in the tax base means total for council tax in year collection, more that £4.2million extra was collected than in 15/16.</p> <p>Best ever year for NNDR in year collection</p> <p>Increase in overall tax base by 6% (annual increase was 3.7%), some of this increase was attributed to proactive work around:</p> <ul style="list-style-type: none"> Single Person Discount review completed making significant improvement to the tax base Empty property discount removed making significant improvement to the tax base <p>Overall Housing Benefit debt below £9million, decreased from end of previous year by £15k (this is in spite of over 3 million extra debt raised in 16/17)</p> <p>The amount of subsidy forecast to receive is down on 2015/16 as the level of housing benefit expenditure is reducing (this is in main due to the welfare reforms). However the % of subsidy claimed against expenditure remains steady 98.16% at end of Q4 (97.98% at end of Q4 2015/16)</p>
NNDR collection rate	99.62%	35.15%	58.94%	84.67%	99.80%	Improving	
Council Tax & NNDR Debt recovery	Annual figure – debt reduced from £16,108,369 to £13,357,459 2015/16	£14,077,783 (Q1 increase relates to increases in prior year debit relating NDR)	£12,597,402	£11,111,525	£12,864,554	Improving	
Cycle time for new claims	24 days	21 days	21 days	21 Days	21 Days	Improving	
Cycle time for changes of circumstance	8 days	8 days	8 Days	8 Days	7 Days	Improving	
Processing accuracy	98%	97%	97%	97%	97%	Steady	
Housing Benefit overpayments raised	£3,880,202	£829,370	£1,786,507	£2,540,523	£3,193,839	Steady	
Level of outstanding housing benefit debt	£8,990,746	£9,003,112	£9,153,326	£9,117,049	£8,975,702	Steady	
Housing Benefit subsidy received	£109,774,865	£29,568,321	£55,596,072	£80,812,412	£105,490,323	Steady	

Community and communications: Quarterly progress report (4)

Function : New business and Traded Services

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director 's Year End Commentary
Income generation targets: Design £150,000	£188k for year	£30k	£65,173	£151,228	£191,692	Steady	Measure will continue for 2017/18 Despite reducing print through the MAP project, design maintained sufficient income to meet the cost of the service
Commercial Services Benchmark £4.3m in 2015/16 Page 120	£4.3m for year	£3.233m	£3,386m	£3,946m	£4,096m	Deteriorating	Measure will continue for 2017/18 Gross income reduced to several key services ceasing and continued impact from school acadamisation programme. It is worth noting at the outset of traded services it was assumed the value of support services delivered to schools was 4.3m with increased acadamisation and cost saving initiatives by schools it is likely that the position will continue to deteriorate therefore for 2017/18 the focus will be delivering framework opportunities for academies and securing work from other authorities.

Function: Democracy

Achievement of statutory timelines in relation to Fol	53%	64%	68%	68%	91.6%	Improving	Measure will continue for 2017/18
Implementation of ModGov	Analysis	Analysis complete review of models	Project moved to plan stage	Still in planning stage	Still in planning stage	n/a	Measure to be removed for 2017/18 incorporated within channel shift programme

Community and communications : Quarterly progress report (5)

Function : Communications and Marketing

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Position
Value of media coverage generated by PR activity in 2015/16	£905k of media activity generated in 2015/16	£141k compared with £135k in Q1 2015/16	£330,552 compared with £248,154 in Q2 2015/16	data not available	£164,045 in Q4 compared with £164,117 in 15/16	Improving	<p>2017/18 measure</p> <p>Replace this measure with - Equivalent advertising value of media coverage generated by PR activity</p> <p>As a result of budget cuts and a redundancy within the team, EAV was not recorded in Q3 and a decision taken not to invest resources in working through the backlog. Coverage increased in the three quarters that were recorded.</p>
% staff proud to work for the council	64% proud to work for council	64% proud to work for council	64% proud to work for council	64% proud to work for council	64% proud to work for the council	Steady	<p>2017/18 measure</p> <p>Combine the next two measures to: Internal communications: % of staff who feel well-informed and proud to work for the council</p> <p>Measured through staff survey, with next one planned for autumn 2017.</p>
% staff feel well-informed	60% well-informed responses in staff survey	60% well-informed responses in staff survey	60% well-informed responses in staff survey	60% well-informed responses in staff survey	60% well-informed responses in staff survey	Steady	<p>Remove this measure for 2017/18 see box above</p> <p>Measured through staff survey, with next one planned for autumn 2017.</p>
Measures of return on marketing investment	ROI for adoption and fostering marketing £1.6m 2015/16	Measured twice a year	Evaluation done twice a year, in Q2 measured £1,046,493 ROI from Q1 and Q2	Evaluation done twice annually, next measure due in Q4	ROI for marketing activity in Q3 and Q4 at £774,000 – 2016/17 total is £1.82M	Improving	<p>2017/18 measure</p> <p>Replace this measure with:</p> <p>External income generation target of £40,000 from Port Creative, encompassing design, marketing, communications and market research</p> <p>Add new measure: Social media reach Email marketing and communication reach Email unique subscribers Email open rate</p>

HR, Legal and Performance Q4 (January 2017 – March 2017) Director: Jon Bell

HR, Legal and Performance : Quarterly progress report (1)

Function: Human Resources

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Sickness absence	8.4 days per employee per year	8.4	8.4	8.26	8.2	Improving	Performance remained broadly stable over year. Fuller reports provided to Employment Committee
All restructures and other organisation change successfully managed	Achieved	Achieved	Achieved	Achieved	Achieved	Stable	
No successful Employment Tribunal cases as a result of poor HR practice	Achieved	Achieved	Achieved	Achieved	Achieved	Stable	
Recruitment end-to-end time (i.e. to employment start date)	65 days	62 days	67 days	66 days	66 days	Stable	
Apprenticeship numbers	68 (including pipeline)	75	71 (including pipeline)	72	74 (including pipeline)	Improving	Numbers anticipated to increase sharply in 17/18 due to introduction of apprenticeship levy

Function: Directorate

Traded Services: reduce dependency on cash-limit finance by developing trading opportunities	50%	48%	48% of service funded through cash limit	Achieved	Achieved	Stable	External income continuing to increase due to new Internal Audit clients
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Hr, Legal and Performance : Quarterly progress report (2)

Function : Legal Services

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Turnaround times on childcare cases (% within 26 week target)	70% within 26 weeks	83%	57%	66%	77%	Improving	Performance continues to be strong although will be challenged in future as caseloads increase
No major projects delayed due to failures to provide effective legal support	Achieved	Achieved	Achieved	Achieved	Achieved	Stable	Although no delays caused by failure to provide adequate legal support, some projects are challenged for various other reasons (see other directorate reports)
Land Charges – complete searches within 26 working days	100%	100%	100%	100%	100%	Stable	Performance stabilised following major system change. Reduction in target to be considered for 17/18

Function: Internal Audit

% annual audit plan complete	100%	7%	57%	78%	100%	Stable	Performance continues to be strong despite increasing numbers of external clients
Number of exceptions identified	1 critical, 98 high	0 critical, 9 high	1 critical, 40 high	2 critical, 79 high	6 critical, 124 high	See comments	Audit activity identifying increasing numbers of exceptions.

Function: Corporate Strategy

Maintain schedule of funding opportunities	Monthly updates provided to Leader	Achieved	Achieved	Achieved	Achieved	Stable	
Achieve statutory deadlines regarding annual governance statement and performance statement	Achieved	Achieved	Achieved	Achieved	Achieved	Stable	

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Finance and Information Services Q4
(January 2017 – March 2017)
Director: Chris Ward

Finance and Information Services : Quarterly progress report (1)

Function: Financial governance and accountability

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Prepare a Medium Term Financial Strategy	MTRS approved by full Council as part of annual Budget						
Approve a Balanced Budget and associated level of Council Tax	Budget and council tax approved by Full Council for required level of savings						
Approve a minimum level of general reserves	£6.5m	7m	£7m	£7m	£7m	improved	
Approve a fully funded 5 year capital programme	Capital programme approved by Full Council						
Statutory timescales achieved for Statutory Financial Statements	The annual target of 30 June has been achieved						
Unqualified Audit Opinion achieved	PCC achieved an unqualified audit opinion for the 2015/16 accounts						
Quarterly financial reporting to council achieved	In progress	Scheduled for September 2016	Scheduled for December 2016	Q2 delivered 13/12/16. Q3 scheduled 21/3/17	Q3 delivered 21/3/17. Outturn scheduled September 2017	Improved	
Pay.net implemented	Project commenced	No sites implemented	5 sites implemented	Further 8 sites in progress	On Hold	Dependency upon completion of current upgrade to PIMS and Spydus systems	
Bank reconciliation completed within 4 weeks of month end	Slightly behind	May & June not fully complete	August not fully complete	Substantially complete to September	Complete to March & awaiting sign off	On track	
Transparency information published on time	Delivered	Delivered	Delivered	Delivered	Delivered	achived	

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Finance and Information Services : Quarterly progress report (2)

Function : Maximising the resource available to the council

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Additional income generated through mechanisms e.g.. Property Investment Fund, Shared IoW service	See project reports						
Average return on new investment to exceed LIBID rates	Exceeded investment returns target for new investment	Exceeded investment returns target for new investment	Exceeded investment returns target for new investment	Exceeded investment returns target for new investment	Exceeded investment returns target for new investment	Improved	
Implementation of Employee Benefit Portal and subsequent savings	See project reports						
Debt recovery indicators (add KPIS) Actual (target) Council Tax Business Rates	95.4%(95.2%) 99.6% (98.5%)	94.21%(97.8%) 103.3%(98.8%)	94.04%(97.8%) 93.9% (98.8%)	93.92%(97.8%) 97.7% (98.8%)	95.33%(97.8%) 7.8%) 99.8% (98.8%)	Improved	

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Finance and Information Services: Quarterly progress report (3)

Function : Maintaining the resilience of financial services operations

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Up to date business continuity plan by December 2016	Awaiting update and testing	Awaiting update and testing	Awaiting update and testing	Awaiting update and testing	Review planning	n/a	
EBS availability to be within performance standard of 98% availability in working hours	Performance maintained	Performance maintained	Performance maintained	Performance maintained	Performance maintained	Steady	
Completion of Financial Services re-organisation to be positioned for new business	Phase 1 consultation complete	Phase 2 consultation underway	Revised structure implemented	Revised structure implemented	Revised structure implemented	completed	

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Function: Support directorates to deliver within agreed budgets and achieve savings targets and objectives

Spending within allocated budgets – deficits in adults' social care and children's social care reducing as per agreed plans	Budget outturn for 2015/16 of £3.5m underspend. Education and Children's portfolio deficit reduced to £1m and Health and Social Care portfolio reduced to £1.5m following budget action plans agreed by Cabinet, 3 rd December 2015.	Forecast outturn of £0.66m overspend including forecast deficits in Children's portfolio of .45m and Health and Social care of £1.5m	Forecast outturn of £33k overspend including forecast deficits in Children's portfolio of £0.7m and Health and Social care of £1.3m	Forecast outturn of £20k overspend including forecast deficits in Children's portfolio of £0.97m and Health and Social care of £1.1m	Final outturn will not be available for this meeting. Report to G & A September 2017	n/a	
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Finance and Information Services: Quarterly progress report (4)

Function :High quality business as usual financial services – continual service transformation

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director 's Year End Commentary
Implementation of new forecasting and budgeting tools	Rollout underway	Rollout to finance teams	Operational in 3 teams	Final team in training	Preparing to be fully operational in Q1	Improved	
Implementation of Business Intelligence reporting for managers	See project progress reports						
Maintain EBS upgrade and patching programme	Latest Recommended Patch Collections updated	Latest RPCs updated	Latest RPCs updated	Latest RPCs updated	Latest RPCs updated	steady	
Invest in EBS hardware requirements	Procurement underway	Hardware purchased and currently being commissioned for Go live Jan 2017	Hardware purchased and currently being commissioned for Go live Jan 2017	Hardware installed	Hardware installed –go live deferred until jumbo ports installed	steady	
Complete roll-in of purchase to pay business intervention	See project progress reports (Appendix 2)						
Payment performance indicators	82%	76%	79%	78%	77%	Steady	
Payroll and EBS indicators Paid 10,000 internal & external staff on time	Achieved	Achieved	Achieved	Achieved	Achieved	Steady	
	Achieved	Achieved	Achieved	Achieved	Achieved	Steady	

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Finance and Information Services: Quarterly progress report (5)

Function : IT performance Metrics

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position (Avg. per week for Qtr.)	Q4 position (Avg. per week for Qtr.)	Trend	Director's Year End Commentary
Availability (24/7) 1. A01 (Availability of the LAN) 2. A03 (Availability of the WAN) 3. A04 (Availability of the SWAN Network) 4. A06 (Availability of the Telephone System) 5. A16 (Availability of Top 30 Systems) 6. A26 (Availability of the TPN Network)				1. 100% 2. 99.2% 3. 99.6% 4. 100% 5. 97.3% 6. 98.4%	1. 100% 2. 99.7% 3. 100% 4. 99.7% 5. 97.5% 6. 99.7%	G	<ul style="list-style-type: none"> - Since the metrics have been implemented availability has been above 97.3% with an average of 99% or higher - Performance has been satisfactory. - TPN has improved from 98.4% to 99.7%
Service Desk 1. D01 (Telephone Call Wait Time < 30 secs) 2. D01a (Calls abandoned in the last 7 days) 3. D04 (Incidents fixed by Service Desk at first point of contact)				1. 91.3% 2. 4.5% 3. 96.1%	1. 94.8% 2. 2.8% 3. 95.6%	G	<ul style="list-style-type: none"> - Since the introduction of metrics the Service Desk have been able accurately measure and review their performance. Key improvements include: - Welcome Message – Speak to the right team. - Matched staff support profile to support peak times resulting in improvements to wait times and less abandoned calls.
Incidents 1. I01 (Total Incidents (I'S) raised, by Team) 2. I23 (I's Currently Open) 3. I24 (I's Resolved with a Workaround)				1. 530 2. 133 3. 23	1. 597 2. 155 3. 44	G	<ul style="list-style-type: none"> - Year End work, Samsung Mobile and Outlook issues recognised as main causes for increase in incidents this quarter, engaging with the customer in order to collect accurate data.. - Trends have been identified across these areas and collated into problem records to address common issues at the root cause.
Requests 1. R10 (Requests Currently Open) 2. R02 (Standard Request closed < 10 Days)				1. 232 2. 177	1. 233 2. 197	G	<ul style="list-style-type: none"> - More requests being closed within SLA, improved turnaround of requests.
Problems 1. I26 (Problems Raised in the Last 7 Days) 2. I27 (Problems Open by Directorate)				1. 2 2. 107	1. 3 2. 97	A	<ul style="list-style-type: none"> - We canvassed our customers regarding the Samsung smartphone solution, responses analysed and core issues identified. - Project now in flight to rectify these problems and provide a much improved experience.

Finance and Information Services: Quarterly progress report (6)

Function: IT performance Metrics

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director's Year End Commentary
Customer satisfaction					<ul style="list-style-type: none"> 28% of staff believe the service is better than this time last year Net promoter for this quarter is 18.2% 	G	<ul style="list-style-type: none"> New monthly survey based on SOCITM going to an equal proportion (12th) of the business every month, this result is the average for Q4 Survey will continue to be delivered monthly. Engaging with our customers to provide the service that they require.
PSN accreditation IG Toolkit (Connection to NHS) PCIDSS (Payment Card processing)	Accredited Accredited Accredited	Accredited Accredited Accredited	Accredited Accredited Accredited	Accredited Accredited Accredited	Accredited Accredited Accredited	G	
Security 1. SPAM 2. Malware					<ol style="list-style-type: none"> 99.9% (11 incidents out of 13750 attempts) 99.8% (5 incidents out of 3034 attempts) 	G	<ul style="list-style-type: none"> Introduced Security Metrics Identified area of improvements to security and engaged with supplier, Trend, for Sandbox solution.

Finance and Information Services: Quarterly progress report (7)

Function: Strategic IT support and development

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 position	Q3 position	Q4 position	Trend	Director 's Year End Commentary
1) Produce Category Management Plan 2) Produce IT Strategy 3) Restructure IT	1) N/A 2) Last strategy produced in 2012 3) N/A	1) First draft 3 weeks away 2) Structure agreed. Benchmarking and initial contributions received. Now in drafting phase. 3) Will be determined once strategy agreed. Organic changes are proceeding now	1) Done 2) First draft due week commencing 21.11.15 3) In progress	1) Done 2) Done 3) In progress	1) Done 2) Done 3) In progress	G	- IS re-structure in consultation within 2-3 weeks' time
4) Adoption of digital strategy	Business Transformation Group established	- Being reviewed by the Economic Development Culture and Leisure scrutiny panel. - Digital is approaching first draft stage - Entering consultation with directorates	- Verbal update at EDCL completed. - Presenting at next EDCL - Liaising with TEBS - First draft by Xmas	Digital City Strategy in progress	Done	G	
5) Cyber Security strategy	N/A				Done	G	
6) Disaster Recover as a Service(DRaaS)	N/A				- Procurement specification - Supplier tender evaluation work completed	G	- DRaaS identified as a problem, and put out to tender. - Work commencing to improve disaster recovery and make IT and data storage more resilient.

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Port Q4
(January 2017 – March 2017)
Director: Mike Sellers

Port : Quarterly progress report (1)

Function: Port

Agreed measures of progress	Baseline as at Q4	Q1 position	Q2 Position	Q3 Position	Q4 position	Trend	Director's Year End Commentary
Review Corporate Governance Arrangement					DfT questionnaire has been completed. 'Good Guidance for Ports' to be issued Sept 2017.	Steady	Review ongoing.
Port Master System Replacement: Ships Services and Operational Costs					Programming and sprint reviews have commenced.	Steady	Project ongoing.
Permit to Work / Permission to Work					Solution being drafted.	Steady	Project ongoing.
New Brittany Ferries Contract					Heads of terms agreed. Contract is awaiting signatures.	Steady	Ongoing.
Berth 3 Linkspan Purchase					Negotiations ongoing.	Steady	Project ongoing.
Ports Energy and Carbon Savings (PECS) European Scheme					Application submitted.	Steady	Project ongoing.

Appendix 2: Major projects Q4 (January 2017 – March 2017)

Children's Services – projects (1)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status					
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome	
Stronger Futures Page 136	<ul style="list-style-type: none"> New Management Structure in place for LA early help function LA staff (CC and Public Health) remodelling work underway New plan in place to achieve target of Troubled Families attachments New Early Help Assessment paperwork launched Restorative Practice training courses fully written and ready to roll out next financial year Trailblazer Restorative Schools agreed and Action Plan in place Innovation Fund bids submitted 	<ul style="list-style-type: none"> Staff Structure confirmed for LA early help team which has brought together Childrens Centre and Public Health Teams Plan in place for referral pathways for new early help team to increase EH assessments and TF attachments Contract award for FIP to Barnardos Family Hubs for 0-19 families and young people consultation started 	<ul style="list-style-type: none"> New admin and support functions in place for early help team Solent HV redesign project underway Solent SN review underway Clarity of offer from Family hubs Referrals to new Early Help team started Training plan in place 					There is no dedicated programme budget for the Stronger Futures work as this represents a reshaping of existing business as usual activity , as outlined in the paper to Cabinet on 22 nd September 2016	

Children's Services : Major projects (2)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status				
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome
Portsmouth Education Partnership	<p>Meetings with MATs to discuss school improvement concerns and strengths to be arranged for Q4.</p> <p>Draft education strategy to go to Strategic Board in Q4.</p> <p>Workshop on 7th Feb to further refine and shape the Partnership and membership of Board and Groups.</p> <p>Sub Groups for Teacher Recruitment & Retention + Inclusion to meet in Q4.</p> <p>All Priority 3 schools to be contacted.</p>	<p>Meetings held with MATs and RSC about the PEP and the collaborative school Improvement model.</p> <p>Communication from RSC to MATs agreed – to go out in Q1</p> <p>Draft education strategy completed. Goes to Strategic Board in Q1 on 4th May</p> <p>Sub Groups for Inclusion and Teacher Recruitment & Retention have now all met and are well established. 3 workstreams established for</p> <p>Some Priority 3 schools still to be contacted – will be done in Q1.</p> <p>Recruitment for Partnership and Schools Inclusion Manager underway - to support the work of the PEP and the Inclusion Group</p>	<p>Structures and membership of the PEP will be reviewed in Q1 with a view to securing greater levels of engagement and involvement from all schools and academies in the City.</p> <p>Communication from RSC to MATs to go out in Q1 encouraging participation in the PEP.</p> <p>Education Strategy will be sent out for consultation following the Board Meeting on 4th May .</p> <p>PEP website to be launched in Q1</p> <p>Partnership and Schools Inclusion Manager to be appointed in Q1.</p>					

Children's Services : Major projects (3)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status					
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome	
Planning and delivering sufficient school places for the city Page 138	Primary Phase 2 Sufficiency: Northern Parade Schools: Tendering process for main school commences. Pre-school completion and handover.	Pre-school building works complete and preparation for main works tendering process completed	Pre school move in to new build on 7 April. Tender return for main project end of April.	Overall - on track	Overall – on track	Overall – on track	Overall – on track	Funding required for Redwood Park project. Capital allocation notification for secondary place provision (2018/19 funding - £3m)	Future pressures will at secondary and for Redwood Park will require DfE or Council funding.
	Newbridge Junior Academy: School to move in during January 2017.	Works completed and school has moved in.							
	Craneswater Junior: Tendering process for main school commenced	Design finalised and preparation for tendering process completed	Enabling works to take place during Easter holiday period. Main project to go out to tender Late April.						
	Moorings Way Infant: Project due to start in May 2017.	Tenders for temporary accommodation over budget and a re-phased plan produced to enable a retender exercise. Additional testing due to contaminated land underway.	Project was due to start in May 2017 , this is delayed and likely to commence in July (Q2) depending on the outcome of additional land surveys and retender exercise.						
	Secondary Phase 1 Sufficiency: St Edmund's Catholic School - Works largely completed	Work commenced and on track	Project completion due on 11 April 2017						
	Miltoncross Academy - Finalising design with school and costs with PFI provider	Initial design work and tender specification complete and issues to PFI contractor.	Costs to be returned by PFI provider.						
	Springfield School - Governing Board ratified the project proposals in Q4.	Project ratified. Design work almost complete	Tender preparation to commence and out to tender						
	The Portsmouth Academy - Outcome of capital bid to Members will inform scope of Phase 2 works.	Meeting took place and temporary increase to PAN of 225 agreed. Tender return for co- education and enabling works returned and being analysed.	Enabling and co-education works to commence and start on site scheduled for Q1: 5 June. Design and feasibility of longer term expansion project underway.						
	Special Schools Remodelling (Cliffdale and Redwood Park) Scope of works to be determined once the outcome of the capital bid to Members for Phase 2 is known.	Bid to members for funding was unsuccessful. Design and way forward agreed for Cliffdale school. Phases identified for Redwood Park school but funding still required. A Free Special School bid was submitted.	Outcome of Free Special School bid expected in April 2017. Cliffdale final design and tender preparation to commence.						

Adults' Services: quarterly project report (1)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status				
				Time (against Q3 plan)	Time (overall forecast)	Budget (against Q3 plan)	Budget (overall forecast)	Outcome
OPPD Systems Intervention	Completion of roll in.	<p>Occupational Therapy Practitioners and leaders have all been inducted. The average end-to-end time from referral to needs met was 223 days pre-intervention; the new system has an average end-to-end time of 106 days.</p> <p>Community Social Work 80% of practitioners have been inducted. Measures are in the process of being embedded. End-to-end times from referral to needs met show significant improvement compared with the pre-intervention system.</p> <p>Hospital Team The principles of the redesigned system have clashed with the command-and-control thinking of the 4 system partners. While some aspects of the redesigned process have been sustained, many have not.</p>	<p>Occupational Therapy The new system measures are now in the OT leaders' hands, so should be used to create a culture of learning and improvement.</p> <p>Community Social Work</p> <ul style="list-style-type: none"> • Remaining practitioners to be inducted. • Further work to be completed with leaders to change their way of managing the work. • Measures to be embedded. • Leaders to be supported to use measures to learn and improve. <p>Hospital Team Awaiting snr leadership to set direction.</p>					
Health & Social Care Blueprint	Structure to be agreed and modelling of service structure commenced.							
Integrated Discharge Service (QA)								

Adults' Services: quarterly project report (2)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status				
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome
LD systems intervention	Commence Redesign Mid-July 2017.							
Transition between Swift / AIS and System 1	This project has moved to a red status on RAG. If agreement cannot be reached on proportionate data to be released ASC will have to seek an alternate provider. This would mean that the advantages of a shared system with Solent and the CCG would be lost. ASC have also received notice that the current client record system provider will be ceasing their system as of 2018/19. This adds additional pressure to identify a system provider.	See commentary		The project status is RED . Progress with TPP on the Data Processing Agreement has been very slow. Intervention at director level within TPP has been actioned and brought assurances of faster responses. But in the end this made little material difference in getting answers any faster. Agreement and signing of the DPA remains outstanding.		This status is AMBER , as given the current uncertainties with the project it is not possible to say if the monies currently set aside will be sufficient.		

Public Health : Quarterly progress report (1)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q4)	Overall status				
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome
Ensure the Healthy Child Programme (0-19) is recommissioned by 30 June 2017	Children's Team review to take place early in 2017. DPH to continue to work closely with Director of Children's Services to ensure Public Health Outcomes achieved in new structure.	HCP to be looked at as part of new integrated early help offer.	Children's services now responsible for delivering 0-19 services, accountable for delivering PH outcomes through MOU between DCS and DPH.	Met	Met	Met	Met	Achieved
Develop and implement the Better Care programme Living Well Scheme	Continue to work with partners – stakeholder meeting planned for Spring 2017 to outline clear action plan.	-	-	-	-	-	-	-
Service review and consultation	Continue to establish new team, under direction on new Director of Public Health.	New team established and business plan to be finalised April 2017.	Business plan to begin to be implemented.	Met	Met	Met	Met	Achieved
Recommission Substance misuse services	Continued implementation of the service new model and review of cases on caseloads.	Successful implementation. Service is now making improvements to delivery.	Monitor service delivery through contract monitoring.	Met	Met	Met	Met	Achieved
Recommission Sexual health services	Mobilisation is progressing to time.	Implementation of new service set for April 1st	Monitor service delivery through contract monitoring.	Met	Met	Met	Met	Achieved

Regulatory Services and Community Safety: quarterly project report

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status				
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome
Domestic Abuse – complete service review with recommendations agreed and partners contributing	To be informed whether bids were successful	No funding commitment from CCG for EIP. Joint commissioning process for refuge and outreach has begun in partnership with OPCC.	Progress joint commissioning process for refuge/outreach provision with OPCC	A	A	A	A	
Restructure the Early Intervention Project	To commence in Qtr 4	Completed						
Multiple service database change – transition of Civica APP into the Uniform suite of products (IDOX) - extend the use of IDOX DMS to provide integrated document management	R - Further progressing of set-up to IDOX live environment, testing and uploading planned. Second data upload scheduled to take place on the 27 th February. RS has significant concerns in respect to further project slippage/success of 2 nd upload and therefore the possibility of needing to run APP and IDOX simultaneously. Failure to have an operational database with high percentage of data transfer, document handling and staff knowledge / training will critically impact upon service delivery – leaving service exposed and inoperable.	R	A	R	R	Additional costs covered by IS	Additional costs agreed to be covered by IS	Possible conclusion July/August 2017/18. Forecast - A
Trading Standards – Deliver service review (and savings) – merger of environmental health and trading standards to create a single regulatory service	R- resource dependant	G – delivered in Q3	Merger completed - implementation of concept progressed in Q4 in terms of review and planning – delivery is terms of business plans still required	Completed	Completed	Saving delivered	Saving delivered	Complete

Property Services : quarterly project report

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status				
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome
Dunsbury Park (Capital)	Completion and handover of Fat Face Unit and handover	Completed Fat Face unit. Handed over Commencement of Marketing Campaign for the remaining site.	Handover of Fat Face Unit. Progression of negotiations with other tenant interest. Approval to deliver complete site wide development facilitation & estate roads.	Green	Green	Green	Green	On Target
Limberline Phase III (Capital)		Completion of project and continued marketing of the units	17 units to be let, with 5 remaining vacant units, including the café, being marketed.	Green	Green	Green	Green	On Target
Property Investment Fund (Capital)	Anticipating a further acquisition if a suitable property becomes available	No new purchases	Purchase of Portsmouth Retail Park	Green	Green	Green	Green	On Target
Replacement Social Housing Schemes (Capital)		Acquired 4 new homes; Nessus Street development in the final stages; King William Street and Illustrious House complete and tenants moved in; Ivy Close and Blendworth Crescent developments commenced on site	Nessus Street complete and tenants moved in; Ivy Close and Blendworth Crescent developments continue;	Green	Green	Green	Green	On Target
Utilities Management and Investment in Solar PV (Capital)	Anticipating further investment where suitable opportunities are identified	Delivery of 34 PV arrays	Anticipating further investment where suitable opportunities become are identified	Amber	Amber	Green	Green	Delay in delivery due to network restrictions and staff time diverted to other

Transport, Environment and Business Support : quarterly project report (1)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status				
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome
The Hard Interchange	Nearing completion on external areas (phasing is required). Building made water tight and internal finishes nearing completion.	External areas building's internal finishes and facilities are nearing completion.	Project completion	Green	Green	Green	Green	Green
Dunsbury Hill Farm Link Road	Settlement of final account	Settlement of final account is still ongoing.	Settlement of final account	Green	Green	Green	Green	Green
Eastern Road Waterbridge	Agreement of contract for works phase. Mobilisation of works.	Contract signed, mobilisation has commenced.	Scaffolding and access complete. Preparation of steelwork.	Green	Green	Green	Green	Green
North Portsea Island Flood Defence scheme	Awaiting determination of planning application. Appointment of contractor for phase 3 to be undertaken.	Planning permission has been obtained and the contractor appointed.	Contractor mobilised in April 2017. Construction commenced May 2017.	Green	Green	Green	Green	Green
Southsea Flood Defence scheme	DEFRA approval given, now awaiting final treasury sign-off to allow release of funds for design (£5.9m).	Treasury sign off given and design funding has been approved.	Appointment of designer to be complete by Q2, and delivery team officers to be installed in the Civic Offices.	Green	Green	Green	Green	Green

Transport, Environment and Business Support : quarterly project report (2)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status				
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome
Traffic Management Centre IT infrastructure upgrade	Detailed planning for relocation and cloud hosting. Migration of new TMC system to begin.	Detailed planning for relocation and cloud hosting complete; implementation planned Migration of new TMC system has begun with completion in summer 2017.	Delivery of team relocation and migration to cloud hosted software new systems being run for testing (parallel run not possible).	Green	Green	Green	Green	Green
Traffic Signals optimisation programme	Implement Package 1 works. Risk that the contractors will not provide a price in good time, affecting programme. Receive priced tenders for Phase 2 works.	Director's decision to amend procurement strategy based on higher than expected price returns. All works to go out to tender. Preferred supplier has been chosen	Value engineering are working with the preferred supplier to reduce costs, with the intention to award the contract end of June, with works begin Jul/Aug.	Amber	Amber	Green	Green	Green

Culture and City Development: Major projects (1)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q3 (highlighted in Q2)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status					
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome	
<p>Hotwalls Studio creative quarter will develop 10 working artists studios in the Grade 1 listed arches former military barracks on broad street with a commercial eatery creating approximately 14 new jobs</p>	<p>Capital works completed 04.07.2016. The facility opened on 08.07.2016. Some works and defects outstanding. Other elements of project – facilities management, apprenticeships, heritage centre and creative markets under development</p>	<p>Apprenticeship facility positions recruited and in place . Events apprenticeship position not progressed and connected to wider restructure</p> <p>Creative market ideas for festive period implemented</p>	<p>Snagging period ends in July and working towards the final completion of outstanding contractor issues</p> <p>Continuing to integrate operational process into the seafront team but long term to develop a community management model to operate the facility</p> <p>Working with motivate to support the engagement with young people in the summer high season and continuing to develop the space including the Round Tower on a trial basis</p>	NA as project in Delivery phase					

Culture and City Development: Major projects (2)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q3 (highlighted in Q2)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status				
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome
<p>Transformation of D-Day Museum: Continue to deliver the 5 year transformation of the D-Day Museum start work on site (May 17)</p> <p style="text-align: center;">Page 147</p>	<p>Programme Tendering for Base Build underway Procurement of contracts (x3) for conservation of collections underway</p>	<p>The D-Day Museum closed on the 13th March following the successful launch of the PDDM Trust Studio MB presented the exhibition detailed design in February. PDDM Trust have achieved £170K of the £300K match funding developing approaches to deliver the rest</p>	<p>Milestones:: decant of collections completed/ main contractor on site,/ contract with exhibition designer signed</p>		On track	On track	On budget	
<p>Developing plans for the City Centre Infrastructure as part of the City centre masterplan</p>	<p>Uncertainty over funding Need to acquire 3rd party land</p>	<p>Uncertainty over funding Need to acquire 3rd party land</p>		reopens in March 2018 but activity plan runs to 2020/21	FBC LEP November 2016 App in Jan 2017		TBC as part of CBB	

Culture and City Development : Major projects (3)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q3 (highlighted in Q2)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status				
				Time (against Q3plan)	Time (overall forecast)	Budget (against Q3 plan)	Budget (overall forecast)	Outcome
City Deal : strategic development at the gateway to the city unlocking critical employment and housing and plus a country park at Tipner and Horsea island	Transfer of land ownership negotiations completed . Actual transfer dependent on availability of new range at Longmoor, expected March 2018	Planning application to submit autumn 2017 Identify options for public engagement FBC LEP November 2016? Continuing transfer of landownership negotiations transfer of firing range April 2018 ?		On programme	2030	48.75M		Minimum 1250 homes 65,000sq metres employment space

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Community and communications : quarterly project report (1)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status				
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome
Delivery of the channel shift/ digitalisation programme	Benefits and RBV implemented Waste Mgt Phase 1 implemented	Benefits and RBV – live testing	Continue delivery of channel shift and creation of business case for next phase over next two quarters	On Target	On Target	On Target	On Target	On Target
Implementation of Universal Credit (including the Local Support Framework)	No issues – DWP run programme	165 housing benefit cases to date have been cancelled due to claiming universal credit (since 28/03/2016)	No issues – DWP run programme	DWP programme running behind schedule	N/A	N/A	N/A	Ultimately reduction in staff

HR, Legal and Performance : quarterly project report (1)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status				
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome
Devolution/ combined authority	Possible decision by SoS which will lead to implementation process to start	Solent Leaders continuing to meet . Joint work improved as a result of meetings and agreement that Solent LAs needs to continue to work together. Still awaiting a SoS decision which will happen after the election.	Will depend on SoS decision and also the position of HMG in relation to devolution post election (as well as views of local LAs to any revised deal that may be offered)	Green (subject to factors outside council's control)	Green (subject to factors outside council's control)	NA	NA	
HR self-service (ongoing roll-out and development)	No major further developments planned prior to implementation of Business intelligence	Fixes and developments to functionality but no major developments. Testing on BI progressing as planned	No major further developments planned prior to implementation of Business intelligence	Green	Green	Green	Green	
Commensura Partnership (£2.5m per annum)	Continued reduction in non-compliance and increased savings delivered	Positive steps taken to reduce non-conforming spend in service departments, especially ASC	Continuation of steps started in Q4. Anticipated that improvements will flow through to improved PIs and financial returns	Amber	Amber	Amber	Amber	
Apprenticeship levy (potential cost c£700k per year)	Plan developed to use levy funding. Engaged in trailblazer pilot for social work apprenticeships. Working with colleges and uni to develop courses. 5 apprentices nominated for local awards	Continued increase in apprenticeship numbers. Framework for training providers created.	New levy arrangements formally come into force.	Green	Green	Green	Green	
Replacement of learning management system	Commence procurement							
Military Covenant	Submission for gold aware expected to be April 2017	Bid made to Covenant fund	Bid announced as successful in Q1. Board discussion on 29/4. Start implementing what was in the bid including recruitment of key officer.					

Finance and information services : quarterly project report (1)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status				
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome
Finance service restructure	No change expected	Complete	Sub team review in progress	G	G	G	G	On target
Purchase 2 Pay roll-in	New processes embedded as 'Business as usual'	New processes embedded as 'Business as usual'	Improved performance	G	A	A	A	Resolution of backlog issues being addressed
Business intelligence	Communication plan commences plus phase 1 user testing	Phase one HR & Finance dashboards in design	Initial training completed. Product delivered as per award. Testing to commence	G	G	G	G	On target
Employee benefits portal	AVC scheme development with planning for 'go live' 1 April due to provider technical issues	Car scheme implemented . AVC scheme in development	AVC scheme launch now June/July due to provider technical issues	D	A	D	G	Implementation delayed due to Budget changes
Hampshire community bank	Next key meeting with regulators planned	Preparation of legal documentation to enable HBC to lend on secure base	Anticipated conclusion of legal agreement	A	A	G	G	

Finance and information services : quarterly project report (2)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q41)	Overall status				
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome
Internet upgrade	On-going migration of identified business systems and investigate the 50MBPS link	System migrations on-going with minimum disruption to users, continues from last Q	On-going migration of identified business systems and investigate the 50MBPS link; continues from last Q	G	G	G	G	G
Upgrade obsolete service management software self service etc	ITSM Initiation, appointment and functional specification	Procurement assessment complete; preferred bidder identified	Completion of procurement and appointment; implementation of system currently estimated at four months	G	G	G	G	G
Telecoms efficiencies	Detailed planning and implementation	Detailed planning complete for phase one sites; implementations on going for phase one	Complete detailed design for remaining sites; plan detail for phased works at all sites	G	G	G	G	G
EBS complete infrastructure to refresh moving to virtual servers	System migration	Redesign of storage solution complete; network pre-requisite works underway;	System migration and user acceptance testing	A	A	G	G	A
Channel shift	Complete current Transitions	Waste & CSC account development continues with supplier support	Complete current Transitions and revised delivery schedule for next Transitions	G	G	G	G	G
Bring Your Own Device	Detailed planning for wider roll out, start implementation	Task and activities reviewed and detailed; Detailed design commissioned	Detailed design to be completed, then implementation	G	G	G	G	A – Low uptake at present due to “wipe” issue

Port : Major projects (1)

What are the major projects that the Directorate will be engaged in over the year ?

Project	Progress projected in Q4 (highlighted in Q3)	Progress seen in Q4	Expected progress and issues next quarter (Q1)	Overall status				
				Time (against Q4 plan)	Time (overall forecast)	Budget (against Q4 plan)	Budget (overall forecast)	Outcome
Berth 4 Linkspan Replacement		Contractor starting to build new linkspan.		Ok	Ok	Ok	Ok	Ok
Port Expansion (Cruise)		Work ongoing to assess the feasibility.	Further work to assess the feasibility of the scheme.	Under review	Under review	Under review	Under review	Under review

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Appendix 3: Risk report Q4 (January 2017 – March 2017)

Corporate : Quarterly risk report (1)

Risk owner	Risk Area	Risk likelihood	Risk impact	Potential outcomes	Mitigation/ commentary	Type of Risk
Michael Lawther (City Solicitor and Deputy Chief Executive)	Disclosure of sensitive data both accidental and malicious			Fines from ICO or legal action taken against the Authority and individual staff members	Clear policies and procedures; staff training and awareness; some (limited) preventative technical solutions	Legal action, reputational damage, risk of harm, financial loss
	Modern records - suitability of location - susceptibility to damp and flooding			Loss of information	Remedial works completed to reduce risk of flooding	Legal action, reputational damage, financial loss
Michael Lawther (City Solicitor and Deputy Chief Executive)	Archiving of data - no clear policy or procedure for destruction of information			At risk of breaching DPA and fines to the authority	Officer appointed to further develop policy and guidance	Legal action, reputational damage, risk of harm, financial loss
Chris Ward (Director of Finance and IS)	Superconnected Wi-Fi provision is funded by DCMS - limited period			Government funding provision runs out for the earliest sites in December 2017, with others dropping off through 2018 and 2019. Service is of strategic importance and offers opportunity for network consolidation and commercial advantage	Budget implications being assessed, Firm business cases to be produced to demonstrate why links should remain and how funding will be secured.	Failure to achieve objectives, reputational damage
Chris Ward (Director of Finance and IS)	Fraud risks			Loss of resource		Reputational damage, financial loss
Michael Lawther (City Solicitor and Deputy Chief Executive)	Decision-making: The Constitution has not been reviewed/formally updated for a number of years.			Decisions are not secure	Working group updating the constitution	Legal risk, financial loss, reputational damage, failure to achieve objectives
Rachael Dalby, Director of Regulatory Services and Community Safety	Business continuity - ensuring services have in place effective business continuity plans			Failure to recover business after a significant disruption event	As per the new Business Continuity Standard ISO22301 new Directorate Business Continuity Plans are being produced to reflect the necessary changes. Each directorate to complete their plan by Summer 2016. The plans will be tested within a year of completion, and with a three-yearly cycle of desktop exercises.	Risk of harm, failure to achieve objectives, environmental damage, legal risk, financial loss, reputational damage
Michael Lawther (City Solicitor and Deputy Chief Executive)	New ways of working : Our desire to explore more innovative and commercial ways of working requires a flexible and agile approach, but also a clear framework for governing arrangements.			Lost opportunities if framework not sufficiently responsive	Ensure arrangements for traded services and arms-length organisations are fit for purpose	Failure to achieve objectives, reputational damage, legal risk
Chris Ward (Director of Finance and IS)	Not achieving savings targets authority wide			Failure to achieve targets impacts on future years budgets	Current forecast of service overspends will reduce reserves and require additional cuts in those or other services in future years to stay within budget unless remedial action identified	Failure to achieve objectives
Stephen Baily, Director fo Culture and City Development	Avaiability of suitable cemetary space			Failure to deliver statutory responsibilities in respect of burials	Cemetaries lack capacity to deal with changing community needs e.g. different religions, reduction in demand for traditional burials, increase in other cultural burials, insufficient space/layout to accommodate	Legal risk; reputational damage
Rachael Dalby, Director of Regulatory Services and Community Safety	Ensuring 3 yearly Golden Fox test successfully completed			Failure to reach standard	Successfully tested in October 2016	Personal injury if non-compliant

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Children's Services : Quarterly risk report (1)

Risk owner	Risk Area	Risk likelihood	Risk impact	Potential outcomes	Mitigation/ commentary	Type of Risk
Alison Jeffery (Director of Children's Services)	Savings pressures leading to increased workloads for social care staff			Increased risk around quality of social work practice	Ongoing monitoring as part of quarterly reporting . This risk has begun to materialise. A potential investment strategy is being reviewed to bring down caseloads.	Personal injury to child;
Alison Jeffery (Director of Children's Services)	Savings pressures leading to increased workloads for social care staff			Reduced attractiveness of PCC as an employer		financial loss to authority; failure to achieve objectives
Alison Jeffery (Director of Children's Services)	Reduced LA investment in specialist domestic services may increase numbers of children exposed to this			May increase severity of harm (last 3 Serious Case reviews have featured domestic abuse, 70% protection plans feature domestic abuse and 50% children removed into LA care have experienced domestic abuse).	Linked to Stronger Futures Programme for developing effective early help services for the city. The inclusion of DA services within Children and Families should help to ensure impact,	Personal injury
Alison Jeffery (Director of Children's Services)	Refocusing staff time on more vulnerable families increases rather than decreases demand on statutory social care as more need is uncovered			Increased demand and pressure on resources	Linked to Stronger Futures Programme for developing effective early help services for the city . This is a key risk to monitor as targeted early help expands in 2017/2018.	financial loss to authority; failure to achieve objectives
Alison Jeffery (Director of Children's Services)	Failure to make successful claims under Troubled Families Programme			Reduced income available to the authority for investment in services	The increase in attachments creates the foundation for more claims; a strategy for maximising claims is being developed.	financial loss to authority; failure to achieve objectives; reputational damage
Alison Jeffery (Director of Children's Services)	Future of children's IT system - linked to Adult Social Care system			System becomes unaffordable and ineffective as user base reduces (ASC withdrawal) - local and national risk	Decisions have been taken and funding allocated for a new system. Implementation will be a key project for 17/18	Financial loss; failure to achieve objectives
Alison Jeffery (Director of Children's Services)	Process of academisation for schools distracts schools from improving teaching and learning			Deterioration in outcomes for children	The LA is working closely with the Regional Schools Commissioner to ensure that LA maintained schools have access to good information about the process and details of strong MATs that have capacity for growth and a good track record. The LA is also working closely with MATs operating in the area and ensuring that academisation of local schools is done in a considered but robust way.	Failure to achieve objectives
Alison Jeffery (Director of Children's Services)	Process of academisation of schools leads to a reduced traded service income for PCC (across a range of traded services, not just those in education)			Reduced income for PCC	Traded Services income from schools and academies has held up reasonably well , but some services are being affected. Following consultation in Q3, the Governor Services traded services offer has closed as from 1 st April 2017. A small traded service will continue with The Key. A Directory of Support has been sent to all schools and some bespoke traded services provision from the council is being planned.	Financial loss

Children's Services : Quarterly risk report (2)

Risk owner	Risk Area	Risk likelihood	Risk impact	Potential outcomes	Mitigation/ commentary	Type of Risk
Alison Jeffery (Director of Children's Services)	Building programmes are not completed in time			Risk of insufficient school places	Plans are in place and works are underway to ensure there are sufficient school places at primary, secondary and special. Robust project management will minimise risks associated with non-completion, but unforeseen factors could impact on levels of sufficiency. Capacity at primary is very limited, and there is little scope to divert children to other school places if building programmes are delayed. At secondary, there is capacity at present and building works are focussed on ensuring capacity from 2019/20.	Failure to achieve objectives
Alison Jeffery (Director of Children's Services)	Savings cut into delivery of statutory responsibilities (school admissions, transport, school attendance casework)			Risk of poor experience for children and families	Impact assessments of all savings carried out to ensure that impacts for vulnerable groups mitigated and authority is still fulfilling statutory responsibilities	Failure to achieve objectives
Alison Jeffery (Director of Children's Services)	Savings cut into delivery of statutory responsibilities (school admissions, transport, school attendance casework)			Risk of challenge on basis of non-compliance leading to penalties/poorer inspection outcomes		Failure to achieve objectives
Alison Jeffery (Director of Children's Services)	Savings cut into delivery of statutory responsibilities (school admissions, transport, school attendance casework)			Reputational damage		Failure to achieve objectives
Alison Jeffery (Director of Children's Services)	Inspection outcomes (social care, SEND, education) are poor or exhibit downward trend			Reputational damage, leading to challenges in recruitment	Implementation of the LASI Action Plan is on track (through the Portsmouth Education Partnership)	Reputational damage; failure to achieve objectives
Alison Jeffery (Director of Children's Services)	Inspection outcomes (social care, SEND, education) are poor or exhibit downward trend			Risk of intervention/ direction and potential costs to situation recovery	Close management of preparation for future SEND inspection; clear response to findings of previous inspections to ensure improvement	Reputational damage; failure to achieve objectives
Alison Jeffery (Director of Children's Services)	Parents and the community do not understand or support savings choices around universal services and we do not fully engage potential volunteers/promote effective community capacity building			Failure to reduce costs and continue to deliver effective universal service provision	There is active liaison at local level with parents and the community around children's centres provision; recruitment of volunteers continues .	Reputational damage; failure to achieve objectives

Adults' Services : Quarterly risk report (1)

Risk owner	Risk Area	Risk likelihood	Risk impact	Potential outcomes	Mitigation/ commentary	Type of Risk
Innes Richens, Director of Adults Services	Achieving constancy of purpose				Management resource in ASC has contracted over the past 12 months. Managing a systems thinking approach to the work to enable practitioners to achieve only value work for the service user will conflict with the current command and control/target focussed approach in PCC.	Failure to achieve objectives?
Innes Richens, Director of Adults Services	As above			Moving to a systems thinking approach requires establishing 'constancy of purpose' and creating the right conditions for staff to work in a systems thinking way. A key element of this will be the ongoing evolution of ASC relationship with support services. At present, the structure of PCC's support services is highly centralised and required to prioritise between competing demands from frontline services (IT project management, commissioning capacity, training capacity, communications, etc). In moving to the new approach, ASC will begin to place different demands upon support services as it gains a clearer understanding of what it requires to deliver purpose and meet customer demand. There is a risk, therefore, that support services as currently conceived, will not have the resources or flexibility to support ASC in the short term. Similarly, the work is likely to be constrained in some respects by the council's policy framework. In any intervention, corporate policies will almost certainly be identified as system conditions - causes of waste, failure, and sub-optimal service provision. Because policy frameworks apply corporately and interventions are conducted locally, this will inevitably and repeatedly create conflicts between each intervention and the owners of corporate policies.	Corporate Systems Thinking board chaired by the Leader of the Council has agreed for an intervention to be carried out with support services.	Failure to achieve objectives?
Innes Richens, Director of Adults Services	Integration between health and social care			The "blueprint" for health & social care in Portsmouth sees a future service provided to minimise unnecessary contact for the service user and the service by ensuring ever closer working between community health and adult social care services. The intervention in OPPD means that changes to the work process are only brought about by learning or changes in primary legislation. This is likely to conflict with a system partner, (NHS community health care) which has not adopted the same principles.	ASC and Solent NHS Trust have agreed to an integrated working model, rather than focus on an integrated organisation at this stage. Integrated working will impact on the end service user, whereas an integrated organisation serves organisational purposes. BCF Director, Solent and ASC officers are working to realise this in areas of referral and recording initially.	Failure to achieve objectives?

Adults' Services : Quarterly risk report (2)

Risk owner	Risk Area	Risk likelihood	Risk impact	Potential outcomes	Mitigation/ commentary	Type of Risk
Innes Richens, Director of Adults Services	Client Record System	High	Significant	No shared system between ASC, Solent and CCG.	TPP have still not responded regarding physical transfer of the encrypted disc. The Functional Specification and appointment cannot be progressed until the above is resolved. A suitable candidate for the project manager role has been interviewed and a provisional offer made subject to successful references.	
Innes Richens, Director of Adults Services	Care resources in Portsmouth	High	Significant	Both the homes in special measures and the acute hospital under pressure to discharge as soon as patients no longer have an acute need to remain is impacting on resources available within the community.	Through increases in National Living Wage and other pressures, we are seeing rapidly increasing costs - particularly from the newer build in the city. Attempts to address this are being made through working with providers on cost, block purchasing and other schemes.	

Public Health : Quarterly risk report (1)

Risk owner	Risk Area	Risk likelihood	Risk impact	Potential outcomes	Mitigation/commentary	Type of Risk
DPH	Insufficient focus on system prevention and early intervention in system-wide plans			Failure to reduce demand on services	Working with partners to ensure the Portsmouth Health and Care Programme is sufficiently focused on prevention and early intervention	Failure to achieve objectives
DPH	Failure to continue to deliver PH priorities during the implementation of the service wide restructure			Failure to deliver PH priorities	Working with HR to implement changes to team structure, roles and appropriate processes prior to 3 Jan 17 when new structure is implemented.	Failure to achieve objectives
DPH	Reduction in funding in services, including for vulnerable people eg. drug and alcohol services, oral health, healthy child programme			Population outcomes decline	Managed through service redesign, retender of services and performance management of providers	Failure to achieve objectives

Property : Quarterly risk report (1)

Date risk entered to directory	Reason added to directory	Risk owner	Risk Area	Risk impacts	Mitigation/commentary	Type of Risk

Transport, Environment and Business Support : Quarterly risk report (1)

Risk owner	Risk Area	Risk likelihood	Risk impact	Potential outcomes	Mitigation/commentary	Type of Risk
Alan Cufley (Director of Transport, Environment and Business Support)	Lack of investment - failure to secure capital for major infrastructure projects	2	3	Inability to carry out required capital schemes to improve city infrastructure; loss of expertise	There are a number of major capital schemes underway, including Eastern Road Water Bridge and the major coastal defence schemes that the Infrastructure team are able to support. A strategy for better marketing of the team both internally and externally is to be developed in conjunction with the wider PCC marketing strategy.	Failure to achieve objectives
Alan Cufley (Director of Transport, Environment and Business Support)	Lack of consensus to enable strategies to be implemented in full e.g. active travel and sustainable transport	1	3	Incomplete implementation leading to failure to realise intended benefits	Reviewing the Local Transport Plan and working closely with Portfolio holder.	Failure to achieve objectives; reputational damage
Alan Cufley (Director of Transport, Environment and Business Support)	Insufficient staff capacity due to reduced capital and revenue funding and pay constraints	2	3	Difficult to attract suitably qualified people to deliver schemes and services	The team structure for the directorate provides a core of experienced staff supported by flexible resources with specialist skills to provide value for money. The HR service are assisting the Parking Service in recruiting suitably skilled people to posts that continue to be difficult to fill. The successful funding bid for active travel and sustainable transport initiatives will mean that resources can be recruited to deliver them this year.	Failure to achieve objectives
Alan Cufley (Director of Transport, Environment and Business Support)	Lack of revenue funding to maintain current levels of service, including road safety, passenger assistance and tendered bus services	2	4	Necessary reduction in service levels	We will continue to bid for internal and external funding to support critical work programmes that address travel and transport issues in the city.	Failure to achieve objectives
Alan Cufley (Director of Transport, Environment and Business Support)	Failure to generate sufficient income from contracts and services in order to sustain Employment, Learning and Skills (ELS) programmes	2	3	Reduction in delivery capacity	The resource strategy for the directorate is to maintain a core team and recruit resources to match the needs of projects and contracts. This is paired with maintaining excellent standards to secure full payment of all income due; and ensure good working relationships and a positive reputation to secure access to future contracts and funding streams.	Financial risk; failure to achieve objectives

Culture and City Development : Quarterly risk report (1)

Risk owner	Risk Area	Risk likelihood	Risk impact	Potential outcomes	Mitigation/commentary	Type of Risk
Stephen Baily (Director of Culture and City Development)	Reduction in budgets	M	M	Reduced services and resilience	Forecast outturn for 2016/07 currently indicates an overspend of £70k but the service is working on remedial action to stay within budget by 31 March 2017. Plans are being formulated to deliver required 2017/18 savings, including boosting the volunteer programme	Failure to meet objectives
Stephen Baily (Director of Culture and City Development)	Reduction in budgets	M	M	Deterioration of buildings and assets		
Stephen Baily (Director of Culture and City Development)	Safety and security of buildings and assets (including collections)	M	H	Damage to buildings or collections; risk to building users if non-compliant (fire, legionella etc)	Operational plans and training of staff; actions in place following extreme weather	Personal injury, environmental, legal
Stephen Baily (Director of Culture and City Development)	Fraud risks associated with cash handling	M	M	Loss to the authority	Staff training and operational checks in place	Financial loss, reputational damage
Stephen Baily (Director of Culture and City Development)	Difficulty in meeting expectations of local residents and members	M	M			
Stephen Baily (Director of Culture and City Development)	Market conditions negatively impact on regeneration and city growth schemes, projects and developments	M	M	Failure to deliver regeneration of the city	Implementation of key strategic plans, such as the Local Plan; raising the profile of affordable housing in shaping the future of Portsmouth; promotion of the city as an investment destination	Failure to achieve objectives; environmental damage
Stephen Baily (Director of Culture and City Development)	Securing and managing new partnerships for sustainable delivery of public services, for example, with third sector providers, including independent cultural organisations	M	M	Failure to secure value for money in partnership arrangements and deliver objectives	Reprocurement of contracts and ongoing review of trust arrangements	Failure to achieve objectives

Community and communications : Quarterly risk report (1)

Risk owner	Risk Area	Risk likelihood	Risk impact	Potential outcomes	Mitigation/commentary	Type of Risk
Louise Wilders (Director of community and communications)	Requirement to deliver substantially the same portfolio of services whilst reducing costs by more than 10% each year	High	Med	Increased service times, increase in error rate, reputational damage	Reviewing opportunities of partnership working and new income streams . Channel shift implementation	Failure to achieve objectives
Louise Wilders (Director of community and communications)	Ability to implement change - level of corporate buy-in and understanding of channel shift	Med	High	wasted opportunity to achieve on-going corporate savings Poor customer service outcomes	Channel shift moving to BAU and digitisation programme. More services are requesting support.	Failure to achieve objectives
Louise Wilders (Director of community and communications)	Heavy exposure to national political dynamic around welfare reforms and local taxation	High	High	Abandonment of existing plans, changes in scope and responsibility, new initiatives (eg. property revaluation)	Managing resources to meet needs but impacts on budgets of some changes a concern particularly valuation impact on NNDR	Failure to achieve objectives
Louise Wilders (Director of community and communications)	Heavy exposure to national political dynamic around electoral issues	High	High	New initiatives eg. voting age changes, boundary reviews, changes to electoral registration, electoral timetables	Managing resources to meet needs	Failure to achieve objectives
Louise Wilders (Director of community and communications)	Risk to achieving required savings because of ability to implement change - level of corporate buy-in to channel shift	Med	High	Failure to deliver within budget	Channel shift moving to BAU and digitalisation programme. More services requesting support	Failure to achieve objectives
Louise Wilders (Director of community and communications)	Risk to achieving required savings because of hold on transformational work whilst systems intervention takes place	Low		Failure to deliver within budget	Agreement reached	
Louise Wilders (Director of community and communications)	No clear plan from DWP for migration to Universal Credit	High	Low	Risks to successful implementation leading to poor outcomes for population	Horizon scanning national policy developments	DWP run programme

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HR, Legal and Performance : Quarterly risk report (1)

Risk owner	Risk Area	Risk likelihood	Risk impact	Potential outcomes	Mitigation/commentary	Type of Risk
Jon Bell (Director of HR, Legal and Performance)	Reduced capacity	H	M	Risk to maintaining areas of business activity	Directorate has successfully delivered year on year savings and reduced in size accordingly. Additional income has been identified to maintain sufficient critical mass to meet organisation's needs. Key areas such as Child Protection Team (Legal) protected	Failure to achieve objectives
Jon Bell (Director of HR, Legal and Performance)	Recruitment and retention of key staff as economy continues to grow	M	M	Loss of/difficulty in attracting sufficient skills and expertise	Some recruitment and retention issues being experienced within directorate and across wider organisation in certain specific areas - processes for market supplement payments (MOPs) have been reviewed and improved, and improvements are being made to recruitment/staff sourcing arrangements for particular roles. Also, workforce planning/succession support is being provided to managers in affected areas.	Failure to achieve objectives
Jon Bell (Director of HR, Legal and Performance)	Reduced effectiveness of governance	M	H	Increased exposure to the organisation of risk arising from poor governance	Key governance controls in areas such as Internal Audit being maintained. Performance management being strengthened as directed by GAS Committee. Capacity of managers across the organisation to maintain effective governance controls is still a concern.	Failure to achieve objectives
Jon Bell (Director of HR, Legal and Performance)	Increased dependency on external income	M	M	Volatility/lack of security of service	Schools income continuing to decline due to academisation programme. Increased income from new temporary agency and new local authority partnerships.	Failure to achieve objectives

Finance and Information Services : Quarterly risk report (1)

Risk owner	Risk Area	Risk likelihood	Risk impact	Potential outcomes	Mitigation/commentary	Type of Risk
Chris Ward (Director of Finance and IS)	Requirement to provide significant share of the Council's savings target	M	H	Reduction in service delivery e.g. income collection, provision of advice and management information for effective decision-making by budget holders.	Service aims to identify new income opportunities and efficiencies to meet savings targets to avoid reducing staffing to levels which compromise service delivery	Failure to achieve objectives and deliver expected service
Chris Ward (Director of Finance and IS)	Maintaining financial resilience arising from staff reductions	M	M	Reduction in service delivery and financial control	Finance reduced number of teams from 5 to 4 to improve general resilience although this includes the reduction of one Finance Manager post. Also ongoing review of business processes to ensure efficient service delivery.	Failure to achieve objectives
Chris Ward (Director of Finance and IS)	Financial collapse of an investment counterparty where the council has invested significant sums	L	H	Financial loss	No current indication that this is likely - credit rating of counterparties is kept under constant review.	Financial loss
Chris Ward (Director of Finance and IS)	Ability to restore financial and other systems post 'event'	L	H	Impact on trading services/external clients as well as PCC	A full disaster recovery exercise of the Council's enterprise resource planning system has not been tested in the recent past. The robustness of the current plan cannot therefore be fully ascertained.	Financial loss
Chris Ward (Director of Finance and IS)	Pay levels - unable to compete in the financial market to attract, recruit and retain appropriately skilled staff	M	M	Increased costs to PCC on consultants, agency staff and recruitment campaigns	Development of in-house trainee programme for finance	Failure to achieve objectives
Chris Ward (Director of Finance and IS)	Bringing forward closing of accounts deadline by four weeks - new statutory deadline from 2017/18	M	M	Reduction in time to complete accurate statutory reports Adverse Audit report	2015/16 accounts closure programme reduced by two weeks - plan to reduce 2016/17 by a further two weeks	Failure to achieve objectives
Chris Ward (Director of Finance and IS)	Inability to meet customers expectations re new technology that is in general use by other organisations or day-to-day personal use	M	H	Inefficient ways of working across PCC and partners	With the IT Strategy, Category Plan , IT restructure and Digital City Strategy either complete or underway likelihood is now downgraded from H to M	Failure to achieve objectives
Chris Ward (Director of Finance and IS)	Project delivery - ongoing review since June has identified there is a need to have better governance over the IOCT change demand/projects of the council	M	M	Risk of insufficient resource to address business need	Temporary project resource is being recruited to manage this demand in the short-term whilst a new project governance strategy is put forward within the new IS strategy and a move to more agile development and other methods of project delivery (hub and spoke model) are investigated.	Failure to achieve objectives

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Finance and Information services : Quarterly risk report (2)

Risk owner	Risk Area	Risk likelihood	Risk impact	Potential outcomes	Mitigation/commentary	Type of Risk
Chris Ward (Director of Finance and IS)	Roadmaps, contract pipeline and NPD - insufficient project prioritisation, supplier relationship management and contract management	L	M	Risk that parts of the IT infrastructure become obsolete (eg ITSM and Traffic Management Centre).	The introduction of a Category Management approach and a development of the business partner role will mitigate these risks	Failure to achieve objectives
Chris Ward (Director of Finance and IS)	Changes from central government - ongoing risk of changes to either PSN or service department data requirements	L	H	Changes required to systems	Category management will mitigate this and increase our visibility and implementation times.	Failure to achieve objectives
Chris Ward (Director of Finance and IS)	Cyber attack - other local authorities have received ransomware attacks: end user alert-based system at the moment leaves PCC vulnerable because a "zero day attack" could evade our current defences.	M	H	Potential multiple impacts - high likelihood and high impact	Business case is being worked on to purchase a SIEM (security information and event management software). They provide real time analysis of security alerts generated by network hardware and applications which will enable PCC to faster identify, contain and protect its systems	Financial loss; personal injury; reputational damage
Chris Ward (Director of Finance and IS)	Single points of failure in ICT infrastructure and systems access	L	H	Key information unavailable - impacts on frontline and critical activity	New Data Centre facility; contracted and tested recovery service; best practice design; resilience options always considered subject to cost. Recovery capability is limited in scope and time taken to recover key functions, with no provision for external email or telephony. Project to identify options to improve current position is currently underway.	Failure to achieve objectives

Port : Major risks and mitigation

What are the main risks in the coming year?

Risk owner	Risk Area	Risk likelihood	Risk impact	Potential outcomes	Mitigation/commentary	Type of Risk
Mike Sellers (Port Director)	Revenue	2	5	Loss of ferry operator.	Port Users Meeting, Operator / management meetings, Strategy meetings (pricing), Min. guarantees, long term agreements, meet customer requirements.	Financial risk. Failure to achieve objectives.
Mike Sellers (Port Director)	Revenue	4	3	Lack of funding to successfully maintain and develop port.	Strategic planning, strong relationship with Members, good communication.	Financial risk. Failure to achieve objectives.
Rupert Taylor (Harbour Master)	Revenue	2	5	Section 75 debt payable following an employment-cessation event.	Planning, mitigation options utilised.	Financial risk. Failure to achieve objectives.
Rupert Taylor (Harbour Master)	Maritime	2	5	Maritime incident such as fire, collision or grounding or blocking of the harbour.	Port Marine Safety Code and Annual Audit.	Maritime risk. Failure to achieve objectives.
Rupert Taylor (Harbour Master)	Maritime	2	5	Terrorist alert on a vessel approaching the Port.	Liaison by Harbour Master with Queens Harbour Master and Police. Involvement with Port Facilities Security Officer.	Maritime risk. Failure to achieve objectives.
Mike Sellers (Port Director)	Port Operations	5	2	Brexit. Reduced and slower throughput in the Port. Potential increased requirements for trader provider facilities.	Awareness of Brexit plans. Good communication and liaison with Border Force, and other groups including The BPA, UK Chamber of Shipping and Customs agency in MMD.	Port Operations risk. Failure to achieve objectives.
Kalvin Baugh (Ferry Port Manager)	Port Operations	3	4	Security alert within the port.	Port Security Plan.	Port Operations risk. Failure to achieve objectives.
Kalvin Baugh (Ferry Port Manager)	Port Operations	2	5	Environmental incident within the Port resulting in pollution.	Emergency Plan and Environmental Impact Assessment	Port Operations risk. Failure to achieve objectives.
Rupert Taylor (Harbour Master)	Port Operations	2	5	Serious health and safety incident within the Port affecting staff, port users or the general public.	Health and Safety procedures and Risk Assessments.	Port Operations risk. Failure to achieve objectives.

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Appendix 4 Asbestos & Legionella monitoring

Asbestos Qtr 1: Jan - March 2016

Property and Housing Services business

1. No Asbestos related incidents were reported to the H & S Unit or Property & Housing services in this reporting quarter
2. The following information details 'pro-active' Asbestos management activities undertaken by Property and Housing Services

Quarter 1 - 1 January - 31 March 2016	
No. of asbestos surveys facilitated	117
No. of asbestos samples undertaken	746
No. of asbestos removal projects	390
No. of Asbestos Re-inspections	21
No. of FTE PCC employees working on Asbestos	2
HRA expenditure on Asbestos compliance & monitoring measures this quarter.	£241,028
General Fund expenditure on Asbestos compliance & monitoring measures 1 Jan - 31 Dec 2016.	See Q4

Asbestos Qtr 2: April - June 2016

Property and Housing Services business

1. No Asbestos related adverse incidents were reported to the H & S Unit or Property & Housing services in this reporting quarter
2. Internal Audit report on Asbestos procedures gives assurance on all areas
3. The following information details 'pro-active' asbestos management activities undertaken by Property and Housing Services specialist staff

Quarter 2 - 1 April - 30 June 2016	
No. of asbestos surveys facilitated	246
No. of asbestos samples undertaken	755
No. of asbestos removal projects	543
No. of Asbestos Re-inspections	37
No. of FTE PCC employees working on Asbestos	2
HRA expenditure on Asbestos compliance & monitoring measures this quarter.	£221,822
General Fund expenditure on Asbestos compliance & monitoring measures 1 Jan - 31 Dec 2016.	See Q4

Asbestos Qtr 3: July - Sep 2016

Property and Housing Services business

1. No Asbestos related adverse incidents were reported to the H & S Unit or Property & Housing services in this reporting quarter
2. Statutory Services Manager appointed to oversee PCC Asbestos compliance
3. The following information details 'pro-active' asbestos management activities undertaken by Property and Housing Services specialist staff

Quarter 3 - 1 July - 30 Sep 2016	
No. of asbestos surveys facilitated	277
No. of asbestos samples undertaken	693
No. of asbestos removal projects	543
No. of asbestos re-inspections	75
No. of FTE PCC employees working on Asbestos	2
HRA expenditure on Asbestos compliance & monitoring measures this quarter.	£394,475
General Fund expenditure on Asbestos compliance & monitoring measures 1 Jan - 31 Dec 2016.	See Q4

Asbestos Qtr 4: Oct - Dec 2016

Property and Housing Services business

1. No Asbestos related adverse incidents were reported to the H & S Unit or Property & Housing services in this reporting quarter
2. The following information details 'pro-active' asbestos management activities undertaken by Property and Housing Services specialist staff

Quarter 4 - 1 Oct - 31 Dec 2016	
No. of asbestos surveys facilitated	217
No. of asbestos samples undertaken	549
No. of asbestos removal projects	372
No. of asbestos re-inspections	30
No. of FTE PCC employees working on Asbestos	2
HRA expenditure on Asbestos compliance & monitoring measures this quarter.	£707,590
General Fund expenditure on Asbestos compliance & monitoring measures 1 Jan - 31 Dec 2016.	£30,847

Legionella Qtr 1: Jan - February 2016

Property and Housing Services business

1. No Legionella related incidents were reported to the H & S Unit or Property & Housing services in this reporting quarter
2. The following information details 'pro-active' Legionella management activities undertaken by Property and Housing Services

Quarter 1 - 1 January - 31 March 2016	
No. of Legionella Monitoring completed	388
No. of Legionella Risk assessments undertaken	28
No. of PCC properties now due a Legionella Risk Assessment	Not Known
No. of FTE PCC employees working on Legionella	1
HRA expenditure on legionella prevention & monitoring measures this quarter.	£37,489
General Fund expenditure on legionella prevention & monitoring measures this quarter.	£25,182

Legionella Qtr 2: April - June 2016

Property and Housing Services business

1. No Legionella related incidents were reported to the H & S Unit or Property & Housing services in this reporting quarter
2. The following information details 'pro-active' Legionella management activities undertaken by Property and Housing Services

Quarter 2 - 1 April - 30 June 2016	
No. of Legionella Monitoring completed	265
No. of Legionella Risk assessments undertaken	0
No. of PCC properties now due a Legionella Risk Assessment	95
No. of FTE PCC employees working on Legionella	1
HRA expenditure on legionella prevention & monitoring measures this quarter.	£46,400
General Fund expenditure on legionella prevention & monitoring measures this quarter.	£3,272

Legionella Qtr 3: 1 July - Sep 2016

Property and Housing Services business

1. No Legionella related incidents were reported to the H & S Unit or Property & Housing services in this reporting quarter
2. Statutory Services Manager appointed to oversee PCC Legionella compliance
3. The following information details 'pro-active' Legionella management activities undertaken by Property and Housing Services

Quarter 3 - 1 July - 30 Sep 2016	
No. of Legionella Monitoring Completed	283
No. of Legionella Risk assessments undertaken	3
No. of PCC properties now due a Legionella Risk Assessment	92
No. of FTE PCC employees working on Legionella	1
HRA expenditure on legionella prevention & monitoring measures this quarter.	£30,590
General Fund expenditure on legionella prevention & monitoring measures this quarter.	£8,399

Legionella Qtr 4: Oct - Dec 2016

Property and Housing Services business

1. No Legionella related incidents were reported to the H & S Unit or Property & Housing services in this reporting quarter
2. Property and Housing receive notification from Internal Audit of intention to Audit Legionella compliance.
3. The following information details 'pro-active' Legionella management activities undertaken by Property and Housing Services

Quarter 4 - 1 Oct - 31 Dec 2016	
No. of Legionella Monitoring Completed	276
No. of Legionella Risk assessments undertaken	39
No. of PCC properties now due a Legionella Risk Assessment	53
No. of FTE PCC employees working on Legionella	1
HRA expenditure on legionella prevention & monitoring measures this quarter.	£12,096
General Fund expenditure on legionella prevention & monitoring measures this quarter.	£14,412



Title of meeting:	Governance and Audit and Standards Committee
Date of meeting:	30 th June 2017
Subject:	Draft Annual Governance Statement
Report by:	Director of HR, Legal and Performance
Wards affected:	n/a
Key decision:	No
Full Council decision:	No

1. Purpose of report

- 1.1 The report seeks comment from the Governance and Audit and Standards Committee for the council's draft Annual Governance Statement (AGS) for 2016/17 and for the associated framework for monitoring progress.

2. Recommendations

- 2.1 The Governance and Audit and Standards Committee are asked to:
- 1) Note the progress and recommendations made against the 2016/17 annual governance issues as set out in Appendix 1
 - 2) Comment on the draft Annual Governance Statement 2016/17 (Appendix 2)
 - 3) Note the updated Local Code of Governance as set out in Appendix 3.

3. Background

- 3.1 The authority has a duty to produce and publish an Annual Governance Statement (AGS). This sets out how Portsmouth City Council has complied with the Local Code of Governance, and how the authority meets the requirements of Regulation 4 (3) of the Accounts and Audit (England) Regulations 2011.
- 3.2 The purpose of the AGS is to set out the systems and processes in place to ensure that Council business is conducted lawfully and in accordance with proper standards. Compliance helps ensure that public money is safeguarded, properly accounted for and used economically, efficiently and effectively. It also acknowledges the Council's responsibility to secure continuous improvement in the way in which its functions are exercised by outlining significant governance issues facing the organisation, and setting out how these will be addressed.
- 3.3 It is a key role of the Governance and Audit committee to monitor governance issues across the authority and ensure they are performance managed. The

Governance and Audit and Standards Committee receive regular updates on the development of the Annual Governance Statement. Governance issues are also reviewed regularly by the Corporate Governance Group which is attended by the Chief Executive, Deputy Chief Executive, Director of HR, Legal and Performance, Director of Finance and IS and the Chief Internal Auditor.

- 3.4 The AGS reports against the six core principles of governance, originally adopted by the council in March 2010. Every year, a number of sources are analysed, including the Annual Audit Letter, in order to review the council's practices and highlight further governance issues where the authority may be exposed.

4. Reasons for recommendations

- 4.1 The draft 2016/17 Annual Governance Statement has been prepared according to the proper practice framework - Delivering Good Governance in Local Government issued jointly by SOLACE (Society of Local Authority Chief Executives and Senior Managers) and CIPFA (Chartered Institute of Public Finance and Accountancy) in 2007 (addendum issued in 2012).
- 4.2 Considerable progress has been made in addressing the governance issues identified in the 2015/16 AGS. However, it has been proposed that some of those issues roll over into the 2016/17 AGS to ensure that further work necessary is tracked. The mechanisms for continuing monitoring are set out in Appendix 2.

5. Equality impact assessment

- 5.1 An equality impact assessment is not required as the recommendations do not have a negative impact on any of the protected characteristics as described in the Equality Act 2010.

6. Legal implications

- 6.1 Legal considerations have been taken into account in the preparation of this report and where appropriate embodied within it.

7. Director of Finance's comments

- 7.1 There are no financial implications arising from the recommendations in this report.

.....
Signed by: Jon Bell, Director of HR, Legal and Performance

Appendices:

Appendix 1 - Progress against issues identified in the 2015/16 Annual Governance Statement

Appendix 2 - Annual Governance Statement 2016/17

Appendix 3 - Local Code of Governance - updated June 2017

Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location

The recommendation(s) set out above were approved/ approved as amended/ deferred/ rejected by on

.....
Signed by:

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Appendix 1 - Progress against issues identified in the 2015/16 Annual Governance Statement

Portsmouth City Council have completed a number of actions over the last year, that have addressed or alleviated significant governance issues identified in the 2015/16 Annual Governance Statement. The following significant governance issues have been identified and further actions have been put in place against each, in order to strengthen the Council's governance arrangements.

Ref	Identified governance issue	Actions to address the issue	Measures of success	Lead officer	Update on progress	Outcome of monitoring
1	The Constitution has not been reviewed/formally updated for a number of years.	Ongoing working group to review the Constitution.	Updated constitution published on Council website	Deputy Chief Executive and City Solicitor	This continues to be a work in progress that will need to be completed alongside the Governance, Audit and Standards Committee	It is recommended that continues to be reflected as a governance issue for 2017/18
2	PolicyHub is not fully up to date	A project has taken place to update the content of information and ensure that the Active Directory interface is effective. Rollout of the up to date material, including staff communication will start in the Summer, with updated information continuing to be added on an ongoing basis.	New content uploaded and disseminated to staff	PolicyHub Board	This issues regarding IT that were causing difficulties have been resolved and the system is now working as intended.	On the basis that the issues have been resolved, it is recommended that this issue is not included as a matter for monitoring in 2017/18.
3	Business continuity planning	As per the new Business Continuity Standard ISO22301 new Directorate Business	a) Compliant business continuity plans in place	Civil Contingencies Unit	The new policy and procedure for carrying out this work has been	On the basis that this matter is now addressed, it is recommended that the

Ref	Identified governance issue	Actions to address the issue	Measures of success	Lead officer	Update on progress	Outcome of monitoring
		Continuity Plans are being produced to reflect the necessary changes. Each directorate to complete their plan by Summer 2016. The plans will be tested within a year of completion.	b) Plans tested within a year of completion		agreed and is proceeding.	issue of general business continuity planning is not included for monitoring in 2017/18. However, there is a very specific issue around business continuity in respect of disaster recovery for key systems that will be included.
4	Our desire to explore more innovative and commercial ways of working requires a flexible and agile approach, but also a clear framework for governing arrangements.	Ensure arrangements for traded services and arms-length organisations are fit for purpose	Audit of arrangements completed	Deputy Chief Executive and City Solicitor	A number of new ways of working and trading have developed over the past year, and the audit of arrangements has been completed. Very specific arrangements have included increased work for other authorities, including Gosport Borough Council; and increased integration with health partners.	As this remains a current issue, and given the potentially significant organisational implications of new ways of working, it is recommended that these matters continue to be monitored throughout 2017/18.
5	Emerging governance requirements - the council is exploring new ways of working, including alternative delivery models and partnering.	Ensure new partnering arrangements have full regard to legal, financial and HR implications	Ongoing - various structures for different arrangements, for example Combined Authority Programme Office. Health and Care Portsmouth Programme and Better Care Fund arrangements.	Chief Executive and Deputy Chief Executive		

Ref	Identified governance issue	Actions to address the issue	Measures of success	Lead officer	Update on progress	Outcome of monitoring
6	Changes in statutory duties: ongoing changes in the work of local government and the role in relation to other agencies means that the organisation needs to monitor the scope of duties, powers and expectations. Important changes include those contained in the DfE White Paper "Educational Excellence Everywhere" and the introduction of duties for care leavers.	Business planning to set out scope of requirements and the needs to fulfil these.	n/a	Chief Executive / Deputy Chief Executive	The organisation continues to adapt to changes in the scope of duties, powers and expectations.	In the light of a new Parliament, it is recommended that this matter continues to be monitored.

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Annual Governance Statement 2016-17

www.portsmouth.gov.uk

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What is the annual governance statement?

Legislation¹ requires local authorities to prepare and publish an Annual Governance Statement, in order to report publically on the effectiveness of the Council's governance arrangements. The statement provides an overview of the current governance framework and a summary of the review on the effectiveness of Portsmouth City Council's governance framework for 2016/17 (which coincides with the annual statement of accounts). The statement openly communicates significant governance issues that have been identified during the review and sets out how the authority will secure continuous improvement in these areas during over the coming year.

What do we mean by governance?

By governance, we mean the arrangements that are put in place to ensure the intended outcomes for local people are defined and achieved. It comprises the systems and processes, cultures and values, by which local government bodies are directed and controlled. Good governance is about making sure the Council does the right things, in the right way for the right people, in a timely inclusive, open, honest and accountable manner.

Scope of responsibility

Portsmouth City Council is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded, properly accounted for and used economically, efficiently and effectively. It also has a duty under the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness. In discharging this overall responsibility, Portsmouth City Council is responsible for putting in place proper arrangements for the governance of its affairs, and facilitating the effective exercise of its functions, which includes arrangements for the management of risk.

About the Council

Portsmouth's Council comprises of 42 Councillors (19 Conservative, 15 Liberal Democrat Councillors, 4 UKIP Councillors, 2 Labour Councillors and 2 non-aligned Independent Councillors) who represent 14 wards across the City. It operates a minority administration under a Leader (Cllr Donna Jones, Conservative) and Cabinet structure with Cabinet Members responsible for individual portfolios.

The Council employs around 3,600 members of staff and provides an extensive range of services to residents, businesses and visitors in the City, including: city development and cultural services, regulatory business and standards services, transport and environmental services, housing and property services, children's and adult's social care and safeguarding, education services, revenues and benefits and health and welfare services. The Chief Executive and Head of the Paid Service is David Williams.

¹ Accounts and Audit (England) Regulations 2011, regulation 4(3)

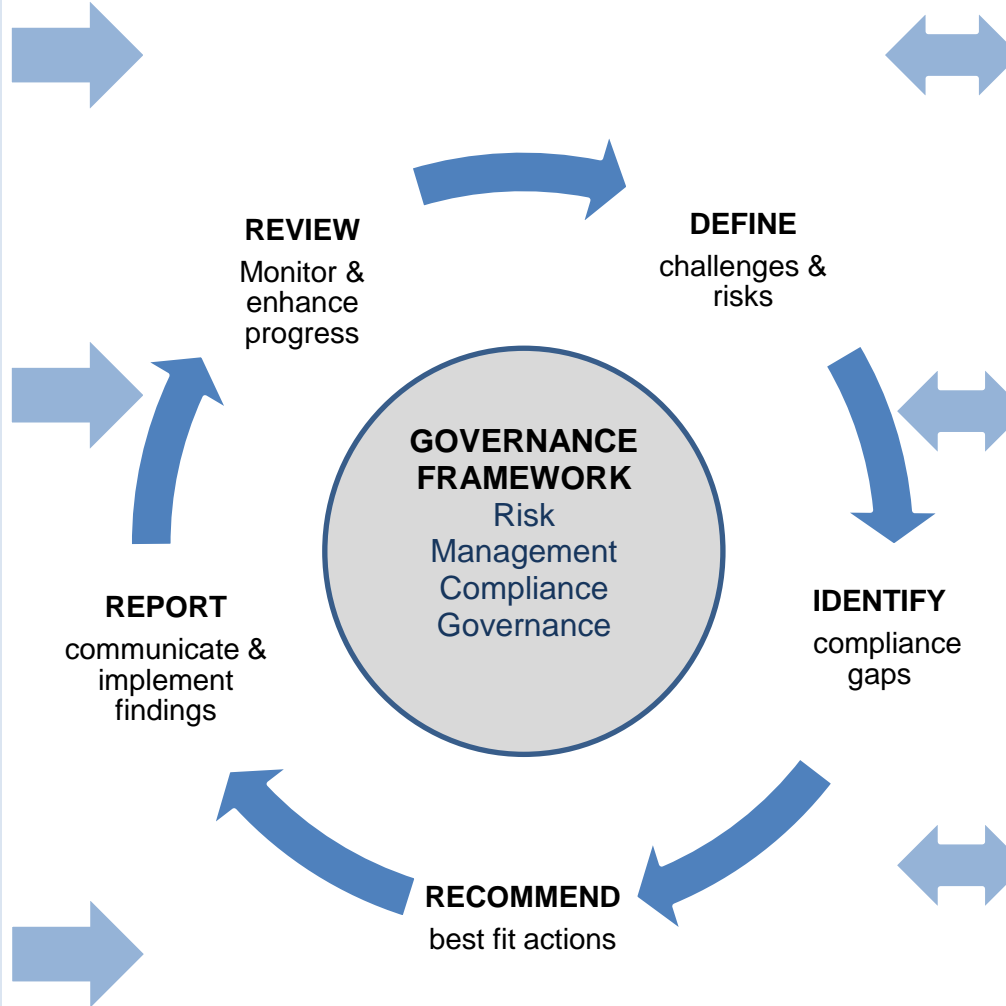
GOVERNANCE PRINCIPLES

- Focusing on the purpose of the Authority, and on outcomes for the community; and creating and implementing a vision for the local area.
- Members and officers working together to achieve a common purpose with clearly defined functions and roles.
- Promoting the values for the authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour
- Taking informed and transparent decisions which are subject to effective scrutiny and managing risk
- Developing the capacity and capability of members and officers to be effective
- Engage with local people and other stakeholders to ensure robust public accountability

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INTERNAL CONTROLS

- Leadership, Culture and Planning**
Organisational goals and priorities
Strategic and operational plans
Performance management
Medium term financial strategy
- Statutory Officers & Decision Making**
The Constitution
The Monitoring Officer
Section 151 Officer
- Policies & Procedures**
Codes of conduct
Ways of working
Anti-fraud, Bribery and Corruption Policy
Whistleblowing Policy
HR Policies and procedures
- People, Knowledge, Finance, Assets**
Robust HR practices
Information governance
Performance monitoring and improvement
Financial management and reporting
Ethical & legal practices
- Scrutiny and Transparency**
Freedom of Information requests
Complaints procedure
Reports considered by legal and finance experts
Equality impact assessments
Corporate risk directory
Transparency duty publication
- Partnership Working**
Community engagement statement
'Have your say'
Consultations
Terms of reference for partnerships



CIPFA/SOLACE Good governance principles and the local code of governance

In 2007 CIPFA/SOLACE issued best practice guidance for 'Delivering Good Governance in Local Government'². The framework sets out six principles that should underpin the governance of each Local Authority. Portsmouth City Council has approved and adopted a local code of governance, which is consistent with the CIPFA/SOLACE good governance principles. The code summarises the Council's internal arrangements that have been put in place to ensure effective governance and includes hyperlinks to supporting documentation. A copy of the authority's code can be obtained from the Council. The following sections look at how the Council is held to account for these six principles.

1-Focusing on the purpose of the authority and on outcomes for the community and creating and implementing a vision for the local area.

Organisational goal and aspirations for the City



Portsmouth City Council; working together to shape the great waterfront city

Portsmouth City Council has a shared organisational goal (above), which is designed to be simple, reflecting the fact that although we are a diverse organisation, everything the council does is designed to make the city a better place and improve life for our residents. All of us are working together to shape Portsmouth, a great waterfront city that:

- Has a **sustainable economy** that delivers **regeneration** and **inward investment**, creates opportunities and **drives prosperity** for our residents
- Has **high quality homes**
- Is a **great place to live** that makes best use of our natural assets and supports a **vibrant and diverse culture**
- Offers **excellent education** and training so all our residents can achieve their full potential and businesses have the skills to grow
- **Protects and supports vulnerable residents**, encourages independence and enables them to achieve their full potential
- Keeps residents **healthy** and the city **safe**.

We have set clear priorities about the way we will work and what we be trying to achieve. We will:

- Be entrepreneurial and efficient - so we can meet our financial challenges and continue to deliver services that meet our customers' needs
- Provide excellent customer service - Our customers deserve **excellent service** and even though they may not have a choice to use our services, we must do all we can to help them as best we can.
- Raise education standards - education is the stepping stone for children to **achieve success** in later life.
Encourage regeneration and investment - **regenerating** and **encouraging investment** is key to creating aspirations and opportunities that all our residents can benefit from and enhancing Portsmouth as a great place to live
- Empower residents to be healthy and independent - for residents to be able to make the most of their opportunities and live independently they must be **safe and healthy**

² <http://www.cipfa.org/policy-and-guidance/publications/d/delivering-good-governance-in-local-government-framework>

Planning and monitoring

In order to secure these outcomes for residents and service users, the Council needs to respond to some tough challenges. Over the past 6 years (since 2011/12), Central Government funding to Portsmouth City Council has reduced by over £68m (amounting to a funding reduction of 44%). Taken together with other financial pressures, total savings over the period of £86m have been made by the Council, representing circa 42% of the Council's controllable spending. The Government published the provisional Local Government Finance Settlement 2017/18 in December 2016. In overall terms, the Settlement includes a further reduction in Government Funding over the three year period 2017/18 to 2019/20 of £16.5m representing a further 36% funding reduction.

This means that it is important that, whilst we focus on achieving the organisational goal and priorities, we plan services in detail on an annual basis, focusing on challenges over the coming year but also considering the medium term horizon.

Medium Term Financial Strategy

The Council's stated Medium Term Financial Strategy seeks to balance achievement of the organisational aspirations whilst delivering the necessary savings.

The overall aim of the strategy is to ensure that "in year" expenditure matches "in year" income over the medium term whilst continuing the drive towards regeneration of the city, being entrepreneurial and protecting the most important and valued services. There are four strands to the strategy:

- **1 - Transforming to an Entrepreneurial Council:** income generation; maximise the return on property and assets; invest for commercial gain; develop and establish commercial entities to sell services profitably; capital investment for jobs and business growth; establishing strategic partnerships/shared service arrangements to reduce costs and increase resilience
- **2 - Reduce the extent to which the population needs Council services:** re-direction of resources towards preventative services; design fees and charges policies to distinguish between want and need; capital investment towards jobs and skills to raise prosperity
- **3 - Increase the efficiency and effectiveness of the council's activity:** contract reviews; rationalisation of operational buildings; support to the voluntary sector; targeted efficiency reviews in resource hungry services; capital investment for on-going savings or costs avoidance
- **4 - Withdraw or offer minimal provision of low impact services:** strong focus on needs, priorities and outcomes; use the insights of councillors to inform priorities; use the results of public consultation to inform priorities.

2-Members and officers working together to achieve a common purpose with clearly defined functions and roles.

The Constitution

The constitution³ sets out the how the Council operates; the roles and responsibilities of members, officers and the scrutiny and review functions; how decisions are made; and the procedures that are followed to ensure that these are efficient, transparent and accountable to local people. Although there is no longer a statutory requirement, Portsmouth City Council has taken the decision to continue with this arrangement internally and is in the process of updating the constitution to ensure it reflects current practice. As well as working together as a single organisation, it is important that

³ A copy of the constitution can be found at <https://www.portsmouth.gov.uk/ext/the-council/policies-and-strategies/constitution.aspx>

members and officers continue improve their working relations with other organisations too, both locally and sub-nationally, to achieve a common purpose of improved efficiency and effectiveness.

The Monitoring Officer

The Monitoring Officer is a statutory function and ensures that the Council, its officers, and its elected members, maintain the highest standards of conduct in all they do. The Monitoring Officer is assisted when required by appointed deputies. The Monitoring Officer ensures that the Council is compliant with laws and regulations, as well as internal policies and procedures. He is also responsible for matters relating to the conduct of Councillors and Officers, and for monitoring and reviewing the operation of the Council's Constitution. In PCC, the monitoring officer is Michael Lawther, the Deputy Chief Executive.

Section 151 Officer

Whilst all Council Members and Officers have a general financial responsibility, the s151 of the Local Government Act 1972 specifies that one Officer in particular must be responsible for the financial administration of the organisation and that this Officer must be CCAB qualified. This is typically the highest ranking qualified finance officer and in Portsmouth City Council this is Chris Ward, who is also the Director of Finance and Information Services.

3-Promoting the values for the authority and demonstrating the values of good governance through upholding high standards of conduct and behavior.

Codes of conduct

On joining the Council, members and officers are provided with a contract outlining the terms and conditions of their appointment. All staff must sign a code of conduct and declare any financial interests, gifts or hospitality on a public register. Additionally, members are expected to declare any interests at the start of every meeting that they attend in accordance with Standing Orders. Members and officers are required to comply with approved policies. The Council uses a system called Policyhub that enables effective dissemination of general and job-specific policies, and has the built in functionality to measure compliance i.e. that a member of staff has read and agreed to the policy.

Financial management

The s151 Officer is responsible for leading the promotion and delivery of good financial management so that public money is safeguarded at all times, ensuring that budgets are agreed in advance and are robust, that value for money is provided by our services, and that the finance function is fit for purpose. He advises on financial matters to both the Cabinet and full Council and is actively involved in ensuring that the authority's strategic objectives are delivered sustainably in line with long term financial goals. The s151 Officer together with finance staff ensure that new policies or service proposals are accompanied by a full financial appraisal which is properly costed, fully funded and identifies the key assumptions and financial risks that face the council.

Financial Rules were revised in 2013/14 by the s151 Officer so that Portsmouth City Council can meet all of its responsibilities under various laws, and continue to be updated on a rolling basis. They set the framework on how we manage our financial dealings and are part of our City Constitution. They also set the financial standards that will ensure consistency of approach and the controls needed to minimise risks. The s151 Officer has a statutory duty to report any unlawful financial activity or failure to set or keep to a balanced budget. He also has a number of statutory powers in order to allow this role to be carried out, such as the right to insist that the local authority makes sufficient financial provision for the cost of internal audit.

The authority's financial management arrangements conform to the government requirements of the CIPFA Statement on "The role of the chief financial officer in local government (2010). The Director of Finance (Chief Financial Officer and s151 Officer) works with the Chief Executive and Deputy Chief Executive, helping to develop and implement strategy and deliver the strategic objectives. The Chief Finance Officer has input into all major decisions, and advises on financial matters to the Cabinet. He is responsible for ensuring that budgets are agreed in advance and that the agreed budget is robust, to ensure value for money is provided by our services, and is responsible for ensuring the finance function is fit for purpose. A protocol for the Chief Financial Officer in Portsmouth was approved in November 2011.

Anti-fraud, bribery and corruption

The Council is committed to protecting any funds and property to which it has been entrusted and expects the highest standards of conduct from Members and Officers regarding the administration of financial affairs. The Council's Anti-Fraud, Bribery and Corruption Policy⁴ (revised in May 2016) conforms to legislative requirements and sets out steps to minimise the risk of fraud, bribery, corruption and dishonesty and procedures for dealing with actual or expected fraud.

Whistleblowing

The Council is committed to achieving the highest possible standards of openness and accountability in all of its practices. The Council's Whistleblowing policy⁵ sets out the options and associated procedures for Council staff to raise concerns about potentially illegal, unethical or immoral practice and summarises expectations around handling the matter. The Policy is kept under review by the Monitoring Officer, and reports (which include concerns raised and their outcomes) are submitted to the Governance and Audit and Standards Committee quarterly.

Governance and Audit and Standards Committee

As its name suggests, the Governance, and Audit and Standards Committee has the responsibility for receiving many reports that deal with issues that are key to good governance. The Committee undertakes the core functions of an Audit Committee identified in CIPFA's practical guidance⁶. The group has an agreed set of terms of reference⁷, which sets out their roles and responsibilities of its members⁸. On an annual basis the Chair of the Committee undertakes a self-assessment, which informs the overall review of effectiveness of the Council's governance arrangements.

4-Taking informed and transparent decisions which are subject to effective scrutiny and managing risk.

Transparency

The Council and its decisions are open and accessible to the community⁹, service users, partners and its staff. The Freedom of Information Act 2000 (FoI) gives anyone the right to ask for any information held by a public authority, which includes Portsmouth City Council, subject only to the need to preserve confidentiality in those specific circumstances where it is proper and appropriate to do so.

⁵ A copy of the whistleblowing policy can be located at :

<http://democracy.portsmouth.gov.uk/Data/Governance%20&%20Audit%20&%20Standards%20Committee/20130314/Agenda/GAS20130314r10.pdf>

⁶ A copy of the guidance can be found at: <http://www.cipfa.org/Policy-and-Guidance/Publications/A/Audit-Committees--Practical-Guidance-for-Local-Authorities>

⁷ The Governance and Audit and Standards Committee Terms of Reference can be found at:

<http://www.portsmouth.gov.uk/media/SC20120716r5app4.pdf>

⁸ Membership can be found at: <http://democracy.portsmouth.gov.uk/mgCommitteeDetails.aspx?ID=148>

⁹ Meetings, agendas and minutes: <http://democracy.portsmouth.gov.uk/uucoverpage.aspx?bcr=1>

All reports requiring a decision are considered by appropriately qualified legal, and finance staff with expertise in the particular function area before they are progressed to the relevant committee/group. Portsmouth City Council wants to ensure that equality considerations are embedded in the decision-making and applied to everything the Council does. To meet this responsibility, equality impact assessments are carried out on all major council services, functions, projects and policies in order to better understand whether they impact on people who are protected under the Equality Act 2010 in order to genuinely influence decision making.

Risk management

The Council has reviewed its approach to managing risks over the last year and approved a revised Risk Management Policy, which seeks to embed a culture of risk awareness within everyday activities. All significant risks (defined as something that may result in failure in service delivery, significant financial loss, non-achievement of key objectives, damage to health, legal action or reputational damage) must be logged on a Corporate Risk Directory, profiled (as high/medium/low), and mitigating measures/assurances must be put in place. The new approach minimises formal processes and unnecessary documentation, whilst ensuring that risk management remains an effective part of the governance framework.

Effective scrutiny

The Council operates five Scrutiny Panels¹⁰, overseen by a Scrutiny Management Panel and governed by their own terms of reference. It is important that Scrutiny Panels act effectively as one of their key tasks is to review and challenge the policy decisions that are taken by Cabinet. Topics that are chosen to be 'scrutinised' are looked at in depth by a cross party panel of Councillors. They assess how the Council is performing and see whether they are providing the best possible, cost effective service for people in the city. The panel's findings are reported to the Cabinet and may result in changes to the way in which services are delivered.

Complaints

There is a clear and transparent procedure¹¹ for dealing with complaints. The Council operates a three-stage complaints procedure and promises to acknowledge complaints within 5 working days and respond fully within 10 working days for first-stage complaints, 15 working days for second-stage complaints and 20 working days for third-stage complaints. If complainants remain dissatisfied they have the right to refer the matter to the Local Government Ombudsman.

5-Developing the capacity and capability of Members and Officers to be effective.

Recruitment and induction

The Council operates a robust interview and selection process to ensure that Officers are only appointed if they have the right levels of skills and experience to effectively fulfil their role. If working with children and/or vulnerable adults they will be subject to an enhanced criminal records check prior to appointment. New Officers must attend an induction day, which provides information about how the organisation works. Newly elected Councillors are required to attend an induction which includes information on: roles and responsibilities; political management and decision-making; financial management and processes; health and safety; information governance; and safeguarding.

¹⁰ Further information on our Scrutiny Panels can be found at: <http://democracy.portsmouth.gov.uk/mgListCommittees.aspx?bcr=1>

¹¹ Complaints procedure: <https://www.portsmouth.gov.uk/ext/the-council/transparency/comment,-compliment-or-complaint.aspx>

Training and development

All Officers are required to complete a number of mandatory e-learning courses including health and safety, equalities and diversity, financial rules, and information governance. Officers and Members have access to a range of IS, technical, soft skills and job specific training courses. Compulsory training is provided for Members who sit on the following committees: Governance and Audit and Standards Committee, Licensing Committee, and the Planning Committee. Other member-led training is available to Councillors through Democratic Services and Learning and Development. The package of support available gives Members the opportunity to build on existing skills and knowledge in order to carry out their roles effectively.

Performance monitoring

All Officers receive regular one to ones with their Manager in order to monitor workload and performance. Opportunities are provided for identifying future training and development needs, and to track progress against objectives. The effectiveness of individual performance monitoring is tracked in a number of ways, including by asking staff about it as part of regular employee opinion surveys.

6-Engaging with local people and other stakeholders to ensure robust public accountability.

Engagement and communication

It is recognised that people need information about what decisions are being taken locally, and how public money is being spent in order to hold the council to account for the services they provide. The views of customers are at the heart of the council's service delivery arrangements. Portsmouth City Council has developed a Community Engagement Statement¹², which reflects the council's ambition to enable and empower communities to shape the places within which they live and work, influence formal decision making and make informed choices around the services they receive. The Community Engagement Statement asserts the following objectives for the council's engagement activity:

- Active citizens and strong communities,
- Clearer links between consultation and decision-making,
- A City that reflects its diversity and improved use of resources and aims to build upon the council's commitment to finding ways to inform,
- Consult and involve local people in all areas of life.

To be effective this process aims to inspire and support a genuine two-way dialogue with all sections of the community and other stakeholders. There are a number of ways people can get involved and connect with the council, many of which are listed on the council webpage¹³. Local people have the option to engage in a dialogue through: social media sites (including Facebook and twitter), petition schemes, neighbourhood forums, Healthwatch Portsmouth, council meetings (open to the public), their local Councillor¹⁴.

Consultations

The council keeps a forward plan of planned consultations. Internally, a consultation toolkit has been developed to guide council staff through the consultation process. The agreed process ensures that engagement activity is relevant, accessible, transparent and responsive. To increase awareness, consultations are proactively promoted.

¹² Community Engagement Statement: <https://www.portsmouth.gov.uk/ext/documents-external/cou-community-engagement-statement.pdf>

¹³ Opportunities to have your say can be found at: <https://www.portsmouth.gov.uk/ext/community-and-environment/community/have-your-say.aspx>

¹⁴ Who are your Councillors, MPs and MEPs: <http://democracy.portsmouth.gov.uk/mqMemberIndex.aspx?bcr=1>

The council issues a free copy of their Flagship magazine to all households keeping them up to date about what's going on in the City. The authority also issues other publications to specific groups, including "Term Times" for schools and "HouseTalk" for tenants.

Portsmouth City Council regularly engages with its employees to ensure they are kept informed about the council and the city. There are communication channels for "off-line" and online employees and a dedicated communications point of contact for staff. Employees are regularly asked to complete opinion surveys so the council can get a better understanding of what's working and what's not. The results are carefully considered and used to address issues.

Partnership working

Partnerships are about the council coming together with right organisations to deliver improved outcomes for local people. Portsmouth City Council is involved in many different partnerships at different levels, each with their own set of terms of reference for effective joint working. There are 4 strategic partnerships in Portsmouth. The Health and Wellbeing Board, the Children's Trust Board, Safer Portsmouth Partnership, which are involved in delivering the city's desired outcomes. Reviews of strategic priorities for each of the partnerships have been aligned in order to better understand shared priorities, reduce duplication and improve commissioning and delivery activity.

The city also maintains a Public Service Board, providing a regular opportunity for key decision-makers to come together and discuss significant issues in the locality.

We are increasingly joining up working at an operational level with partner organisations, notably in respect of multi-agency teams for children and families, and locality teams to deliver Better Care. A range of mechanisms are used to support these arrangements.

Monitoring and evaluating the effectiveness of the governance framework

Portsmouth City Council has the responsibility for conducting at least annually, a review of the effectiveness of its governance framework. The review of effectiveness is informed by the work of:

- The Chief Executive, Deputy Chief Executive and Directors within the Authority who have responsibility for the development and maintenance of the governance environment.
- The Chief Internal Auditor's annual report and opinion, and also by comments made by the external auditors and other review agencies and inspectorates.
- The Chief Financial Officer whose role is performed by the Director of Finance (and who is also Portsmouth City Council's Section 151 Officer) who has statutory responsibility for ensuring the proper management of all Portsmouth's financial affairs.
- The Corporate Governance Group, made up of the Chief Executive, the Deputy Chief Executive (monitoring officer), the Chief Internal Auditor, the Director of Finance (Section 151 Officer) and the Director of HR, Legal and Performance with input from others as relevant. This group meets regularly to discuss corporate governance arrangements and issues, and to reflect on recurring themes and spheres of activity relating to council improvement.
- The Governance and Audit and Standards Committee

There is clear framework for evaluating the effectiveness of internal control, and for 2016/17 this has included:

- An evaluation of progress against previously identified governance issues.
- Reviews of:
 - The effectiveness of Internal and External Audit.
 - External Audit's Annual Plan and opinion.
 - The Annual Internal Audit report and opinion.
 - The Corporate Risk Directory.
 - Issues identified through performance management.
 - Corporate complaints and any complaints regarding Members.
 - Freedom of information requests.
 - Data protection and information governance issues.
 - Employee Opinion and Pulse Survey results.

Significant governance issues for 2017/18

Portsmouth City Council have completed a number of actions over the last year, that have addressed or alleviated significant governance issues identified in the 2015/16 Annual Governance Statement. The following significant governance issues have been identified and further actions have been put in place against each, in order to strengthen the Council's governance arrangements.

Ref	Governance issue	Source	Actions to address the issue	Measures of success	Lead/s	Timescale
1	The Constitution has not been reviewed/formally updated for a number of years.	Highlighted by the Corporate Governance Group	a-Ongoing working group to review the Constitution.	Updated constitution published on Council website	Deputy Chief Executive and City Solicitor	November 2017
2	Disaster recovery - risk management activity has identified that improvements need to be made in our arrangements for recovery in the event of losing key systems.	Highlighted through risk management and business continuity activity	Disaster Recovery capability is under active review with Disaster Recovery as a Service (DRaaS) solutions being implemented.	Capability to restore key IT functions for the authority more quickly than the current 3-5 days.	Deputy Chief Executive and City Solicitor	Ongoing development and review
Page 195	Cyber-security: Increasing risk of incidents leading to disruption of services, due to external threats in the form of "Ransomware" or "malware" and other kinds of malicious and deliberate attack.	Risk management	<ul style="list-style-type: none"> a) Revised guidance to staff "Be Cyber Secure" is part of an ongoing campaign run by Corporate Comms. b) IS Projects underway to implement enhanced technical and procedural measures to protect, defend and respond to cyber attacks. c) Strategic plans to migrate to cloud based services such as Office 365 and Azure will also provide additional protection and assurance. 	Prevention of cyber attacks	Deputy Chief Executive and City Solicitor	Ongoing review

Ref	Governance issue	Source	Actions to address the issue	Measures of success	Lead/s	Timescale
4	The council continues to explore new ways of working, including partnering and alternative service delivery models and taking more commercial approaches	Internal and external audit; performance and risk management activity	<ul style="list-style-type: none"> a) Ensure arrangements for traded services and arms-length organisations are fit for purpose b) Ensure new partnering arrangements have full regard to legal, financial and HR implications 	Ongoing - various structures for different arrangements	Chief Executive and Deputy Chief Executive	Necessary changes reported on a regular basis to Cabinet, Governance, Audit and Standards Committee and Employment Committee.
5	Changes in statutory duties: ongoing changes in the work of local government and the role in relation to other agencies means that the organisation needs to monitor the scope of duties, powers and expectations.	Performance and risk management	Service and resource planning to set out scope of requirements and the needs to fulfil these.	n/a	Chief Executive / Deputy Chief Executive	Ongoing reports to portfolios and committees.
6	Information governance - significant new responsibilities and requirements under the General Data Protection Regulation (fines will increase from March 2018)	Risk Management	Corporate working group to drive preparation for the new responsibilities - the GDPR project will review and update the Information Asset Register and will capture (electronic) data flows into and out of the organisation	Good state of organisational readiness for the change and low risk of sanction.	Deputy Chief Executive	Ongoing progress reporting to portfolio holder and committees.
7	Addressing underlying budget pressures, notably in children's services and adult social care	External audit plan	Ongoing monitoring of progress - transformation strategies developed	Financial gaps closing and eliminated over the medium term	Director of Finance, Director of Children's Services and Director of Adult's	Ongoing quarterly reporting on financial position to Cabinet; updates to

Ref	Governance issue	Source	Actions to address the issue	Measures of success	Lead/s	Timescale
					Services	portfolio holders

Effectiveness of the system of internal audit

Due to the number of critical and high risk exceptions raised under the audits carried out, the Audit opinion for 2016/17 is that only limited assurance on the effectiveness of the control framework can be given.

Whilst this opinion is the same level as the previous years the direction of travel is deteriorating not improving. Four audit opinion levels are now in place as agreed in the 2016/17 Audit and Counter Fraud Strategy and these are: no assurance, limited assurance, reasonable assurance and full assurance. Where there are mainly medium or low risk exceptions the annual audit opinion would be reasonable or full assurance.

There is still a significant level of high risk exceptions raised this year, a number of which are a result of failure by managers to carry out checks either previously performed centrally by support services or where they have differing priorities and capacity issues. In addition the level of investigation involving staff has not subsided, which may be indicative of the reduced resources and control layers, needed following the austerity measures

Internal Audit is concerned that the overall effectiveness of the control framework position is declining and will continue to work with Directors, the Deputy Chief Executive and the Chief Executive to improve on specific areas of control, risk management and governance weaknesses.

Any significant corporate weaknesses and agreed actions will be reflected in the Annual Governance Statement. The impact of the Internal Audit work for 2016/17 may affect that year's work for External Audit. It may also inform their work for 2017/18 and where they consider there are weaknesses in control that could materially affect the accounts they may need to carry out further work to gain the necessary audit assurance required for a true and fair view of the financial position and compliance with professional codes of practice.

Internal Audit has carried out a self-assessment and confirms that they are compliant with the Public Sector Internal Audit Standards (PSIAS).

Summary of significant governance issues for 2017/18

The review of effectiveness has identified significant governance issues within the Council's governance framework. Over the coming year, Portsmouth City Council will take steps to address the issues that have been identified in order to improve the Council's governance arrangements and improve assurance in the areas of most concern. Progress will be monitored and reported to the Governance and Audit and Standards Committee regularly over the next year.

Signed on behalf of Portsmouth City Council

.....
David Williams
Chief Executive

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Date

.....
Councillor Donna Jones
Leader of the Council

.....
Date

www.portsmouth.gov.uk

Telephone: 023 9268 8157

Email: kelly.nash@portsmouthcc.gov.uk

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What Is Corporate Governance?

Corporate governance is a term used to describe the way that organisations direct and control what they do. For local authorities, it includes the systems, policies and processes, as well as the cultures and values that underpin a Council's arrangements for effective: leadership, management, performance, delivery of positive customer outcomes, community engagement and stewardship of public money.

Why Do We Have a Local Code of Governance?

Portsmouth City Council has developed and adopted a Local Code of Governance, which sets out the organisation's governance arrangements and reflects the six core principles set out in the SOLACE/CIPFA Good Governance Framework (2007). The code demonstrates how the Council achieves good corporate governance and provides hyperlinks to supporting documents. Portsmouth City Council has established nine internal corporate governance controls, which have been incorporated into the Local Code of Governance. The controls have been chosen on the basis that they support the six core principles and are deemed critical to meeting the organisations business needs. All services are required to monitor and evidence compliance against them. The controls and local code will be reviewed on an annual basis and used to inform the production of the Annual Governance Statement, which is approved by the Governance and Audit and Standards Committee.

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Ref	Portsmouth City Council (PCC) Commitments	Current Governance Arrangements
(1)	Core Principle: Focusing on the purpose of the Authority; outcomes for the Community and creating and implementing a vision for the local area.	
(1.1)	Supporting Principle: Exercising strategic leadership by developing and clearly communicating the authority's purpose and vision and its intended outcomes for citizens and service users.	
(1.1.1)	Develop and promote the authority purpose and vision.	<p>PCC's organisational goal (established in 2012) is, 'working together to shape the great waterfront City' reflects the fact that everything the council does should help to make the city a better place and improve life outcomes for the City's residents.</p> <p>We have set clear priorities about the way we will work and what we be trying to achieve. We will:</p> <ul style="list-style-type: none"> - Be entrepreneurial and efficient - so we can meet our financial challenges and continue to deliver services that meet our customers' needs - Provide excellent customer service - Our customers deserve excellent service and even though they may not have a choice to use our services, we must do all we can to help them as best we can. - Raise education standards - education is the stepping stone for children to achieve success in later life. - Encourage regeneration and investment - regenerating and encouraging investment is key to creating aspirations and opportunities that all our residents can benefit from and enhancing Portsmouth as a great place to live - Empower residents to be healthy and independent - for residents to be able to make the most of their opportunities and live independently they must be safe and healthy

Ref	Portsmouth City Council (PCC) Commitments	Current Governance Arrangements
(1.1.2)	Ensure that partnerships are underpinned by a common vision of their work that is understood and agreed by all partners.	<ul style="list-style-type: none"> -Each of the council's key strategic people partnerships (the Health and Wellbeing Board, the Children's Trust and the Safer Portsmouth Partnership) have priorities and objectives set out in strategies that have been developed and agreed with the appropriate partners. They work together in an agreed way to ensure their work is underpinned by a common vision and agreed ways of working. - Each plan is underpinned by an assessment of need as set out in the Joint Strategic Needs Assessment.
(1.1.3)	Publish an annual report on a timely basis to communicate the authority's activities and achievements, its financial position and performance.	<ul style="list-style-type: none"> - A statement of accounts is published on an annual basis - The Medium Term Resource Strategy is a high level plan that sets out the City Council's Revenue Spending Plans for the next five years to deliver the priorities of the City Council. - Flagship magazine is published 5 times a year and distributed to Portsmouth Residents. The magazine provides a useful summary of the authority's activities and achievements.
(1.2) Supporting Principle: Ensuring that users receive a high quality of service whether directly, or in partnership, or by commissioning		
(1.2.1)	Decide how the quality of service for users is to be measured and make sure that the information needed to review service quality effectively and regularly is available.	<ul style="list-style-type: none"> - Directorates monitor their performance on a quarterly basis. -The Joint Strategic Needs Assessment (JSNA) paints the 'big picture' of local needs so we can work together to improve the health and wellbeing of people in Portsmouth.
(1.2.2)	Put in place effective arrangements to identify and deal with failure in service delivery	<ul style="list-style-type: none"> -The Council operates a complaints procedure to deal with failures in service delivery. -There are separate processes for people wishing to make a complaint against adult's social care, children's social care or schools. --If residents/service users are not happy with how their complaint has been handled by the Council, they can contact the Local Government Ombudsman who will investigate complaints in a fair and independent way. - Risk is reviewed during the quarterly performance monitoring process and significant risks captured on the Risk & Assurance Directory
(1.3) Supporting Principle: Ensuring that the authority makes best use of resources and that tax payers and service users receive excellent value for money		
(1.3.1)	Decide how value for money is to be measured and make sure that the authority or partnership has the information needed to review value for	<ul style="list-style-type: none"> - Directorates are asked to use comparative/benchmarking data on both cost and performance, as well as any other relevant data, such as customer feedback data or trends over time in order to make a judgement on value for money, during their planning processes.

Ref	Portsmouth City Council (PCC) Commitments	Current Governance Arrangements
	money and performance effectively.	<ul style="list-style-type: none"> -Our external Auditors issue an annual value for money opinion. -In depth value for money reviews are carried out when deemed necessary. -Procurement arrangements are in place to ensure that the organisation secures the right outcomes at the right price within a collaborative and consistent manner. -Robust category management arrangements are in place to ensure the organisation maximises its spending power and minimises waste. -The Chief Finance Officer provides financial advice and ensures the authority providers prudential financial framework. - The Council's priorities and objectives are aligned to principal statutory obligations and relate to available funding.
(1.3.2)	Measure the environmental impact of policies, plans and decisions	-High value procurement that goes through the procurement gateway must consider environmental sustainability as part of the gateway process
(2)	Core Principle: Members and officers working together to achieve a common purpose with clearly defined functions and roles	
(2.1)	Supporting Principle: Ensuring effective leadership throughout the authority and being clear about executive and non-executive functions and of the roles and responsibilities of the scrutiny function	
(2.1.1)	Set out a clear statement of the respective roles and responsibilities of the executive and of the executive's members individually and the authority's approach towards putting this into practice.	The Council has a published City Constitution which sets out how the Council operates, how decisions are made and the procedures that are followed to ensure that these are efficient, transparent and accountable to local people. Some of these processes are required by the law, while others are a matter for us to choose. The Constitution is divided into 16 articles which set out the basic rules governing the council's business. It provides a summary of key officer, member and committee roles and responsibilities.
(2.1.2)	Set out a clear statement of the respective roles and responsibilities of other authority members, members generally and senior officers.	<ul style="list-style-type: none"> -As above. -All posts have job descriptions and are banded depending on responsibilities undertaken.
(2.2)	Supporting Principle: Ensuring that a constructive working relationship exists between elected members and officers and that the responsibilities of authority members and officers are carried out to a high standard	
(2.2.1)	Determine a scheme of delegation and reserve powers within the constitution, including a formal schedule of those matters specifically reserved for collective decision of the authority taking account of relevant legislation and	-Delegations are set out in the City Constitution .

Ref	Portsmouth City Council (PCC) Commitments	Current Governance Arrangements
	ensure that it is monitored and updated.	
(2.2.2)	Make the City Mayor and Chief Executive responsible and accountable to the authority for all aspects of operational management.	-Information about the current ceremonial Lord Mayor of Portsmouth, a list of previous Lord Mayors and general information about the Lord Mayor's Office, its history and ceremony can be found on the PCC website . -The Chief Executive's role and responsibilities are set out in the job description and City Constitution .
(2.2.3)	Develop protocols to ensure that the City Mayor and chief executive (or equivalent) negotiates their respective roles early in the relationship and that a shared understanding of roles and objectives is maintained.	NOT APPLICABLE
(2.2.4)	Make a senior officer (the section 151 officer) responsible to the authority for ensuring that appropriate advice is given on all financial matters, for keeping proper financial records and accounts, and for maintaining an effective system of internal financial control.	The Chief Finance Officer is the S151 Officer and is actively involved in all major decisions, advising on financial matters to both the Cabinet and full Council. He is responsible for leading the promotion and delivery by the whole authority of good financial management so that public money is safeguarded at all times, ensuring that budgets are agreed in advance and are robust, that value for money is provided by the Council's services, and that the finance function is fit for purpose.
(2.2.4)	Make a senior officer (usually the monitoring officer) responsible to the authority for ensuring that agreed procedures are followed and that all applicable statutes and regulations are complied with.	- The Monitoring Officer is a statutory function and ensures that the Council, its Officers, and its Elected Councillors, maintain the highest standards of conduct in all they do. The Monitoring Officer is assisted when required by appointed deputies. The role of the Monitoring Officer is set out in 12.4 of PCC's Constitution. The Monitoring Officer's legal basis is found in Section 5 of the Local Government and Housing Act 1989, as amended by Schedule 5 paragraph 24 of the Local Government Act 2000. --The Monitoring Officer's role and responsibilities are set out in the job description.
(2.3)	Supporting Principle: Ensuring relationships between the authority, its partners and the public are clear so that each know what to expect of the other	
(2.3.1)	Develop protocols to ensure effective communication between members and officers in their respective roles.	Part 4d of the City Constitution sets out a protocol for Member/Officer relations. Within the protocol general principles of conduct, roles and responsibilities, support services, access to information, officer, correspondence, public relations and cabinet member and chairman relationships are clearly set out. The protocol guides members and officers of the council in their relations with one another in such a way to ensure the smooth running of the Council.
(2.3.2)	Set out the terms and conditions for remuneration of members and officers and an effective structure for managing the process including an effective	-All staff are provided with a contract outlining the terms and conditions of their appointment. - The Council has robust pay and conditions policies and practices for employees, and structured pay scales reflecting the competencies required for each role. -An independent remuneration panel can be appointed as and when required.

Ref	Portsmouth City Council (PCC) Commitments	Current Governance Arrangements
	remuneration panel.	
(2.3.3)	Ensure that effective mechanisms exist to monitor service delivery	-Scrutiny panels are in place to challenge and review. -Service delivery and performance is monitored quarterly.
(2.3.4)	Ensure that the organisation's vision, strategic plans, priorities and targets are developed through robust mechanisms, and in consultation with the local community and other key stakeholders, and that they are clearly articulated.	- Key plans, strategies and proposed changes to service delivery are put out for consultation and published on the Council's website - https://www.portsmouth.gov.uk/ext/the-council/policies-and-strategies/our-policies-and-strategies.aspx -The <u>Medium Term Resource Strategy</u> is a high level plan that sets out the City Council's Revenue Spending Plans for the next five years to deliver the longer term aspirational Vision for Portsmouth and the medium term priorities of the City Council.
(2.3.5)	When working in partnership, ensure that all partners are clear about their roles and responsibilities both individually and collectively in relation to the partnership and to the authority.	-For each partnership there is: A clear statement of the partnership principles and objectives; Clarity of partner roles within the partnership; Line management responsibilities for staff who support the partnership; A statement of funding sources for joint projects and clear accountability for proper financial administration; A protocol for dispute resolution within the partnership.
(2.3.6)	Ensure that there is clarity about the legal status of the partnership and that organisations understand and make clear to all other partners the extent of their authority to bind their organisation to partner decisions.	-The Council has defined legal agreements -Terms of references are set up and outlined key legal obligations of parties within the partnership.
(3)	Core Principle: Promoting values for the authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour	
(3.1)	Supporting Principle: Ensuring authority members and officers exercise leadership by behaving in ways that exemplify high standards of conduct and effective governance through	
(3.1.1)	Ensure that the authority's leadership sets a tone for the organisation by creating a climate of openness, support and respect.	-Meetings are held in an open forum with a high degree of transparency.
(3.1.2)	Ensure that standards of conduct and personal behaviour expected of members and staff, of work between members and staff and between the authority, its partners and the community are defined and communicated through	-- PolicyHub is an application that delivers an effective and measurable compliance operation. From updating and managing policies to knowledge assessments and reporting. It ensures the right policies and procedures get to the right people, that they become accountable by signing up to them and that the entire process is recorded and auditable. -The Council has a whistleblowing Policy, which sets out how to report concerns and how they will be handled.

Ref	Portsmouth City Council (PCC) Commitments	Current Governance Arrangements
	codes of conduct and protocols.	-Members are required to complete a code of conduct on appointment.
(3.1.3)	Put in place arrangements to ensure that members and employees of the authority are not influenced by prejudice, bias or conflicts of interest in dealing with different stakeholders and put in place appropriate processes to ensure that they continue to operate in practice.	<ul style="list-style-type: none"> -All members of the council are required by law to complete a declaration of pecuniary interests form to register their financial interests. - Members are required to declare any interests at the start of every meeting that they attend in accordance with Standing Orders. -Members and Officers are required to complete a gifts and hospitality register. -The Council operates an Anti-Fraud, Bribery and Corruption Policy, which sets out the requirements for the Council in relation to combating fraud, bribery, corruption and dishonest dealings within and against the council. -PCC follows a procurement process, to ensure the most appropriate goods and services are acquired without any bias and conflicts of interest. -Equality impact assessments are required to be carried out on all major services and functions of the council, and all projects and policies to assess any potential adverse implications for some staff, residents and visitors. - The Equality and Diversity Strategy 2014-17 sets out the Council's aims to make Portsmouth a fairer and more inclusive city and the means of their delivery. The Council is working closely with partners from local public services, businesses and voluntary organisations to achieve these. Promotion of equality and championing Portsmouth's diversity are an integral part of this vision.
(3.2)	Supporting Principle: Ensuring that organisational values are put into practice and are effective	
(3.2.1)	Develop and maintain shared values incl leadership values for the organisation and staff reflecting public expectations, and communicate these with members, staff, community and partners.	-The organisation has developed a set of values which should be embedded in ways of working. These include: We focus on what's important, We take pride in our work, We value others and We make a positive difference.
(3.2.2)	Put in place arrangements to ensure that systems and processes are designed in conformity with appropriate ethical standards, and monitor their continuing effectiveness in practice.	<ul style="list-style-type: none"> -Systems of financial control are developed in line with ethical standards. -Financial Rules have been put in place by the s151 Officer so that the Council can meet all of its responsibilities required by law. They set the framework on how the Council manages financial dealings and are part of the City Constitution. They also set the financial standards that will ensure consistency of approach and the controls needed to minimise risks. Training on the Council's financial rules is provided to all staff.
(3.2.3)	Develop and maintain an effective Standards Committee.	<ul style="list-style-type: none"> -The Council operates a Governance and Audit and Standards Committee. Terms of reference set out the key roles and responsibilities of the committee. -A self-assessment of the committee's governance arrangements is completed on an annual basis. -Members of the committee have been given relevant training to ensure they have adequate skills and knowledge to enable an effective committee. -The Committee inform, review and agree the Annual Governance Statement, which includes a

Ref	Portsmouth City Council (PCC) Commitments	Current Governance Arrangements
		review of effectiveness of the system of internal control.
(3.2.4)	Use the organisation's shared values to act as a guide for decision making and as a basis for developing positive and trusting relationships within the authority.	<ul style="list-style-type: none"> -Decision making practices are set out in the City Constitution. -The Medium Term Resources Strategy (MTRS) enables the council to make best use of financial, human, technological and other resources available to enable the continued provision of value for money services that meet the needs of residents, businesses and other stakeholders. Effective planning and resource management are crucial to meeting collective goals and the MTRS provides a framework of underlying principles by which resources may be allocated across the council and other relevant considerations that need to be taken into account.
(3.2.5)	In pursuing the vision of a partnership, agree a set of values against which decision making and actions can be judged. Such values must be demonstrated by partners' behaviour.	<ul style="list-style-type: none"> -Individual partnerships have terms of references. -The voluntary and community sector framework sets out how the council intends to work with the local voluntary and community sector to achieve better outcomes for local people. It builds upon the foundation of the Portsmouth Compact, which is encompassed in the framework.
(4)	Core Principle: Taking informed and transparent decisions which are subject to effective scrutiny and managing risk	
(4.1)	Supporting Principle: Being rigorous and transparent about how decisions are taken and listening and acting on the outcome of constructive scrutiny	
(4.1.1)	Develop and maintain an effective scrutiny function which encourages constructive challenge and enhances the authority's performance overall and that of any organisations for which it is responsible.	<ul style="list-style-type: none"> -The Council operates the following Scrutiny Panels: Economic development, culture & leisure scrutiny panel Education, children & young people scrutiny panel Health overview & scrutiny panel Housing & social care scrutiny panel Scrutiny management panel Traffic, Environment & Community Safety Scrutiny Panel -Each panel is governed by their own terms of reference. Topics that are chosen to be 'scrutinised' will be looked at in depth by a cross party panel of councillors. They'll assess how the Council is performing and see whether they are providing the best possible, cost effective service for people in the city. The panel's findings will be reported to the cabinet and may result in changes to the way in which services are delivered. -Service performance is reviewed on a quarterly basis at a minimum.
(4.1.2)	Develop and maintain open and effective mechanisms for documenting evidence for decisions and recording the criteria, rationale and considerations on which decisions are based.	<ul style="list-style-type: none"> -Key decision meetings are held in public. -Meetings are minuted and all key decisions recorded. -Minutes of key decision meetings are uploaded onto the PCC website. -Financial rules were revised and published in 2013
(4.1.3)	Put in place arrangements to safeguard members and employees against	-All members of the council are required by law to complete a declaration of pecuniary interests form to register their financial interests.

Ref	Portsmouth City Council (PCC) Commitments	Current Governance Arrangements
	conflicts of interest and put in place appropriate processes to ensure that they continue to operate in practice.	
(4.1.4)	Develop and maintain an effective audit committee which is independent of the executive and scrutiny functions or make other appropriate arrangements for the discharge of the functions of such a committee.	-The Chair of the Governance and Audit and Standards committee is independent (i.e. he does not sit on any other regulatory committee).
(4.1.5)	Ensure that effective, transparent and accessible arrangements are in place for dealing with complaints.	<ul style="list-style-type: none"> - The Council has a clear and transparent corporate complaints procedure for anyone wishing to make a complaint. -There are separate processes for people wishing to make a complaint against adult's social care, children's social care or schools. -If residents/service users are not happy with how their complaint has been handled by the Council, they can contact the Local Government Ombudsman who will investigate complaints in a fair and independent way.
(4.2)	Supporting Principle: Having good quality information, advice and support to ensure that services are delivered effectively and are what the community wants/needs	
(4.2.1)	Ensure that those making decisions, whether for the authority or the partnership, are provided with information that is fit for the purpose – relevant, timely and gives clear explanations of technical and financial issues and their implications.	<ul style="list-style-type: none"> -All new members are required to attend a mandatory induction programme, which covers the code of conduct, principles of public life, keeping yourself and others safe, support available, PCC and how decisions are made and the future vision for PCC and Portsmouth. -Specific training for each committee is available on an annual basis. -Staff are required to use a report template for items being progressed to decision meetings. The template provides guidance on content and format.
(4.2.2)	Ensure that proper professional advice on matters that have legal or financial implications is available and recorded well in advance of decision making	<ul style="list-style-type: none"> -All reports to decision making meetings clearly set out legal, financial and equalities implications to ensure that decision makers are fully informed about potential issues in approving the recommendations. -All key decisions and actions are minuted.
(4.3)	Supporting Principle: Ensuring that an effective risk management system is in place	
(4.3.1)	Ensure that risk management is embedded into the culture of the authority; with members and managers at all levels recognising that risk management is part of their jobs.	A refreshed corporate risk management approach was agreed by Governance, Audit and Standards Committee in 2016.
(4.3.2)	Ensure that effective arrangements for	-The Council operate a Whistleblowing Policy to help individuals raise concerns in the right way

Ref	Portsmouth City Council (PCC) Commitments	Current Governance Arrangements
	whistleblowing are in place to which officers, staff and all those contracting with or appointed by the authority have access.	without fear. This whistleblowing policy is primarily for a serious concern, which affects the interests of others, such as service users, the public, colleagues or the council itself. -Additionally an Anti-Fraud, Bribery and Corruption Policy sets out the requirements for the Council in relation to combating fraud, bribery, corruption and dishonest dealings within and against the council. -If staff have a grievance about their employment or the way they have been treated, they can follow the Grievance Procedure.
(4.4)	Supporting Principle: Using their legal powers to the full benefit of the citizens and communities in their area	
(4.4.1)	Actively recognise the limits of lawful activity placed on them by, for example, the ultra vires doctrine, but also strive to utilise their powers to the full benefit of their communities.	-The roles and responsibilities of members are set out in the City Constitution .
(4.4.2)	Recognise the limits of lawful action and observe both the specific requirements of legislation and the general responsibilities placed on local authorities by public law.	-The Monitoring Officer is a statutory function and ensures that the Council, its Officers, and its Elected Councillors, maintain the highest standards of conduct in all they do. The Monitoring Officer is assisted when required by appointed deputies. The role of the Monitoring Officer is set out in 12.4 of PCC's Constitution. The Monitoring Officer's legal basis is found in Section 5 of the Local Government and Housing Act 1989, as amended by Schedule 5 paragraph 24 of the Local Government Act 2000.
(4.4.3)	Observe all specific legislative requirements placed upon them, as well as the requirements of general law, and to integrate the key principles of good administrative law – rationality, legality and natural justice – into their procedures/ decision-making processes.	-All the corporate HR policies can be found in the Managers' HR Handbook, which is divided into six parts. - PolicyHub is a new application that delivers an effective and measurable compliance operation. From updating and managing policies to knowledge assessments and reporting. It ensures the right policies and procedures get to the right people, that they become accountable by signing up to them and that the entire process is recorded and auditable.
(5)	Core Principle: Developing the capacity and capability of members and officers to be effective	
(5.1)	(5. Supporting Principle: Making sure that members and officers have the skills, knowledge, experience and resources they need to perform well in their roles 1)	
(5.1.1)	Provide induction programmes tailored to individual needs and opportunities for members and officers to update their knowledge on a regular basis.	-The Council operates an Induction Policy, which applies to all new employees. The induction consists of a personal induction plan (PIP), the completion of an induction checklist, training requirements over and above those identified on the PIP and induction review meetings. -All new members of staff are given an induction programme, which provides information about how the organisation works and its services, the role of Councillors, the history of the Council and vision for the future. -All new staff are required to complete mandatory e-learning courses incl health & safety, equalities & diversity, financial rules, and information governance. -All new members attend an induction, which covers the code of conduct, principles of public life,

Ref	Portsmouth City Council (PCC) Commitments	Current Governance Arrangements
		keeping yourself and others safe, support available, PCC and how decisions are made and the future vision.
(5.1.2)	Ensure that the statutory officers have the skills, resources and support necessary to perform effectively in their roles and that these roles are properly understood throughout the authority.	<ul style="list-style-type: none"> -A robust interview and selection process ensures that statutory officers (Head of Paid Service, Director of Children's Services/Director of Adult Services, Director of Public Health, Monitoring Officer and S151 Officer) are only appointed if they have the right levels of skills and experience to effectively fulfil their role. -Statutory Officers are given the opportunity to build on their skills through mentoring opportunities and executive training. They are also required to complete all mandatory training requirements. -There are a number of IT, technical, soft skills and job specific courses available, with a range of learning styles including, classroom based, offsite and by e-learning -Specific training for each committee is available on an annual basis. -Statutory officers have the option to attend any of the corporate courses. There are also a number of courses run by the Local Government Association. -The ADASS and ADCS provide advice and support to Children's and Adult's Services.
(5.2)	(5.2) Supporting Principle: Developing the capability of people with governance responsibilities and evaluating their performance as individuals and as a group	
(5.2.1)	Assess the skills required by members and officers and make a commitment to develop those skills to enable roles to be carried out effectively.	-PCC ensures that there are opportunities for all employees to review their achievements, and identify development needs.
(5.2.2)	Develop skills on a continuing basis to improve performance, including the ability to scrutinise and challenge and to recognise when outside expert advice is needed.	<ul style="list-style-type: none"> -PCC operates a Development Policy, which sets out the approach the organisation will take towards developing its employees and achieving the aims of the Council. -Committee members are given specialist (non-political) training to ensure that they are effective in their role. -Whilst the Council aims to address training needs with internal provision, it is, on occasions more appropriate for staff and members to attend external training courses.
(5.2.3)	Ensure that arrangements are in place for reviewing the performance of the executive as a whole and of individual members and agreeing an action plan, which might for example aim to address any training or development needs.	Group leaders take responsibility for identifying member development needs.

Ref	Portsmouth City Council (PCC) Commitments	Current Governance Arrangements
(5.3)	(5.3) Supporting Principle: Encouraging new talent for membership of the authority so that best use can be made of individuals' skills and resources in balancing continuity and renewal.	
(5.3.1)	Ensure that effective arrangements are in place designed to encourage individuals from all sections of the community to engage with, contribute to and participate in the work of the authority.	- Neighbourhood Forums give Portsmouth residents the opportunity to speak up about what's happening on their doorstep e.g. parking, crime, planning developments, policing and schools. Meetings are advertised locally and anyone welcome to attend and participate in a discussion. -Key plans, strategies and proposed changes to service delivery are put out for consultation and published on the Council's website
(5.3.2)	Ensure that career structures are in place for members and officers to encourage participation and development.	As good practice, directorates are asked to complete a workforce development plan, which sets out the demand, capacity, organisational change, recruitment and retention, skills development, talent management, succession planning, and action planning. Whilst this thinking may not resolve into a written document, it should form the basis of directorate thinking. HR Business Partners attend management team discussions to support directorates in considering the workforce implications of their work.
(6)	Core Principle: Engaging with local people and other stakeholders to ensure robust public accountability.	
(6.1)	Supporting Principle: Exercising leadership through a robust scrutiny function which effectively engages local people and all local institutional stakeholders, including partnerships, and develops constructive accountability relationships.	
(6.1.1)	Make clear to themselves, all staff and the community to whom they are accountable and for what.	-The Council have a published City Constitution which sets out how the Council operates, how decisions are made and the procedures that are followed to ensure that these are efficient, transparent and accountable to local people.
(6.1.2)	Consider those institutional stakeholders to whom the authority is accountable and assess the effectiveness of the relationships and any changes required.	-The Chief Executive regularly meets with key partners e.g. The Commander of the Naval Base, Chief Fire Officer, Chief Superintendent, and the Chief Executive of the Clinical Commissioning Group. -The Council undertakes annual reviews of key partnerships including the Children's Trust Board and Safer Portsmouth Partnership.
(6.1.3)	Produce an annual report on the activity of the scrutiny function.	-Scrutiny functions will be documented in Full Council minutes. -Annual reports are progressed to key committee meetings.
(6.2)	Supporting Principle: Taking an active and planned approach to dialogue with and accountability to the public to ensure effective and appropriate service delivery whether directly by the authority, in partnership or by commissioning	

(6.2.1)	<p>Ensure clear channels of communication are in place with all sections of the community and other stakeholders, including monitoring arrangements, and ensure that they operate effectively.</p>	<p>-Work is on-going to ensure that clear communication channels are established with all local people and stakeholders.</p> <p>-A number of publications are sent to residents to ensure they are kept informed. These include: Flagship Magazine; House Talk Magazine, Term Times Magazine, and Something for the Weekend Newsletter.</p> <p>-There are a number of ways people can connect with the council, many of which are listed on the council website.</p> <p>-Local people have the option to engage in a dialogue through: social media sites (including a facebook and twitter), petitions scheme, neighbourhood forums,</p>
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Ref	Portsmouth City Council (PCC) Commitments	Current Governance Arrangements
		healthwatch Portsmouth, the rant and rave forum, council meetings (open to the public), their local Councillor and through planned consultations .
(6.2.2)	Ensure that arrangements are in place to enable the authority to engage with all sections of the community effectively. These arrangements should recognise that different sections of the community have different priorities and establish explicit processes for dealing with these competing demands.	<p>-Local residents can contact and communicate with the Council in person, by phone, by email, in writing, through social network sites, forums and public meetings. The communication options available are diverse and reflect the need for varied styles in the community.</p> <p>--PCC has set out a Community Engagement Statement which reflects the council's ambition to enable and empower communities to shape the places within which they live and work, influence formal decision making and make informed choices around the services they receive. The Council has also issued Community Engagement Guidance, designed to provide clear guidance to those planning, developing and delivering engagement activities in the city.</p> <p>-The Council has an Equality and Diversity Strategy, which sets out the Council's commitment to ensuring that diverse needs of Portsmouth's residents and visitors are considered and addressed in the day-to-day activities of the council.</p> <p>-Processes for dealing with competing demands are set out in the budget principles.</p>
(6.2.3)	Establish a clear policy on the types of issue on which they will meaningfully consult on or engage with the public and service users, including a feedback mechanism for those consultees to demonstrate what has changed as a result.	<p>-Key plans, strategies and proposed changes to service delivery are put out for consultation and published on the Council's website - http://www.portsmouth.gov.uk</p> <p>-The Council have a consultation process which provides advice and guidance on consulting with residents and the wider community.</p>
(6.2.4)	Publish an annual performance plan giving information on the authority's vision, strategy, plans and financial statements as well as information about its outcomes, achievements and the satisfaction of service users.	The Annual Governance Statement is approved by the Governance and Audit and Standards Committee, in September along with the annual statement of accounts . The purpose of the AGS process is to provide a continuous review of the effectiveness of the Council's Governance Framework so as to give assurance on its effectiveness and/or to produce a management action plan to address identified weaknesses in either process. The annual statement of accounts provides clear information about the authority's finances.
(6.2.5)	Ensure that the authority as a whole is open and accessible to the community, service users and its staff and ensure that it has made a commitment to openness and transparency in all its dealings, incl partnerships, subject only	<p>-The Freedom of Information Act 2000 (FoI) gives anyone the right to ask for any information held by a public authority, which includes PCC. The information must be in a recorded form, so it can include documents, minutes of meetings, e-mails, handwritten notes, videos, letters and audio recordings. PCC is committed to being an open organisation and delivering the best possible public services. This is reflected in the Council's FOI Policy.</p> <p>-Key decision meetings are open to the public (unless confidential).</p>

Ref	Portsmouth City Council (PCC) Commitments	Current Governance Arrangements
	to the need to preserve confidentiality in those specific circumstances where it is proper and appropriate to do so.	
(6.3)	(6.3) Supporting Principle: Making best use of human resources by taking an active and planned approach to meet responsibilities to staff	
(6.3.1)	Develop and maintain a clear policy on how staff and their representatives are consulted and involved in decision making.	<ul style="list-style-type: none"> -There is a consultation process for staff to make sure their opinions, ideas and suggestions are listened to. -The Council actively consults with trade unions about issues that affect staff.



Title of meeting:	Governance & Audit & Standards Committee
Date of meeting:	30 June 2017
Subject:	Consideration of the political balance rules in relation to the constitution of Sub-Committees considering complaints against Members.
Report by:	City Solicitor
Wards affected	N/A
Key decision	No
Full Council decision	No

1 Purpose of Report

- 1.1 The Committee is asked to consider whether it wishes to disapply the political balance rules in respect of its Sub-Committees which consider complaints against Members and to agree that the same rule shall apply to the Initial Filtering Panel.

2 Recommendation

- 2.1 It is recommended that the political balance rules are disapplied in respect of Governance and Audit and Standards Sub-Committees which are considering complaints against Members and also the same arrangement should apply in respect of Initial Filtering Panel membership.

3 Background

- 3.1 The Committee agreed on 26 June 2015 to "disapply" the political balance rules in respect of Sub-Committees of Governance and Audit and Standards Sub-Committees when dealing with complaints. ¹This meant the Sub-Committees' membership would in future not be made up of Members in the same proportion as the political groups are represented on the Council. Instead it was agreed that the Sub-Committees would be "cross party as far as reasonably practicable". This was considered important to ensure the greatest transparency in the decision making of these Sub-Committees where complaints against members were considered. It was also agreed that the same rule would apply to the make-up of the Initial Filtering Panel which is not a formal Sub-Committee of Governance Audit and Standards.
- 3.2 Section 17 (2) Local Government and Housing Act 1989 provides that any

¹ <http://www.legislation.gov.uk/ukpga/1989/42/section/17>

decision not to apply the political balance rules shall come to an end if there is any change in the make-up of a committee where they have been disapplied.

3.3 The decision is one which only this Committee can make but it must be made without any of the Members present voting against it.

4 Reasons for recommendations

4.1 As there has been a change this municipal year in the political make-up of the Council, Members are asked to reconsider this decision, as the decision to disapply the political balance rules, made last year, is only effective for one year. If they decide to disapply the political balance rules then this shall occur only until the end of this council year in May 2018 when the decision would again have to be reconsidered.

5 Equality Impact Assessment (EIA)

5.1 The contents of this report do not have any relevant equalities impact and therefore an equalities assessment is not required.

6 Legal implications

6.1 The City Solicitor's comments are included in this report.

7 Director of Finance's comments

7.1 There are no financial implications arising from the recommendations set out in this report.

.....
Signed by: City Solicitor

Appendices: None

Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location
None	N/A



Title of meeting:	Governance and Audit and Standards Committee
Date of meeting:	30 June 2017
Subject:	Proposed amendments to the Complaint Form submitted in relation to the Councillor Code of Conduct
Report by:	City Solicitor
Wards affected:	N/A
Key decision:	No
Full Council decision:	Yes

1. Purpose of report

To ask members to consider a proposed revision to the content of the Complaint Form submitted in relation to Councillor Code of Conduct complaints.

2. Recommendations

That the Committee

1. Considers the proposed amendments to the Complaint Form attached as Appendix 1 to this report
2. Recommends to Council that the revised Complaint Form is adopted

3. Background

- 3.1 The Arrangements for Assessment, Investigation and Determination of Complaints which were brought in following the Localism Act of 2011 were revised by the Council in October 2016.
- 3.2 The proposed amendments to the Complaint Form are intended to make the procedure more straightforward for complainants and also to clarify the nature of the complaint.

4. Reasons for recommendations

- 4.1. Under the present arrangements, the complainant is asked to detail the circumstances of their allegation in section 4 of the complaint form . The current form does not list what is in the Code of Conduct so often it is unclear which part of the Code of Conduct the complainant believes has been breached.

4.2. The proposed revised Complaint Form (attached as Appendix 1) now lists the obligations under the Code and the complainant is asked to select which obligation it is believed has been breached. This will ensure that it is the complainant who selects which part of the Code has been breached rather than it being left to the City Solicitor to deduce.

5. Equality impact assessment

This report does not require an Equality Impact Assessment as it does not propose any new or changed services, policies or strategies.

6. Legal implications

The legal implications are embodied within this report.

7. Director of Finance's comments

There are no financial implications arising from the recommendations contained within this report.

.....
Signed by:

Appendices:

Appendix 1 - Complaint Form (tracked copy)

Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location

.....
Signed by:

**COMPLAINT FORM -
Councillors' Code of Conduct**



This form is required to be used to make an allegation that a Councillor of Portsmouth City Council has failed to comply with the Councillors' Code of Conduct. It should not be used if the concern ~~is in respect to~~ relates to dissatisfaction with a Council decision.

1. Your details

Please provide us with your name and contact details

Title:	
First name:	
Last name:	
Address:	
Daytime telephone:	
Evening telephone:	
Mobile telephone:	
Email address:	

Your address and contact details will not usually be released unless necessary to deal with your complaint.

If you do not wish details of your name to be released, please complete section 6 of this form.

2. The complaint process

Once you have submitted your complaint, it is considered by the Monitoring Officer who will decide on the next steps. The Monitoring Officer will meet with the Initial Filtering Panel ("the IFP") to enable the Monitoring Officer to consider and determine the complaint as soon as reasonably practicable after the complaint has been received

When reaching ~~their~~ a decision, the Monitoring Officer meets with the IFP and also a person unconnected with the Council, known as an Independent Person. The IFP shall comprise three Councillors from the membership of the committee which may include independent Councillors and will include those groups represented, insofar as practicable. The availability of Councillors may be affected by any conflicts of interest which may preclude them from being involved in the complaint process.

Any member of Governance and Audit and Standards Committee including Standing Deputies may be requested to sit on an IFP.

On the basis of your written submission the IFP will assess whether your allegation, if ~~it was~~ investigated, is likely to amount to a breach of the Councillors' Code of Conduct. The Monitoring Officer may then:-

1. Refer the complaint for investigation.
2. Decide that what has been alleged does not come within the requirements of the Code of Conduct and even if investigated could not amount to a breach of the Code of Conduct. (See Local Assessment Criteria <https://www.portsmouth.gov.uk/ext/documents-external/cou-complaints-assessment-criteria.pdf>).
3. Decide on alternative action being taken e.g. mediation or an apology being given.
4. Defer ~~their~~ decision and request further information or clarification from the complainant in respect of the complaint.

If it is decided that your complaint is not to be investigated you may, within 30 days of notification of the decision, ask for that decision to be reconsidered. This will be undertaken by a Governance and Audit and Standards Assessment Sub-Committee which consists of three different Councillors from those who originally considered your complaint. The Assessment Sub-Committee will have the same range of options available to it as the Monitoring Officer.

If it is decided to investigate your complaint, the Monitoring Officer or someone appointed by them will be instructed to undertake the investigation. You will be given further information at that time should an investigation be necessary.

3. Please provide us with the name of the Councillor(s) you believe have breached the Code of Conduct:

Title	First Name	Last Name

4. Please explain in this section (or on separate sheets) what the Councillor has done that you believe breached the Code of Conduct.

(You should give sufficient information to show that what ~~was~~ is alleged could amount to a breach of the Code of Conduct).

If you are complaining about more than one Councillor you should clearly explain ~~what each individual~~ how you believe each individual councillor has ~~Councillor has done that you believe~~ breached the Code of Conduct.

A copy of the Councillors Code of Conduct can be found here:

<https://www.portsmouth.gov.uk/ext/the-council/councillors-and-mps/complaining-about-a-councillor.aspx>

Please mark in the table below which part of the Code you believe to have been breached:

	<u>General obligations of member</u>	<u>Tick below obligation you consider has been breached</u>
1.	<u>You must not bully a person.</u>	
2.	<u>You must not intimidate, or try to intimidate, anyone who has complained about you or who may be involved in a complaint about you.</u>	
3.	<u>You must not do anything which compromises the impartiality of of the Authority's officers.</u>	
4.	<u>You must not disclose confidential information (other than in limited circumstances permitted by law and following consultation with the Authority's Monitoring Officer).</u>	
5.	<u>You must not prevent a person from gaining access to information to which they are entitled.</u>	
6.	<u>You must not conduct yourself in a manner which could reasonably be regarded as bringing your office or the Authority into disrepute.</u>	
7.	<u>You must not use or attempt to use your position as a member improperly to confer on or secure for yourself or any other person an advantage or disadvantage.</u>	
8.	<u>You must, when using or authorising the use by others of the resources of the Authority, act in accordance with the Authority's reasonable requirements and ensure that the resources are not used improperly for political purposes.</u>	
9.	<u>When reaching decisions, you must have regard to the relevant advice from the Authority's officers and give reasons for decisions.</u>	

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10.	You must have regard to any applicable Local Authority Code of Publicity made under the Local Government Act 1986 or otherwise.	
11.	You should not lobby other members where you have a disclosable pecuniary interest in a matter.	

[Please detail in the box below how the part of the Code you have indicated above has been breached.](#)

- You should be specific, wherever possible, about exactly what you are alleging the Councillor said or did. For instance, instead of writing that the Councillor insulted you, you should state what it was they said.
- You should provide the dates of the alleged incidents wherever possible. If you cannot provide exact dates it is important to give a general timeframe.
- You should confirm whether there are any witnesses to the alleged conduct and provide their names and contact details if possible.
- You should provide any relevant background information.

Please provide us with the details of your complaint and the desired outcome from this complaints process. Continue on a separate sheet if there is not enough space on this form.

Signature.....
Date.....

5. Only complete this next section if you are requesting that your identity is kept confidential.

In the interests of fairness and natural justice, we believe Councillors who are complained about have a right to know who has made the complaint. We also believe they have a right to be provided with a copy of the complaint. **We are unlikely to withhold your identity or details of your complaint unless you have good reason to justify that we do so.**

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Please note that requests for confidentiality are unlikely to be granted. The Monitoring Officer will consider the request alongside the substance of your complaint. The Monitoring Officer will then contact you with their decision. If your request for confidentiality is not granted, we will usually allow you the option of withdrawing your complaint.

However, it is important to understand that in certain exceptional circumstances where the matter complained about is very serious, we can proceed with an investigation or other action and disclose your name even if you have expressly asked us not to.

Please provide us with details of why you believe we should withhold your name and/or the details of your complaint:

6. Additional Help

Complaints must be submitted in writing on this form. It will assist the processing of your complaint if this is —submitted electronically. However, in line with the requirements of the Disability Discrimination Act 2000we can make reasonable adjustments to assist you if you have a disability that prevents you from making your complaint in writing.

We can also help if English is not your first language.

If you need any support in completing this form, please let us know as soon as possible.

This complaint should be submitted to the Monitoring Officer by email to:
michael.lawther@portsmouthcc.gov.uk



Title of meeting: Governance & Audit & Standards Committee

Date of meeting: 30 June 2017

Subject: Data Security Breach Report

Report by: Michael Lawther, City Solicitor/Senior Information Risk Owner

Wards affected: All

Key decision: No

Full Council decision: No

1. Purpose of report

To inform the Committee of any Data Security Breaches and actions agreed/taken since the last meeting.

2. Recommendations

It is recommended that Members of the Governance & Audit & Standards Committee note the breaches (by reference to Exempt Appendix A) that have arisen and the action determined by the Corporate Information Governance Panel (CIGP).

3. Background

The Corporate Information Governance Panel, formed of representatives from across the authority and chaired by Michael Lawther in the role of Senior Information Risk Owner (SIRO) meets every other month to

- establish policy and procedures for Information Governance;
- maintain a log of data breaches and determine and monitor onward action.

The Senior Information Risk Owner will update the Committee on any ongoing breaches and notify the members of any new incidents.

4. Reasons for recommendations

To ensure the Governance & Audit & Standards Committee has an oversight of the Data Security Breaches to be able to determine whether any trends appear and any further actions should be recommended.

5. Equality impact assessment

An equality impact assessment is not required as the recommendation does not have a negative impact on any of the protected characteristics as described in the Equality Act 2010.

6. Legal implications

The Council is required to ensure that it has robust procedures in place to comply with its obligations under the Data Protection Act. Bringing this report to the Committee's attention will assist in meeting those requirements.

7. Director of Finance's comments

The ICO can issue fines of up to £500,000 for serious breaches of the Data Protection Act and Privacy and Electronic Communications Regulations. The size of any monetary penalty is determined by the Commissioner taking into account the seriousness of the breach and other factors such as the size, financial and other resources of the data controller. Any breaches put the City Council at risk of the unbudgeted cost of a financial penalty which would have to be met from the service responsible for the breach.

.....
Signed by:

Appendices: One Exempt Appendix

Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location
None	



Title of meeting:	Governance & Audit & Standards Committee
Date of meeting:	30 th June 2017
Subject:	Annual Internal Audit Report for the 2016/17 Financial Year
Report by:	Chief Internal Auditor
Wards affected:	All
Key decision:	No
Full Council decision:	No

1. Summary

- 1.1 In 2016/17 Internal Audit raised 6 Critical Risk exceptions. A further 4 audits have been given no assurance since the last meeting and are detailed in Section 6. This brings a total of 12 no assurance audit opinions for 16/17.
- 1.2 The final audit plan contained 92 full audits and 33 follow up audits. 3 of the audits were removed from the 2016/17 plan, details as follows:
 - Mayfield School has been moved to the 2017/18 audit plan
 - The Partnership fraud checks work was covered under the audit undertaken by Gosport Borough Council
 - Cash collection was covered under a number of establishment reviews already carried out during 16-17
- 1.3 100% of the revised 2016/17 Audit Plan (89 audits) has been completed.
- 1.4 In addition to the planned audits there are 11 areas of on-going work and 4 continuous audits which contribute to risk assurance.
- 1.5 Areas of Assurance are shown in Appendix A.
- 1.6 During 2016/17 Audit carried out 361 days for external clients across 12 client groups.
- 1.7 A total of £255,455 has been raised in overpayments relating to Housing and Council Tax Benefit and Council Tax Support frauds with 95 cases being closed in 2016/17 resulting in 29 implemented sanctions. Further details are provided in section 9.

2. Purpose of report

- 2.1 This report is to give the Annual Audit Opinion on the effectiveness of the control framework, based on the Internal Audit findings for 2016/17 and highlight areas of concern.
- 2.2 To advise Members of the Audit Plan for 2017/18.
- 2.3 To provide a summary of the Counter Fraud cases investigated and sanction results. Details of corporate cases investigated are contained within exempt Appendix D.

3. Recommendations

- 3.1 That Members note the Audit and Counter Fraud Performance for 2016/17.
- 3.2 That Members note the highlighted areas of control weakness from the 2016/17 Audit Plan.
- 3.3 Members note the Annual Audit Opinion on the effectiveness of the system of internal control for 2016/17.
- 3.4 Members endorse the Audit Plan for 2017/18
- 3.5 Consider any additional actions to be taken in response to matters raised within this report relating to the reviews undertaken.

4. Background

- 4.1 The Annual Audit Plan for 2017/18 has been drawn up in accordance with the agreed Audit Strategy approved by this Committee on 3rd February 2017 following consultation with Directors and the previous Chair of this Committee. The Plan will be revised quarterly to take account of any changes in risks/priorities, in accordance with the Strategy.
- 4.2 From the 1st April 2015 officers within PCC's Benefit Counter Fraud Team moved across to Internal Audit, pending the transfer of Housing Benefit cases only to the Department of Works & Pensions (DWP) as part of the Governments 'Single Fraud Investigation Service' initiative. This transfer has been completed and since 1st April 2016 all new Housing Benefit claim investigations have been dealt with by the DWP.
- 4.3 The Counter Fraud team retain powers to investigate Sub-Letting and Council Tax Support Fraud. These include Social Housing Fraud Act 2013 and Council Tax Reduction Schemes (Detection of Fraud & Enforcement) Regulations 2013/ Local Government Finance Act 1992.

4.4 During 2016/17 Internal Audit has had a significant increase in external client work, going from 120 days across 4 clients in 2015/16 to 361 across 12 clients. For 2017/18 these will increase to 1005 days and as a result of additional income, additional resources have also been employed.

5. **Audit Plan Status 2015/16**

Percentage of the approved plan completed

5.1 100% of the annual audit plan has been completed. Appendix A shows the completed audits for 2016/17. Appendix B shows the completed follow up audits for 2016/17.

The overall percentage figure is made up as follows:

- 89 (73%) new reviews where the report has been issued.
- 33 (27%) planned follow ups where the report has been issued

5.2 As requested by Members of the Committee a breakdown of the assurance levels on completed audits since the last meeting is contained in Appendix A. Where specific parts of the control framework have not been tested on an area (because it has been assessed as low risk for example) it is recorded as NAT (No Areas Tested) within the Appendix.

Reactive Work

5.3 Reactive Work undertaken by Internal Audit in 2016/17 includes:

- 31 special investigations (excludes Benefit and Council Tax Support cases)
- 35 items of advice, (where the advice exceeds an hours work)

As well as the following unplanned reviews

- Channel Shift Programme
- Copyright audit

Exceptions

5.4 Of the 2016/17 full audits either completed or at the draft report stage the number of exceptions within each category have been:

- 6 Critical Risk
- 128 High Risk
- 50 Medium Risk
- 11 Low Risk (Improvements)

5.5 The table below is a comparison of the audit status figures for this financial year and the previous two years

	2014/15	2015/16	2016/17
% of the audit plan	100%	100%	100%

completed			
No. of Audits Completed for the year	150	116	122
No. of Critical exceptions*	11	1	6
No. of High risk exceptions	96	98	128

5.6

In order to provide a more meaningful comparison the table below reflects the audit figures

exceptions per audit is in brackets

	2014/15	2015/16	2016/17
No. of Full Audits Completed for the year	85	76	74
No. of Critical exceptions	11	1	6
No. of High risk exceptions	91 (1.071)	98 (1.289)	84 (1.135)

There has been an increase in the number of critical risk exceptions raised in 2016/17 but a decrease in the number of high risk exceptions.

Ongoing Areas

5.7

The following 11 areas are on-going areas of work carried out by Internal Audit;

- Regulation of Investigatory Powers Act (RIPA) - authorisations
- Anti-Money Laundering monitoring and reporting
- Investigations
- Financial Rules Waivers
- National Fraud Initiative (NFI) to facilitate national data matching carried out by the Cabinet Office
- National Anti-Fraud Network (NAFN) bulletins and intelligence follow up
- Counter Fraud Programme
- Policy Hub project to ensure that all Council policies are held in one place and staff are notified of the policies relevant to them
- G&A&S Committee reporting and attendance and Governance,
- Audit Planning and Consultation
- Risk Management

Continuous Audit Areas

5.8

The following 4 areas are subject to continuous audit (i.e. regular check to controls) and feed into overall assurance;

- Legionella Management
- Asbestos Management
- Key risks management in services
- Performance Management

6.

Areas of Concern

New areas of concern

6.1 Culture & City Development - Safety signage

6.1.1 The audit of Safety Signage was given no assurance as testing resulted in one critical and two high risk exceptions.

6.1.2 The exceptions and agreed actions are summarised in the table below.

Exception	Agreed Action
<p>Critical - There is no evidence of formal and periodic assessments being carried out for large areas of open/inland water under the council's responsibility. Exceptions to this have been limited to areas of the seafront and Paulsgrove Lake which were most recently assessed by the Royal National Lifeboat Institution (RNLI) in 2016, recommendation actions of which are still outstanding as at 09/01/2017.</p> <p>Audit site visits noted old, non-compliant safety signage - if any - present at 5 areas tested.</p> <p>Half of the eight sites visited across the city appear not to have been checked recently as audit checks on 12/12/2016 noted poorly maintained signage.</p> <p>Safety practices may be deemed insufficient without formal and robust risk assessments being carried out of water areas in public open spaces. This could ultimately contribute towards injury/death of members of the public. The lack of risk assessments could also result in the Authority being held liable in any related legal challenge resulting from injury/death.</p>	<p>The RNLI has been commissioned to carry out further risk assessments across a broader range of areas throughout the city. The RNLI currently has a three month lead time. Outcomes are likely to be further signage, rescue equipment and regular checks being carried out. It is proposed that the cost of initial assessment and remedial work to signage and equipment is requested to be funded from the Council's contingency reserve, subject to approval. Officers will identify potential ongoing resource requirements and review the options for delivery and funding of these.</p>
<p>High - There is no corporate accountability for water safety generally and safety signage specifically. There is no defined lead to water safety in the city and the subject is not explicitly addressed at a constitutional level in the terms of</p>	<p>A provisional lead has been proposed in the form of Culture and City Development. This Service has the requisite knowledge, skills and experience in the area having responsibility for the Seafront and other associated areas.</p>

<p>reference for any cabinet members.</p> <p>There is no corporate water safety policy and by extension safety signage - across all public open spaces areas for which the council is responsible.</p> <p>Without corporate oversight to water safety the risks to the public may not be dealt with appropriately or consistently increasing the likelihood of successful legal action / reputational damage against the council in the event of death/injury.</p>	
<p>An inspection of 8 areas across Portsmouth found that the majority of signage across the Seafront/Old Portsmouth meets the latest British Safety standards, with the exception of those noted by the RNLI in 2016. The recommendations made by the RNLI have yet to be addressed.</p> <p>Signage at all other locations appeared to be old, with several in a poor state, and are non-compliant with national standards.</p> <p>Signage which is in a poor state or does not meet national/EU standards are more likely to be unclear as to their meaning and ultimately may not provide sufficient warning in any cases of negligence/breach of statute brought against the council.</p>	<p>As part of the aforementioned review, the RNLI will highlight signs which do not meet requirements and will make recommendations accordingly. Any remedial work necessary will need to come out of the new proposed funding.</p>

6.1.3 A follow up audit of Safety Signage will be conducted in Quarter 1/2 as part of the 2017/18 audit plan.

6.2 **Port - Closed Circuit Television (CCTV)**

6.2.1 The audit of Port CCTV was given no assurance as testing resulted in two critical and one high risk exceptions.

6.2.2 The exceptions and agreed actions are summarised in the table below.

Exception	Agreed Action
Critical - Testing was carried out to	The Duty Port Manager has assumed

<p>confirm whether Principle 4 (designated individual with responsibility for the development and operation of a surveillance camera system and adequate governance arrangements) and Principle 5 (clear rules, policies and procedures must be in place before a surveillance camera system is used) of the Surveillance Camera Commissioner's Code of Practice are being complied with. The following issues were highlighted:</p> <ul style="list-style-type: none"> • There was no defined management lead to camera operations at the Port. • There was no clearly defined accountability structure in place to provide and display effective governance, clarity, organisation and communication. • There was no current policy with complimentary procedures in place. <p>Without transparent accountability lines and a suitable surveillance camera policy to steer the Port's surveillance camera operations it may not be complying with the law and could face legal challenges on prosecutions or by data subjects resulting in fines and reputational damage. Without up to date supporting procedures CCTV staff are less likely to fulfil duties in accordance with internal and external requirements.</p>	<p>temporary responsibility for CCTV operations whilst work is made towards compliance. A wider discussion is necessary to establish whether a Senior Responsible Officer at PCC should be made the Single Point of Contact (SPOC) for CCTV operations throughout those areas in which PCC is ultimately responsible. Once this is complete a formal accountability structure for CCTV operations will be established.</p> <p>A Code of Practice for Portsmouth International Port's CCTV System is being developed following completion of the privacy impact assessment. This will be available to view on the Portsmouth International Port web site, circulated to staff and signed off as read and reviewed annually.</p> <p>Consideration will be given to a PCC-wide CCTV Code of Practice subsequent to senior management approval.</p> <p>Work Instructions on the use of the CCTV systems and the processing of data are to be developed together with the CCTV Code of Practice.</p>
<p>Critical - Further testing was carried out against Principles 1 and 2 of the Code of Practice.</p> <p>Principle 1 of the surveillance camera code of practice states that the 'use of a camera system must always be for a specified purpose which is in pursuit of a legitimate aim and necessary to meet an identified pressing need'. As part of this the CCTV system must have clear objectives. At the start of the audit on</p>	<p>Objectives of the camera system have now been defined and will form part of the new CCTV Code of Practice.</p> <p>Annual reviews of the system will be undertaken in the form of 'pressing needs' and privacy impact assessments. An annual surveillance camera systems audit will also be carried out to ensure the objectives of the system are still being met and the system itself is complied with.</p>



<p>29th November the Port had not articulated its surveillance camera objectives.</p> <p>Principle 2 states the 'use of a surveillance camera system must take into account its effect on individuals and their privacy, with regular reviews to ensure its use remains justified.' Annual reviews of the Port's CCTV system have not been formally carried out. A privacy impact assessment has been carried out during this audit which needs to better reflect the ICO's Privacy Impact Assessment (PIA) Code of Practice and link into a broader 'pressing need' justification.</p> <p>Annual reviews and PIAs are not published which Principle 2 of the code suggests as best practice.</p> <p>Documented justification in the form of a 'pressing need' review and PIA specifically for body worn video (BWV) is lacking.</p> <p>The Data Protection Register on the Information Commissioner Office's web site also holds redundant information as to the current use of CCTV at the Port. This does not appear to have been updated since 2000.</p> <p>Non-compliance with the code's principles can lead to legal challenges and enforcement action. Failure to update the Data Protection Register with current personal data handling practices breaches legislation and could result in fines and/or legal challenges.</p>	<p>Justification for body worn video will be further developed and evidenced as part of the above process.</p> <p>The Data Protection Register will be updated to further detail the current use of surveillance cameras at the Port</p>
<p>High - Training requirements as per the Code of Practice was also tested. It was found that:</p> <ul style="list-style-type: none">• Staff are not all necessarily aware of all of their responsibilities when it comes to surveillance camera operations	<p>A formal training matrix for any staff associated with CCTV operations will be developed as a priority. Training to National Operating Standards for both operational and management staff began in January 2017 and will continue to be rolled out through to</p>

<p>and there has been no formal CCTV training.</p> <ul style="list-style-type: none"> Some operational staff have control over surveillance cameras beyond their remit. They are able to control cameras when they should only have view-only access and also in locations beyond their sphere of responsibility. <p>Without adequate training, system users may not have the necessary skills and knowledge to use or manage the surveillance system resulting in legal challenges and/or fines should it be used inappropriately.</p>	<p>March 2017.</p> <p>Physical access and system controls are currently being put in place to ensure staff are not able to control cameras when they have viewing rights only. This process will also ensure access is limited to only the areas that they have responsibility for.</p>
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6.2.3 A follow up audit of Port CCTV will be conducted in Q1/2 as part of the 2017/18 audit plan.

6.3 **Mainland Market Deliveries (Shipping Services) (MMD) - Insurance and Claims**

6.3.1 The audit of MMD Insurance & Claims was given no assurance as testing resulted in two high risk exceptions.

6.3.2 The exceptions and agreed actions are summarised in the table below.

Exception	Agreed Action
<p>High - Employer Liability (EL) Claims: The Health & Safety Manager advised that there had been 46 employer liability claims since 2012. However he was only able to provide accident reports relating to 2 claims that are currently ongoing. Therefore it was not possible to undertake full sample testing.</p> <p>Error Cost Corrections: MMD receives claims for damaged goods or equipment. As many of these claims do not exceed the insurance excess of £10,000, they are investigated and resolved directly by MMD. A sample of 10 was tested, and issues were found for all 10 cases.</p>	<p><u>EL Claims</u></p> <p>From the 03/01/17 the new Health & Safety Manager has a comprehensive process for recording claims and associated paperwork. This process will be documented into a flow diagram, implemented and monitored.</p> <p><u>Customer Claims</u> The spreadsheet for recording customer claims has been amended to better capture the information in one central place and to improve management information and reporting.</p> <p>The investigation paperwork is to be reviewed to ensure all relevant details</p>

<p>There were inconsistencies found in the way that Error Cost Corrections are investigated, with varying levels of detail, authorisation and supporting evidence.</p> <p>Without clear records relating to the cause, progress and resolution of claims, it is not possible for MMD to effectively mitigate the risk of incidents being repeated.</p>	<p>are being recorded and actioned. Once complete they will be held centrally and reviewed by the General Manager to ascertain whether any further action or any changes to processes need to be implemented</p>
<p>High - It was not possible to obtain a sample to show action taken in response to accidents that resulted in employer liability claims. This was due to the fact that records were not traceable in the format in which they had previously been stored, and because definitive actions had not been taken in all instances. There were sixteen of these claims from 2014-2016, with £9364.99 paid, and a reserve of £92,217 for claims not yet settled.</p> <p>If action is not taken to address the cause of an accident, it increases the likelihood that that it will recur. This may result in staff injury, lost working time and ultimately, an increased insurance premium for these types of claims.</p>	<p>The Health & Safety Manager has contacted MMD's insurer for a list of employer liability claim details. He will use this information to populate a spreadsheet, which will be used to ensure that additional control measures are put in place to prevent a recurrence of incidents.</p>

6.3.3 A follow up audit of MMD Insurance and Claims will be conducted as part of the 2017/18 audit plan.

6.4 **Housing & Property - Compliance with Fire Policy**

6.4.1 The audit of Compliance with Fire Policy was given no assurance as testing resulted in one critical and one high risk exceptions.

6.4.2 The exceptions and agreed actions are summarised in the table below.

Exception	Agreed Action
<p>Critical - The PCC Fire and Asset Management policies state that each property should have a full fire risk assessment (FRA) every ten years, and that these must be reviewed</p>	<p>The Property & Housing service has advised that FRAs are now to be completed when required, as opposed to as part of a planned maintenance schedule.</p>



<p>regularly. Properties over 6 storeys are classed as 'high risk' and must be reviewed every two years. Properties below 6 storeys as required by PCC policy, should be reviewed every three years.</p> <p>PCC has 39 properties that are six storeys or over. Testing confirmed that seven blocks of flats (18%) were established as missing a current FRA, and fifteen blocks (38%) were shown to have an expired FRA.</p> <p>Of the 712 properties which are 5 storeys or lower, analysis found that 280 (39%) had no recorded FRA date, and 171 (24%) blocks were overdue a review.</p> <p>If PCC has not carried out a Fire Risk Assessment for all of its properties subject to The Regulatory Reform (Fire Safety) Order 2005, it may be putting its residents at risk of serious harm in the event of a fire. Not fulfilling this responsibility under the Act constitutes a summary offence, subject to a £1000 fine, or, upon indictment, a fine and/or imprisonment not exceeding two years.</p>	<p>All high-risk blocks are to have a current FRA in place by April 2017. All other properties requiring one should receive a compliant FRA by April 2019.</p> <p>The policy is to be updated to show that the requirement to review high-risk properties every two years is will be replaced with a timescale that is decided by the competent person undertaking the assessment.</p>
<p>A review of the critical-risk exception has been carried out in June 2017, in order to highlight PCC's current position. For the purpose of comparison with the 2016/17 figures, blocks of flats have been separated into two categories: those with six storeys and above, and those with five storeys and below.</p> <p>All seven blocks of six storeys and above, previously identified as missing a Fire Risk Assessment, now have a current assessment uploaded to the database entry.</p> <p>Of the fifteen properties of six storeys and above identified as requiring an FRA review, fourteen have had a review undertaken. Although Mill Gate House (1-76) FRA date of 13/6/17 is yet to be uploaded to the system.</p> <p>The final property, Wilmcote House (1-113), is currently undergoing extensive renovations which began in 2014. The Assistant Director of Property and Housing has advised that, in such situations, it is the responsibility of the contractor on site to assume responsibility for the management and production of evacuation/ fire safety plans for both residents and workmen while they are in control of the building.</p>	

The Asset Manager has confirmed that the consultants managing the scheme and the contractor review, throughout the duration of the project, health and safety on site including the contractor fire risk assessment. Health and Safety is reported in the regular monthly project reports submitted to PCC and is an agenda item at the monthly project board and contractor site meetings. Evidence has been sighted by Internal Audit confirming that the contractor has carried out monthly reviews, the last of which was conducted on the 2nd June 2017. The PCC Fire Safety Officer has visited the site several times and is due to undertake a review of the contractor fire risk assessment on the 23rd June 2017.

Progress is being made regarding Fire Risk Assessments to properties of five storeys and below and the Asset Manager has updated the action and stated that no properties will not have an FRA by mid-July 2017 and no blocks will have a review outstanding by the end of August 2017. A verbal update will be given by the Asset Manager at the committee meeting of the 30th June 2017.

Moving forward and to conclude this a follow up audit of compliance with fire safety will be conducted during Q3 by Internal Audit who will report a final position on all areas identified for the next committee meeting.

High - PCC has landlord responsibility for 14,821 properties. Of these, 13,064 have a gas supply. Testing found that 143 of these did not have a gas certificate in line with Gas Safety (Installation and Use) Regulations 1998 s.36 (2) & (3). Action had not been taken to address this situation for 11 cases (<1%).

Failure to properly maintain a tenant's gas equipment may ultimately result in a loss of life, or damage to PCC property. In constituting a breach of regulations, it could lead to prosecution. If referred to the Crown Court, the potential outcomes include imprisonment and an unlimited fine. Although the number of outstanding properties represents a very small percentage of the overall population, the exception has been rated as high-risk, as expired certificates constitute a breach of the legislation.

All eleven non-compliant properties identified within the December extract have since received gas safety checks.

Updates

6.5 **Children's Social Care - Through Care Team - no progress since original audit**

6.5.2 The 2015/16 audit of the Through Care Team resulted in no assurance being given. A follow up audit was conducted as part of the 2016/17 audit plan.

6.5.3 5 high risk exceptions were raised as part of the original audit. The results of the follow up testing are detailed in the table below.

Exception	Follow Up Results	Further Agreed Action
<p>Checks undertaken on a sample of care leaver's grants identified discrepancies between Finance and Social Care records for 36/ 82 (44%) of the transactions tested.</p> <p>There is a potential that over or underpayments may be made to care leavers, resulting in either financial losses or reputational damage.</p>	<p>Further testing of 55 transactions relating to 5 care leavers was undertaken. Discrepancies were found for 31 transactions (56%)</p>	<p>Prepaid cards will be introduced for care leavers grants. Operational processes will be developed to support this.</p> <p>Reconciliations will be carried out for existing Care Leavers, in order to confirm the remaining grant available to be paid to them.</p> <p>Reports will be produced and retained within the team, one showing spend on the Care Leavers cards and the other showing what has been loaded to the Care Leavers Cards. Both will be reviewed and retained.</p>
<p>A duplicate payment of £470.59 was found for one care leaver. An overspend of £85.33 was also found for one care leaver.</p> <p>Over payments made to care leavers, may result in either financial losses or reputational damage.</p>	<p>No duplicate payments were identified in further testing carried out.</p>	<p>Agreed actions as above.</p>
<p>Inadequate record</p>	<p>No issues were found in</p>	<p>Agreed action as above.</p>

<p>keeping in relation to care leavers' grants was found for 13 out of the 18 logs reviewed (72%).</p> <p>The risk exposure is the same as those mentioned above.</p>	<p>terms of the records kept on the 5 further logs tested.</p>	
<p>Pathway plans were not completed and in place within the required timescale for 8 out of the 12 (67%) young people tested.</p> <p>If a Pathway Plan is not completed and reviewed in a timely manner a young person's ambitions and needs may not be identified. This could potentially affect the planned outcome of them becoming independent.</p>	<p>Pathway plans were not completed in the required timescale for 2 out of the 5 (40%) young people tested.</p>	<p>A new report has been introduced to capture all young people when they reach 15 years and 9 months old to confirm that their Pathway Plan has commenced and is completed by the time the young persons is 16 years and 3 months. Where delays occur these will be chased with the relevant managers.</p>
<p>Leaving Care Assessment of Needs were either not completed or were late in being completed for 10 out of the 12 (83%) young people tested.</p> <p>The risk exposure is the same as those mentioned above.</p>	<p>Needs assessments were not found for 2 out of 5 (40%) young people tested</p>	<p>All Pathway Plans within the team have been reviewed to ensure each care leaver has a current plan in place.</p>

6.5.4 Pathway planning will be covered as part of a full audit planned for 2017/18.

6.6 **Corporate - Closed - Circuit Television (CCTV) - partially resolved**

6.6.1 The 2015/16 audit of the CCTV resulted in no assurance being given. A follow up audit was conducted as part of the 2016/17 audit plan.

6.6.2 4 high risk exceptions were raised as part of the original audit. The results of the follow up testing are detailed in the table below.

Exception	Follow Up Results	Further Agreed Action
PCC's CCTV Policy has	A redrafted CCTV Code	The redrafted Policy will



<p>not been shared or adopted by other Services. The Services managing their own CCTV do not have any policy relating to its use (apart from Body Worn Videos).</p> <p>Where CCTV is not covered by the CCTV Policy, Services may not be complying with the Law and could face legal challenges on prosecutions or by data subjects resulting in fines and reputational damage.</p>	<p>of Practice has been written by the CCTV Operations Manager but yet to be published. This is due to the Surveillance Camera Commissioner (SCC) soon to be issuing new guidance that will supersede existing arrangements.</p> <p>A Senior Responsible Officer (SRO) for CCTV operations has yet to be appointed.</p>	<p>be updated, put on PolicyHub and staff training organised by the CCTV Operations Manager following the issue of new guidance by the Surveillance Camera Commissioner.</p> <p>A Senior Responsible Officer will be appointed to take accountability for CCTV operations, ensuring all Services comply with a Central Code of Practice.</p>
<p>Where individual services manage their own CCTV a number of non-compliance issues around pressing need, signage, viewing, siting and maintenance were identified. This appears to be due to service staff not being aware of the PCCs CCTV Policy, various Codes of Practice or related DPA and Human Rights issues.</p> <p>There is a risk of enforcement action or fines from the ICO; Legal challenge resulting in fines and reputational damage.</p>	<p>The CCTV Operations Manager has met with appropriate services and provided advice, signage has been improved and viewing is now limited to dedicated personnel only.</p> <p>Children's Homes now being supported by Housing - and hence managed by the Corporate Control Room - so new systems will be added in due course.</p> <p>Libraries' systems and signage is now in place and staff now aware of responsibilities.</p>	<p>Comprehensive assessments to take place in March-April 2017 by the CCTV Operations Manager for Services employing surveillance cameras.</p>
<p>The CCTV Code of Practice and Protection of Freedoms Act (POFA) Codes of Practice (Principle 4) requires that there are regular proactive checks or audits carried out to</p>	<p>Self-assessments were sent out by the former Chief Internal Auditor, and returned. Full annual assessments will be carried out by the CCTV Operations Manager.</p>	<p>An SRO to be appointed and backed up by regular assessments of all Services going forward</p>

<p>ensure that procedures are complied with. There is currently no corporate oversight so these checks are not happening.</p> <p>The risk exposure is covered in the previous issue.</p>		
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6.6.3 At present there are no plans for a further follow up audit in this area.

6.7 Children's Social Care - Single Assessment Framework - no progress since original audit

6.7.1 The 2016/17 audit of the Single Assessment Framework resulted in no assurance being given. A follow up audit was conducted later in 2016/17.

6.7.2 3 high risk exceptions were raised as part of the original audit. The results of the follow up testing are detailed in the table below.

Exception	Follow Up Results	Further Agreed Action
<p>A sample of 25 of the 925 single assessments completed since January 2016 was tested. 4 (16%) were not fully complete and 14 (56%) contained little or no information in the child/parent/carer comments section on the assessment.</p> <p>If assessments are incomplete or have not fully involved the child/parent/carer then they may not have considered all areas where a child may have needs. This may require further work by the Social Worker which is not an efficient use of time.</p> <p>This may also impact on the services that are offered to the</p>	<p>Correct working practices were reinforced with the team in June 2016.</p> <p>A further sample of 25 assessments was tested and it was found that 24 (96%) contained little or no information in the child/parent/carer comments section on the assessment.</p>	<p>New report to be devised which will be sent to Service Leads, Practice Leads, and the Head of Assessment and Intervention on a weekly basis. The report will show all assessments authorised in the previous week, by whom authorised, by whom written and what information has been input in the parents/carers and child's comments boxes. The report will also show the Assessment and Progress review details if the assessment is completed in longer than 10 days.</p> <p>Issues where performance is not as required will be followed</p>

<p>child/parent/carer and could impact on whether the family's situation is improved or not. This will ultimately affect the child's long term outcomes.</p>		<p>up by the Service Leads with the Practice Leads and ultimately with the Social Workers to ensure that these are addressed going forwards.</p>
<p>17 of the 25 cases tested took longer than the planned initial 10 day timescale. It was found for 12 (71%) of these that there was no evidence that they had been reviewed at the 10 day stage or authorisation given for the longer timescale.</p> <p>There is a risk that delays have negative impacts on the short and longer term outcomes of children. This could also result in the Authority failing to meet its statutory obligations in safeguarding.</p>	<p>Further testing of progress reviews was carried on 25 cases which had taken longer than the planned 10 day timescale. It was found for 20 cases (80%) that there was no evidence that they had been reviewed at the 10 day stage or authorisation given for the longer timescale</p>	<p>Agreed action as above.</p>
<p>No signed assessments were found to have been scanned into the Client Case Management for the sample of 25 cases tested.</p> <p>If assessments are not signed then there is no clear evidence that the child/parent/carer has actually been involved in the assessment and that the information recorded accurately reflects the current situation. This could affect the services offered and the long term outcomes for the young person.</p>	<p>Testing of the same sample of 25 cases found 1 signed assessment on CCM (4%).</p>	<p>Reinforce requirements for recording with Service Leads and Practice Leads.</p>

6.7.3 At present there are no plans for a further follow up audit in this area.

6.8 Finance & Information Service - Accounts Receivable - not resolved

6.8.1 The 2015/16 audit of Accounts Receivable resulted in no assurance being given. The exceptions raised were followed up as part of the annual Accounts Receivable audit in 2016/17.

6.8.2 2 high risk exceptions were raised in the 2015/16 audit, the exception related to credit notes has been raised in the previous 4 annual audits. The results of the follow up testing are detailed in the table below.

Exception	Follow Up Results	Further Agreed Action
<p>514 staff were listed as having Accounts Receivable EBS access. Testing found that 59 users' accounts (11.48%) remained active despite no longer being employed by the Authority.</p> <p>Financial, legislative and operational risk that EBS accounts belonging to staff no longer working for the authority may be accessed by unauthorised parties seeking to exploit system vulnerabilities.</p>	<p>516 staff were listed as having Accounts Receivable EBS access. Testing found that 43 of these staff (8%) were ex-employees who still had access to the system.</p>	<p>Access has been terminated for the 43 staff. A compliance exercise was undertaken in April '16, in which all managers were contacted to verify access requirements for all staff with EBS privileges. They were also advised that, in future, all access rights would be removed when staff members change job role.</p>
<p>Testing confirmed that the agreed actions from the previous audits, which involved the periodic analysis of credit notes and the generation of monthly reports for finance managers to review, have not been implemented.</p> <p>There is no current proposal to alter the authorisation method regarding credit notes.</p> <p>Without verification,</p>	<p>The proposed quarterly review of a sample of credit notes had not been undertaken. A process has since been devised to ensure that future credit note authorisations are subject to appropriate scrutiny.</p>	<p>A 5% sample of credits notes will be taken. A spreadsheet will be maintained showing why the credit was needed and confirmation will be sought from the authoriser that they had actually authorised the credit.</p>



there is a risk that credit note requests may be presented as authorised, without the authoriser's Knowledge, resulting in financial loss to the authority.		
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6.8.3 These areas will be covered under the annual Accounts Receivable audit to be undertaken in 2017/18.

6.9 **External - St Paul's Primary School - resolved**

6.9.1 The 2016/17 audit of St Paul's Primary School resulted in no assurance being given. A follow up audit was conducted later in 2016/17.

6.9.2 8 high risk exceptions were raised as part of the original audit. The results of the follow up testing are detailed in the table below.

Exception	Follow Up Results	Further Agreed Action
Sample testing found no evidence of the source documentation used to verify sums banked.	During retesting a proper management trail from receipt to banking was identified as now in place.	No further action required.
From a sample of 6 purchase orders, 2 were raised retrospectively which is a breach of Financial Rules. The total spend on these purchase orders was £3,093.80. Failure to raise purchase orders in advance presents an inaccurate budget position and does not demonstrate appropriate authorisation.	Retesting evidenced that all staff were appropriately reminded of the requirements. In addition a new sample of purchase order were tested and confirmed to have been raised in advance.	No further action required.
The school 'Business Continuity Plan' was found to be non-compliant with best practice; i.e. not frequently reviewed, approved by the Full Governing Body or	Evidence was found during the follow-up to confirm that adequate arrangements are now in place.	No further action required.



<p>communicated to all staff.</p> <p>There is a risk that the school will not have an effective and current plan in place to minimise risk and disruption in the event of an emergency.</p>		
<p>Governors have not adopted a CCTV Policy as required by the Information Commissioner's Office (ICO) CCTV Code of Practice.</p> <p>Non-compliance with the ICO Code of Practice, Regulation of Investigatory Powers Act (RIPA) and the Data Protection Act could result in a potential fine to the School.</p>	<p>Governors have agreed that the CCTV system does not provide value for money and is not financially viable to maintain. It was agreed that the cameras will remain as a deterrent but that they will not be operational, which negates the requirement for a CCTV Policy.</p>	<p>No further action required.</p>
<p>The MIDAS certificate file was examined for nine employees who have driven the mini buses for the period April 2016 to the date of the audit. Testing confirmed there were seven current certificates on file, one certificate had expired in January 2016 and one certificate was not on file.</p> <p>Using a non-MIDAS qualified driver as required by PCC insurance policy may negate the policy in the event of a claim.</p> <p>52 miles (3%) of those reviewed could not be accounted for.</p> <p>Possible unauthorised / private use of a mini bus</p>	<p>Evidence was found during the follow-up to confirm that adequate arrangements and checks are now in place.</p>	<p>No further action required.</p>

will result in increased fuel costs.		
<p>Insufficient data was held in relation to the inventory, i.e. description of the items held.</p> <p>This could negate insurance cover if full asset details are not recorded. Assets also could be lost or stolen and go undetected.</p>	Evidence was found during the follow-up to confirm that adequate arrangements and checks are now in place.	No further action required.
<p>During initial testing it was noted that DBS application documents (i.e. Bank / Building Society statements) had been retained on file for (3) individuals tested, which is a breach of the DBS Code of Practice and Data Protection Act. This could result in a financial penalty for the Authority.</p>	Evidence was found during the follow-up to confirm that adequate arrangements and checks are now in place.	No further action required.
<p>Testing found no evidence that the Unofficial Fund and the PTA fund (Friends of St Pauls) had been audited and presented to the Governing Body.</p>	Evidence was found during the follow-up to confirm that adequate arrangements and checks are now in place.	No further action required.

7. Annual Audit Opinion

- 7.1 Due to the number of critical and high risk exceptions raised under the audits carried out, the Audit opinion for 2016/17 is that only limited assurance on the effectiveness of the control framework can be given.
- 7.2 Whilst this opinion is the same level as the previous years the direction of travel is deteriorating not improving. Four audit opinion levels are now in place as agreed in the 2016/17 Audit and Counter Fraud Strategy and these are: no assurance, limited assurance, reasonable assurance and full assurance. Where there are mainly medium or low risk exceptions the annual audit opinion would be reasonable or full assurance.

- 7.3 There is still a significant level of high risk exceptions raised this year, a number of which are a result of failure by managers to carry out checks either previously performed centrally by support services or where they have differing priorities and capacity issues. In addition the level of investigation involving staff has not subsided, which may be indicative of the reduced resources and control layers, needed following the austerity measures. The results of follow up work also show that only 39% of agreed actions have been implemented again showing a decline. Some of the reasoning for this is capacity or proposed solutions that did not mitigate the risks identified.
- 7.4 Internal Audit is concerned that the overall effectiveness of the control framework position is declining and will continue to work with Directors, the Deputy Chief Executive and the Chief Executive to improve on specific areas of control, risk management and governance weaknesses.
- 7.5 Any significant corporate weaknesses and agreed actions will be reflected in the Annual Governance Statement. The impact of the Internal Audit work for 2016/17 may affect that year's work for External Audit. It may also inform their work for 2017/18 and where they consider there are weaknesses in control that could materially affect the accounts they may need to carry out further work to gain the necessary audit assurance required for a true and fair view of the financial position and compliance with professional codes of practice.
- 7.6 Internal Audit has carried out a self-assessment and confirms that they are compliant with the Public Sector Internal Audit Standards (PSIAS).
- 8. 2017/18 Audit Plan**
- 8.1 The Audit Plan planned coverage for 2017/18 has been drawn up using the Strategy approved by Members of this Committee at their 3rd February 2017 meeting.
- 8.2 Meetings have been held with all Directors and the Chief Executive and the previous Chair of the Governance & Audit & Standards Committee who have all been consulted on the areas planned and the overall Audit Plan.
- 8.3 The 2017/18 Audit Plan is attached as Appendix C to this report. There are 105 audit items although this may increase once preliminary audit work commences on areas such as grants as and when they are required. In addition to this a quarterly review will be carried out to take account of changing risks & priorities, all of which will be reported back to this Committee.
- 8.4 As at the 5th June 2017 1005 days have been purchased by external clients for Internal Audit work, this is an increase of 644 days from the previous year.
- 9. Counter Fraud Performance**
- 9.1 Below is a table summarising the work completed by the Corporate Counter Fraud Team during 2016/17



Case Type	Number Cautioned	Number Prosecuted	Admin Penalty	Sanctioned Fraud Overpayment	Total Overpayment Raised
Housing Benefit (HB) only	0	6	0	£163,517.17	£210,640.84
Council Tax Support (CTS) only	6	2	1	£20,094.98	£30,738.90
Council Tax Benefit (CTB) only	0	0	0	£7,699.16	£14,075.66
Joint HB & CTS	0	10	0	Included in above figures	Included in above figures
Joint HB & CTB	0	2	0	Included in above figures	Included in above figures
Joint HB, CTS, CTB	0	2	0	Included in above figures	Included in above figures

- 9.2 Corporate investigations that have exceeded all appeal time limitations are detailed in Appendix D.
- 9.3 A caution is a warning given in certain circumstances as an alternative to prosecution to a person who has committed an offence. A caution can only be considered when there is sufficient evidence to justify instituting criminal proceedings and the person has admitted the offence during an Interview under Caution.
- 9.4 An administrative penalty: is an alternative to prosecution and only applies where it appears to the Secretary of State and/or a local authority that the making of an overpayment was attributable to an act or omission by the claimant and that there are grounds for instituting proceedings for an offence.
- 9.5 The administrative penalty is payable in addition to any recoverable overpayment. The Department for Work and Pensions are now responsible for issuing Administrative penalties relation to Housing Benefit.
- 9.6 A Caution and Administrative penalty can only be offered where the Local Authority has established sufficient evidence to prosecute. These sanctions are offered as an alternative to prosecution but the claimant is not obliged to accept and may decide to proceed to court.

- 9.7 A sanctioned overpayment relates to cases that have either been cautioned, prosecuted or have had an administrative penalty applied, i.e. an offence was identified. The total overpayment contains an element of cases where no offence has been identified.
- 9.8 The total value of the 1 administrative penalty was £809.26. Investigations into sub-letting also resulted in 3 properties being recovered.
- 9.9 Overall 61 cases were referred to the Counter Fraud Team during 2016/17 of which 51 (84%) were investigated following a risk assessment on the intelligence received.
- 9.10 In 2016/17 there were 29 sanctioned cases. The breakdown of the sanctioned cases is as follows:
- 22 prosecutions
 - 6 cautions
 - 1 administrative penalties

10. Equality impact assessment (EIA)

- 10.1 The contents of this report do not have any relevant equalities impact and therefore an equalities assessment is not required.

11. Legal Implications

- 11.1 The City Solicitor has considered the report and is satisfied that the recommendations are in accordance with the Council's legal requirements and the Council is fully empowered to make the decisions in this matter.
- 11.2 Where system weaknesses have been identified he is satisfied that the appropriate steps are being taken to have these addressed.

12. Finance Comments

- 12.1 There are no financial implications arising from the recommendations set out in this report.
- 12.2 The S151 Officer is content that the progress against the Annual Audit Plan and the agreed actions are sufficient to comply with his statutory obligations to ensure that the Authority maintains an adequate and effective system of internal audit of its accounting records and its system of internal control.

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Signed by: Elizabeth Goodwin, Chief Internal Auditor

Appendices:

Appendix A – Completed audits from 2016/17 Audit Plan
 Appendix A - Municipal Year 201617
 Appendix B - Completed follow up audits from 2016/17 Plan
 Appendix C - 2017/18 Audit Plan
EXEMPT Appendix D - Corporate Investigations

Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location
1 Accounts and Audit Regulations	http://www.legislation.gov.uk/uksi/2011/817/contents/made
2 Previous Audit Performance Status and other Audit Reports	Refer to Governance and Audit and Standard meetings – reports published online http://democracy.portsmouth.gov.uk/ieListMeetings.aspx?Committeeld=148

The recommendation(s) set out above were approved/ approved as amended/ deferred/ rejected by on

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Signed by:

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Appendix A1 -Results from 2016/17 Municipal Year (No Assurance and Critical Audit Summary)

Audit Title - NO ASSURANCE AUDITS	Critical Risks	High Risks	Original Audit Assurance	Key Risk	Summary	Follow Up Due	Follow Up Audit Assurance	Follow Up Summary
1516-009 - Through Care Team Children's Social Care (Director Alison Jeffery) - Original audit completed March 2016		5	No Assurance	Financial loss to the Authority	Five high risk exceptions and one medium risk exception have been raised as a result of audit testing. Testing identified Leaving Care Assessment of Needs were not being completed within the timescales stipulated and Pathway Plan were not in place by the time the young person was 16 years and 3 months old and the 6 monthly reviews of the Pathway Plans were delayed. Testing also showed that the systems in place to manage care leavers grants and payments was not adequate. This resulted in overpayments, duplicate payments and records not reconciling.	2016/17 Audit Plan Quarter 4	No Assurance	See main report
1516-082 - Closed-circuit Television (CCTV) Corporate - Original audit completed October 2015		4	No Assurance	Non compliance with legislation - Financial & Reputational	Four high risk exceptions highlighted in this report. The CCTV Policy not including all CCTV usage across the Authority and services not having their own. Breach of Data Protection Act (DPA) Principle 7 and European Convention on Human Rights (ECHR) & Human Rights Act (HRA) Article 8 by some Housing tenants having access to CCTV images. Non-compliance with significant areas of the Codes of Practice, DPA and ECHR & HRA by services that utilise CCTV especially around defining a pressing need/ privacy impact assessment. Non-compliance with the Protection of Freedoms Act (POFA) Code of Practice regarding regular oversight of CCTV usage to ensure compliance with Codes of Practice and relevant Acts.	2016/17 Audit Plan Quarter 4	No Assurance	See main report
1617-016 - Single Assessment Framework - Children's Social Care (Director Alison Jeffery) - Original audit completed June 2016		3	No Assurance	Children's needs may not be fully met	Three high risk exceptions were raised from this review. 25 assessments were tested and it was found that: 4 were not fully complete, 14 contained little or no information so it was not possible to determine what their views were on the assessment, for 12 there was no evidence that they had been reviewed at the 10 day stage or authorisation given for the 10 day completion timescale to be exceeded, and there were no signed assessments in the Children's Case Management system.	2016/17 Audit Plan Quarter 4	No Assurance	See main report

Appendix A1 -Results from 2015/16 Municipal Year (No Assurance and Critical Audit Summary)

1617-116 Craneswater Junior - External - Original audit completed December 2016	0	9	No Assurance	Weak financial management within the school	The Full Audit resulted in nine high risk and one medium risk exceptions relating to; Incorrect statements on the SFVS document in relation to; no opportunity to declare interests at FGB meetings, no evidence of staff competency matrices, no evidence of a current hire agreement form or liability insurance for the Karate Club, non display of the whistle blowing policy on the staff room notice board and an incomplete Business Continuity Plan - in addition , irregular reconciliation of the petty cash account, uncounted cash in the safe which exceeded the permitted insurance holdings, incomplete record of assets, non reporting of PTA accounts to the Governing Body and a weakness in controls for mini bus usage.	2017/18 Audit Plan Quarter 1		Actions have been agreed with the Head Teacher. These will be followed up in 2017/18.
1617-083 Spend on Staffing Off Contract - HR, Legal & Performance - Jon Bell - Original audit completed January 2017	1	0	No Assurance	Failure to adequately vet staff DBS checks before commencing employment	A critical risk exception has been raised as part of the audit with regard to the checking of DBS certificates before temporary workers commence employment at PCC	2017/18 Audit Plan		Actions have been agreed with Senior Officers and will be followed up during 2017/18.
1617-072 Emergency Procedures - Housing & Property - Owen Buckwell - Original audit completed December 2016	0	3	No Assurance	Lack of record keeping regarding emergency incidents. Staff unaware of Emergency plan	Three high-risk exceptions have been raised in relation to the Property & Housing Service's emergency procedures, resulting in a no assurance rating. One high-risk exception was raised as four out of five (80%) of respondents from staffed PCC buildings did not have knowledge of the Emergency and Major Incident Planning Document, and had not disseminated it to staff. Another high-risk exception has been raised as the service does not maintain a central record of emergency incidents, or actions taken in response to them. A final high-risk exception was raised as, due to lack of records, it was not possible to ascertain staff adherence to the guidance within the emergency planning document. It was therefore not possible to comment on the effectiveness of either the guidance, or of the staff response.	2017/18 Audit Plan		Actions have been agreed for one of the high risk exceptions the other two have been accepted by the Director. This position is being reviewed and the committee will be updated at the next committee meeting.

Appendix A1 -Results from 2015/16 Municipal Year (No Assurance and Critical Audit Summary)

Audit Title - NO ASSURANCE AUDITS	Critical Risks	High Risks	Original Audit Assurance	Key Risk	Summary	Follow Up Due	Follow Up Audit Assurance	Follow Up Summary
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1617-117 - Medina Primary - External - Original audit completed January 2017	0	6	No Assurance	Weak financial management within the school	Six high risk exceptions were raised relating to; inaccurate completion of the SFVS Document, no DBS checks for the Governing Body, poor control of lettings including no evidence of public liability insurance for hirers, retention of a DBS certificate / supporting documentation and finance staff not having signed the PCC Income Handling Policy.	2017/18 Audit Plan	Actions have been agreed with the Head Teacher and will be followed up during 2017/18
1617-022 - Safety Signage - Culture & City Development - Stephen Baily	1	2	No Assurance	Lack of lead for water safety across the Authority	One critical risk and two high risk exceptions were raised as a result of the audit review. The common theme behind these exceptions stem from the lack of a defined lead to water safety across the city.	2017/18 Audit plan	Actions have been agreed with Senior Officers and will be followed up during 2017/18
1617-087 - Port CCTV - Port - Mike Sellers	2	1	No Assurance	Lack of accountability and corporate oversight	Two critical and one high risks exceptions have been identified as part of the review. The common theme underpinning all the findings relates to the historic lack of accountability and corporate oversight.	2017/18 Audit plan	Actions have been agreed with the Director and will be followed up during 2017/18
1617-093 - Insurance & Claims - MMD - Mark Willcox/ Chris Ward/ Mike Sellers	0	2	No Assurance	Lack of detailed documentation	Two high-risk exception was raised in relation to insurance claim investigations. It was not possible to obtain a sample of employer liability claims, as the documents could not be located. A sample of error cost corrections, largely relating to damaged or lost goods, was obtained, however investigation records were found to be inconsistent, lacking key details and resolutions. It was also not possible to obtain details of action taken in response to accidents that resulted in employer liability claims.	2017/18 Audit plan	Actions have been agreed with the MMD Directors and will be followed up during 2017/18
1617-120 - Compliance with Fire Policy - Housing & Property - Owen Buckwell	1	1	No Assurance	Key assessments not being done in a timely manner	As at testing conducted in December 2016, one critical-risk exception was raised in relation to absent or out of date Fire Risk Assessments within PCC housing blocks. One high-risk exception was raised in relation to out of date gas safety certificates within Local Authority properties.	2017/18 Audit plan	See the main body of the report.

APPENDIX A2 - Audits Completed Since The Last Meeting (3rd March 2017).

Audit Title	Critical Risk	High Risk	Medium Risk	Low Risk - Improvement	Total Exceptions	Internal Control Environment	Compliance	Safeguarding of Assets	Effectiveness of Operations	Reliability & Integrity	Audit Assurance	Summary
1617-022 - Safety Signage - Culture & City Development - Stephen Baily	1	2	0		3	2	1	NAT	NAT	NAT	No assurance	One critical risk and two high risk exceptions were raised as a result of the audit review. The common theme behind these exceptions stem from the lack of a defined lead to water safety across the city.
1617-087 - Port CCTV - Port - Mike Sellers	2	1	2		5	1	2	1	1	0	No assurance	Two critical and one high risks exceptions have been identified as part of the review. The common theme underpinning all the findings relates to a lack of corporate oversight and responsibility which has resulted in non compliance with CCTV codes of practice.
1617-093 - Insurance & Claims - MMD - Mark Willcox/ Chris Ward/ Mike Sellers		2			2	0	1	NAT	1	NAT	No assurance	Two high-risk exceptions was raised in relation to insurance claim investigations. It was not possible to obtain a sample of employer liability claims, as the documents could not be located. A sample of error cost corrections, largely relating to damaged or lost goods, was obtained, however investigation records were found to be inconsistent, lacking key details and resolutions. It was also not possible to obtain details of action taken in response to accidents that resulted in employer liability claims.
1617-120 - Compliance with Fire Policy - Housing & Property - Owen Buckwell	1	1	2		4	NAT	4	NAT	NAT	NAT	No assurance	As at testing conducted in December 2016, one critical-risk exception was raised in relation to absent or out of date Fire Risk Assessments within PCC housing blocks. One high-risk exception was raised in relation to out of date gas safety certificates within Local Authority properties.

Audit Title	Critical Risk	High Risk	Medium Risk	Low Risk - Improvement	Total Exceptions	Internal Control Environment	Compliance	Safeguarding of Assets	Effectiveness of Operations	Reliability & Integrity	Audit Assurance	Summary
1617-005 - Adult Safeguarding Board - Adult Social Care - Innes Richens		1		1	2	2	NAT	NAT	0	NAT	Limited assurance	One high risk and one low risk exception were raised as a result of this review. The high risk related to there not being a risk register in place.
1617-007 - Better Care Fund (Section 75) - Adult Social Care - Innes Richens		2			2	NAT	NAT	NAT	2	NAT	Limited assurance	2 high risk exceptions were raised as a result of the Better Care Fund review. 1 related to the fact the 4 of the 8 current projects did not have performance indicators against which to measure performance. The second exception related to the fact that 6 of the projects have not progressed in line with the expected outcomes
1617-008 - Appointeeship - Adult Social Care - Innes Richens		3		1	4	1	0	2	1	NAT	Limited assurance	Three high risk have been raised , the first in relation to procedures supporting the reconciliation of clients money and the transfer of clients to the prepaid card system, the second in relation to the collection of personal allowances and the third relates to information recorded about clients income and expenditure.
1617-010 - Child sexual exploitation and missing persons - Children's Social Care - Alison Jeffery		1			1	0	1	NAT	0	NAT	Limited assurance	One high risk exception has been raised as a result of the audit review in relation to missing child incidents not being correctly recorded for 49/105 (47%) incidents noted.
1617-026 - Wellbeing Service - Public Health - Jason Horsley		1			1	0	NAT	NAT	1	0	Limited assurance	One high risk exception was raised as a result of this review. There is a lack of complete and accurate data meaning that a robust performance management framework cannot be established.
1617-033 - Traded Services - Community & Communication - Lou Wilders		1			1	1	NAT	NAT	NAT	NAT	Limited assurance	One high risk exception has been raised as testing could not evidence a formal strategy setting out the purpose and objectives of Traded Services and a lack of corporate oversight of all income generated across the Authority, reliance on this income and the impact on staff capacity.

Audit Title	Critical Risk	High Risk	Medium Risk	Low Risk - Improvement	Total Exceptions	Internal Control Environment	Compliance	Safeguarding of Assets	Effectiveness of Operations	Reliability & Integrity	Audit Assurance	Summary
1617-034 - Council Tax and NNDR - Community & Communication - Lou Wilders		3	2		5	NAT	3	NAT	2	NAT	Limited assurance	Four high risk exceptions have been raised as a result of audit testing. One related to lack of procedures and processes for administering exemptions and reliefs for business rates accounts. The second high risk exception related to reliefs and exemptions on business rates accounts and the third was in relation to discount and exemptions on council tax accounts. The fourth high risk exception has been raised in relation to records of properties in which staff have an interest in.
1617-041 - Accounts payable - Finance & Information Service - Chris Ward		3	4		7	NAT	2	2	3	NAT	Limited assurance	Overall, three high risks have been raised as a result of the audit. The first two high risks related to purchase orders being raised after invoices being received and invoices not being paid according to suppliers' terms respectively. The final high risk related to weak controls regarding supplier master data integrity.
1617-043 - Purchase Cards - Finance & Information Service - Chris Ward		2	1		3	1	2	NAT	0	NAT	Limited assurance	Two high risk exceptions were raised relating to lack of description of purchases, and payment of parking fines through purchase cards which is forbidden under the Purchase Card policy.
1617-045 FIS - Capital accounting		2	1		3	1	NAT	0	1	1	Limited assurance	Summary to be provided for the actual meeting, report still in draft
1617-053 - iExpenses - Finance & Information Service - Chris Ward		4	1		5	2	2	NAT	1	NAT	Limited assurance	Four high risk exceptions have been raised as a result of audit testing. These were in relation to incorrect approval of claims, the system not being set up correctly to automatically reject claims over 3 months old, insufficient checks on individuals business insurance cover and VAT receipt compliance.

Audit Title	Critical Risk	High Risk	Medium Risk	Low Risk - Improvement	Total Exceptions	Internal Control Environment	Compliance	Safeguarding of Assets	Effectiveness of Operations	Reliability & Integrity	Audit Assurance	Summary
1617-056 - Access Controls, Database Access - Finance & Information Service - Chris Ward		2			2	0	1	NAT	1	NAT	Limited assurance	Two high risk exceptions were raised as a result of this review. One related to the IS leaver form not being completed correctly by managers and the forms not being sent in advance of the individual leaving the Authority. The second related to lack of monitoring of high privilege user accounts to ensure that they are complying with policies and procedures.
1617-071 - Commercial Rents - Housing & Property - Owen Buckwell		2	2		4	2	1	NAT	1	NAT	Limited assurance	Two high risk exceptions were raised as a result of audit testing. The first high risk was raised as it was not possible to evidence a documented strategy for the work of the Commercial Rents team that is in line with the Authority's aims and objectives. The second high risk was raised in relation to rent reviews. Testing identified that of the 340 leases generating more than £100 as at 26/1/17 137 (40%) were overdue their rent review. The review dates listed ranged from February 1998 to December 2015.
1617-075 - Asbestos - Housing & Property - Owen Buckwell		1			1	0	1	NAT	NAT	NAT	Limited assurance	One high risk exception was raised as a result of audit testing. This related to a hard copy of the asbestos register not being held on site at 3 of the 10 sites tested, and the Port not ensuring that contractors sign the asbestos register to confirm that they are aware of it.
1617-076 - Legionella - Housing & Property - Owen Buckwell		3	3		6	1	4	NAT	1	0	Limited assurance	Testing highlighted 3 high risk exceptions. These related to incomplete risk assessments, monitoring schedules not being in place at certain sites and works highlighted by risk assessments not being completed.
1617-094 - Repairs & Maintenance - MMD - Mark Willcox/ Chris Ward/ Mike Sellers		2			2	0	1	0	1	0	Limited assurance	Two high risk exceptions were raised, one related to MMD not recording what preventative maintenance is carried out on its assets. The second was raised as MMD are not recording sufficient repairs data to identify assets past their useful economic life.

Audit Title	Critical Risk	High Risk	Medium Risk	Low Risk - Improvement	Total Exceptions	Internal Control Environment	Compliance	Safeguarding of Assets	Effectiveness of Operations	Reliability & Integrity	Audit Assurance	Summary
1617-121 - Asset Register & Valuation - Housing & Property - Owen Buckwell		1	1		2	0	1	0	1	NAT	Limited assurance	One high risk has been raised in relation to information held on the Geographic Information System (GIS) not being up to date and not reflecting the current position of the assets eg leased, sold or owned.
1617-122 - Milton Park Primary - External		3	2		5	2	1	1	0	1	Limited assurance	The full audit has resulted in 3 high risk and 2 medium risk exceptions. The high risk exceptions relate to evidence of Governing Body involvement and approval of SFVS, non declaration of pecuniary interest for the Head teacher and weak inventory controls.
1617-091 MMD - Quay Operations - Warehousing - MMD - Mark Willcox/ Chris Ward/ Mike Sellers					0	NAT	NAT	1	1	1	Limited assurance	Three high risk exceptions have been raised relating to lack of recording of financial claims against MMD, orders being packaged not being signed off, no formal documented process for the order that vehicles are loaded.
1617 - 058 - Performance Management - Human Resources, Legal & Performance - Jon Bell		1	1			2	NAT	NAT	NAT	0	Limited assurance	2 high risk exceptions raised. One related to a lack of performance reports submitted from 18% (2) Directorates in the 3 quarters of 2016/17. The second relates to performance management format not directly linking to the Councils overall objectives while also not having executive ownership.
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Audit Title	Critical Risk	High Risk	Medium Risk	Low Risk - Improvement	Total Exceptions	Internal Control Environment	Compliance	Safeguarding of Assets	Effectiveness of Operations	Reliability & Integrity	Audit Assurance	Summary	
1617-081 - Printing Shared Service - Community & Communication - Lou Wilders		1			1	0	1	0	0	NAT	Reasonable Assurance	One high risk exception was raised as testing found that the quarterly reviews of jobs were not being undertaken and therefore the Authority was not able to evidence value for money was being achieved.	
1617-085 Port IS - Access Controls - Port - Mike Sellers			2		2	0	NAT	1	1	0	Reasonable Assurance	Two medium risks were highlighted as a result of this review. One relates to disabling of user accounts long after employees had left the organisation, in addition to a lack of formalised processes surrounding the disablement of 'super-user' or administrator accesses when they leave. The other exception relates to some staff not receiving adequate IT/IS training and guidance as part of their formal induction upon starting employment.	
1617-086 - Pilotage - Port - Mike Sellers		1			1	NAT	1	0	0	NAT	Reasonable Assurance	One high-risk exception was raised as there had been no formal key performance indicator monitoring for the port's pilotage contract with ABP since February 2016, which is contrary to section 4 of the Contract Management Rules.	
1617-060 - Solicitors fees & Court Costs - Human Resources, Legal & Performance - Jon Bell		1	1		2	NAT	NAT	NAT	2	NAT	Reasonable Assurance	One high risk exception was raised as a result of this review. The high risk exception related to purchase orders not being raised in advance of invoices being received.	
1617-069 - Rents & Housing Hardship Fund - Housing & Property - Owen Buckwell			1		1	NAT	0	NAT	1	0	Reasonable Assurance	One medium risk exception has been raised in relation to action taken to address rent arrears on two customer accounts.	
1617-035 - Housing & Council Tax Benefits - Community & Communication - Lou Wilders		1			1	0	0	NAT		1	NAT	Reasonable Assurance	1 high risk exception was raised as testing found that in 2 of 12 instances where entitlement to Housing Benefit was found to be incorrect the corrective action had not been taken.
1617-052 - E-Business - Finance & Information Service - Chris Ward			3		3	3	NAT	NAT	0	NAT	Reasonable Assurance	Three medium risk exceptions were identified during the audit. The first exception highlighted weak governance surrounding EBS change controls.	
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Audit Title	Critical Risk	High Risk	Medium Risk	Low Risk - Improvement	Total Exceptions	Internal Control Environment	Compliance	Safeguarding of Assets	Effectiveness of Operations	Reliability & Integrity	Audit Assurance	Summary
1617-009 - Independent Reviewing & Child Protection - Children's Social Care - Alison Jeffery			3		3	0	2	NAT	1	NAT	Reasonable Assurance	Three medium risk exceptions were raised as a result of the review of the dispute resolution process. These all related to insufficient recording practices of whether disputes have been resolved within the Client Case Management system and if they were closed off in a timely manner. The second related to change controls not being compliant with procedures to help ensure the system's integrity is maintained. The last exception highlighted weak access management controls.
1617-106 - Stamshaw Infants - External					0	0	0	0	0	0	Assurance	
1617-073 - Property Design - Housing & Property - Owen Buckwell					0	0	0	NAT	NAT	NAT	Assurance	
1617-105 - Meon Junior - External		1			1	0	1	0	0	0	Assurance	One high risk exception was raised as a result of testing in relation to evidence of Hirers Public Liability Insurance. However, a copy of the Insurance document was provided at the exit meeting.
1617-082 - MFD Canon Contract - Finance & Information Service - Chris Ward					1	0	0	1	0	NAT	Assurance	

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2015/16 Followed Up Audits since the last meeting - High Risk Exceptions	High Risk Open		High Risk Closed		Total High Risk	Comments
Audit Title						
1516-052 - Application Archiving - Finance & Information Service - Chris Ward	1	100%		0%	1	One high risk exception was found to still be open. Solutions are still being investigated regarding the deletion of old data within the Authority's databases.
F1516-00 - IS Application Data Quality and security (Swift) - Adult Social Care - Innes Richens	0	0%	1	100%	1	
F1516-006 - Direct Payments - Adult Social Care - Innes Richens	1	50%	1	50%	2	One high risk exception was found to still be open in relation to timeliness of reviews. A new tracker spreadsheet has been developed but this was not being monitored by the team manager.
F1516-007 - Deprivation of Liberty Safeguards - Adult Social Care - Innes Richens	1	33%	2	67%	3	One high risk exception was found to still be open in relation to referrals not being actioned in line with set timescales. Team capacity will be addressed and closer monitoring of timeliness will be put in place.
F1516-009 - Through Care Team - Children's Social Care - Alison Jeffery	5	100%	0	0%	5	All 5 exceptions remain open. Pre-paid cards are to be brought in and processes around these will be developed.
F1516-025 - Risk Management & Business Planning - Public Health - Jason Horsley	1	100%	0	0%	1	The high risk exception remains open due to the business plans being revisited. Further audit work will be carried out in 2017/18 to review progress of this.
F1516-027 - Hire Cars - Transport, Environment & Business Support - Alan Cufley	0	0%	1	100%	1	
F1516-029 - PCMI Manufacturing - Transport, Environment & Business Support - Alan Cufley	3	60%	2	40%	5	Two of the high risk exceptions still remain open in relation to compliance with the Copyright Act, Design & Patent Act 1998 and separation of duties over cash collection.

F1516-042 - Special Educational Needs & Disabilities (SEND) - Children's Services Education - Alison Jeffery	1	50%	1	50%	2	One of the high risk exceptions has been partially addressed. Performance data with regards to conversion of clients from Special Educational Needs statements to Education & Health Care Plans was not obtainable at the time of the follow-up but was to be provided by the end of March 2017.
F1516-043 - Children with Disabilities - Children's Services Education - Alison Jeffery	1	100%	0	0%	1	One of the high risk exceptions has been partially addressed in relation to recording of information within the Client Case Management system. The Team Manager will address this by reinforcing the processes with the team.
F1516-082 - CCTV - Housing & Property & Corporate Wide - Owen Buckwell	3	75%	1	25%	4	3 high risk exceptions were found to be in progress. Follow-up testing found that the CCTV Code of Practice had been written but yet to be published, training and improved signage had been implemented and viewing of CCTV footage restricted, with privacy impact assessments still to be completed. A Senior Responsible Officer is yet to be appointed.
Total	17	65%	9	35%	26	

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2015/16 Followed Up Audits since the last meeting - Medium Risk Exceptions	Medium Risk Open		Medium Risk Closed		Total Medium Risk
Audit Title					
F1516-009 - Through Care Team - Children's Social Care - Alison Jeffery	1	100%	0	0%	1
F1516-027 - Hire Cars - Transport, Environment & Business Support - Alan Cufley	1	100%	0	0%	1
F1516-043 - Children with Disabilities - Children's Services Education - Alison Jeffery	1	50%	1	50%	2
F1516-082 - CCTV - Housing & Property and Corporate Wide - Owen Buckwell	1	50%	1	50%	2

Total	4	67%	2	33%	6
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Audit Plan	Project Name Full Audits	Last Audited (within 5 years)	Last Audit Opinion/reasoning for inclusion	
PCC Audit Plan 2017/18	PCC1718-001 ASC - Governance Framework for integration/ joint working/ partnership arrangements (PCC/ CCG & other health partners)	New	New area risks around delivery and decision making due to differing operating & governance structures.	ASC - Adult Social Care
PCC Audit Plan 2017/18	PCC1718-002 ASC - Learning Disabilities Spend	New	Significant pressures on budget and service delivery	
PCC Audit Plan 2017/18	PCC1718-003 ASC - Out City placements	Older than 5 years	Significant pressures on budget and service delivery	
PCC Audit Plan 2017/18	PCC1718-004 ASC - Domiciliary Care	2014/15	Contract review, significant area of expenditure	
PCC Audit Plan 2017/18	PCC1718-005 CSC - Through Care Team (0-25)	2016/17	No Assurance. Risks identified not mitigated since 15/16. Changes in staffing	CSC - Children Social Care
PCC Audit Plan 2017/18	PCC1718-006 CSC - Troubled Families Grant	2016/17	Annual Grant Sign off	
PCC Audit Plan 2017/18	PCC1718-007 CSC - Allowances - Fostering Allowances or Special Guardianship Allowances	Allowances not previously covered	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-008 CSC - Family Support - Children in Need	2014/15	Limited Assurance. Non compliance with procedure	
PCC Audit Plan 2017/18	PCC1718-072 CSC - Residential Units	2013/14	Limited Assurance previously given. Diminished control compliance and risks of cash handling.	CDC - City Development & Culture
PCC Audit Plan 2017/18	PCC1718-009 CDC - Revenue Clients	New	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-010 CDC - Marketing and Tourism	New	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-011 CDC - Licensing & Enforcement	2015/16	Regulatory Service	
PCC Audit Plan 2017/18	PCC1718-012 CDC - Merchandise, Stock, Retail	New	No previous audit reviews unknown control framework	C&C - Community & Communication
PCC Audit Plan 2017/18	PCC1718-013 C&C - Cashiers	2016/17 (part of unit reviews)	Limited Assurance. Annual audit at various cash collection sites	
PCC Audit Plan 2017/18	PCC1718-014 C&C - Data Sweeps	2016/17	Limited Assurance. Annual data sweep in relation to Information Governance	
PCC Audit Plan 2017/18	PCC1718-015 C&C - Information Governance Data Sharing	New	No previous audit reviews unknown control framework risks associated with Data Protection	
PCC Audit Plan 2017/18	PCC1718-016 C&C - City Helpdesk	New	No previous audit reviews unknown control framework	FIS - Finance & Information Services
PCC Audit Plan 2017/18	PCC1718-017 C&C - Publicity and Advertising	New	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-018 C&C - Social Media	New	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-071 C&C - Covert Surveillance of Social Networking sites	New	Change in legislation and increased risk of breach of Human Rights Act	
PCC Audit Plan 2017/18	PCC1718-019 C&C - Council Tax and NNDR	2016/17	Limited Assurance. Annual audit	FIS - Finance & Information Services
PCC Audit Plan 2017/18	PCC1718-020 C&C - Housing & Council Tax Benefits	2016/17	Reasonable Assurance. Annual audit	
PCC Audit Plan 2017/18	PCC1718-021 FIS - Accounts payable	2016/17	Limited Assurance. Annual audit	
PCC Audit Plan 2017/18	PCC1718-022 FIS - Accounts receivable	2016/17	Limited Assurance. Annual audit	
PCC Audit Plan 2017/18	PCC1718-023 FIS - Purchase Cards	2016/17	Limited Assurance. Annual audit	
PCC Audit Plan 2017/18	PCC1718-024 FIS - Payroll/ Pension	2016/17	Limited Assurance. Annual audit	
PCC Audit Plan 2017/18	PCC1718-025 FIS - Treasury Management	2016/17	Full Assurance. Annual audit required due to the monetary values involved.	
PCC Audit Plan 2017/18	PCC1718-026 FIS - General Ledger, Main accounting and budget monitoring	2016/17	Limited Assurance. Annual audit	
PCC Audit Plan 2017/18	PCC1718-027 FIS - Grants	2016/17	Various Grants for sign off	
PCC Audit Plan 2017/18	PCC1718-028 FIS - iExpenses	2016/17	Limited Assurance. Annual audit, change in processes to automated from manual	
PCC Audit Plan 2017/18	PCC1718-029 FIS - Data Archiving	2015/16	No Assurance. Data Protection compliance.	

PCC Audit Plan 2017/18	PCC1718-030 FIS - IT Procurement, inventory & disposal	Scope not previously covered	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-031 FIS - Email and Internet Security	New	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-032 FIS - Disaster recovery/Business Continuity	Older than 5 years	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-033 HRLP - Strategic Project Management	2014/15	Scope to review corporate oversight & direction	HRLP - HR, Legal and Performance
PCC Audit Plan 2017/18	PCC1718-034 HRLP - Absence management	2012/13	Limited Assurance. Scope to include reliability of data.	
PCC Audit Plan 2017/18	PCC1718-035 H&P - Rent Income	2016/17	Reasonable Assurance. Annual audit due to level of income	H&P - Housing & Property
PCC Audit Plan 2017/18	PCC1718-036 H&P - Parking Space & Garage Management	New	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-037 H&P - Sheltered Housing	2015/16	Limited Assurance. Issues identified around the effectiveness of the control framework for cash handling	
PCC Audit Plan 2017/18	PCC1718-038 H&P - Under Occupation	New	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-039 H&P - Youth Centres/ Community Centres	Older than 5 years	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-040 H&P - Repairs and Service Charges to Leaseholders	2014/15	Scope to include repair program and costings.	
PCC Audit Plan 2017/18	PCC1718-042 H&P - Maintenance Repairs	2014/15	Significant costs & high level transactions	
PCC Audit Plan 2017/18	PCC1718-044 H&P - Legionella	2016/17	Limited Assurance. Annual audit	
PCC Audit Plan 2017/18	PCC1718-045 H&P - Carbon Reduction Scheme	2016/17	Annual sign off required	
PCC Audit Plan 2017/18	PCC1718-046 PORT - Income Dues Brittany	2014/15	Rolling programme of main Port clients	PORT - Portsmouth International Port
PCC Audit Plan 2017/18	PCC1718-047 PORT - Income Dues Condor	2015/16	Rolling programme of main Port clients	
PCC Audit Plan 2017/18	PCC1718-048 PORT - Port Maintenance	New	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-049 PORT - Ships Services	New	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-050 CDC - Emergency and BC Planning	2013/14	Limited Assurance	CDC - City Development & Culture
PCC Audit Plan 2017/18	PCC1718-051 CDC - Sea Defences and drainage	2014/15	Assurance. Scope to include project oversight and delivery	
PCC Audit Plan 2017/18	PCC1718-052 REG - Local Sustainable Transport Fund LSTF Grant- Active Travel & My Journey Portsmouth Active Travel	New	Grant sign off	REG - Regeneration
PCC Audit Plan 2017/18	PCC1718-053 REG - Enterprise Centres	New	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-053 REG - SIM card inventory & stock control	New	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-054 PUBH - Mental Health	New	No previous audit reviews unknown control framework	PUBH - Public Health
PCC Audit Plan 2017/18	PCC1718-055 PUBH - Business Planning & Risk Management	New	No previous audit reviews unknown control framework	
PCC Audit Plan 2017/18	PCC1718-056 EXT - Devonshire Infants	2014/15	Assurance	EXT - External Client
PCC Audit Plan 2017/18	PCC1718-057 EXT - Harbour	New	Full audit to be conducted	
PCC Audit Plan 2017/18	PCC1718-058 EXT - Mayfield	2013/14	Limited Assurance	
PCC Audit Plan 2017/18	PCC1718-059 EXT - Northern Parade	2014/15	Assurance	
PCC Audit Plan 2017/18	PCC1718-060 EXT - Wimbourne Junior	2014/15	Assurance	
PCC Audit Plan 2017/18	PCC1718-061 EXT - St George's	2014/15	Assurance	
PCC Audit Plan 2017/18	PCC1718-062 EXT - Meon Infant	2014/15	Limited Assurance	
PCC Audit Plan 2017/18	PCC1718-069 EXT - Langstone Harbour Board	2016/17	Annual accounts review.	
	Audit title - Follow Up Audits			
PCC Audit Plan 2017/18	1617-002 ASC - Adult Residential Units			

PCC Audit Plan 2017/18	1617-005	ASC - Adult Safeguarding Board
PCC Audit Plan 2017/18	1617-007	ASC - Better Care Fund (Section 75)
PCC Audit Plan 2017/18	1617-008	ASC - Appointeeship
PCC Audit Plan 2017/18	1617-010	CSC - Child sexual exploitation and missing persons
PCC Audit Plan 2017/18	1617-014	CSC - Multi Agency Safeguarding Hub
PCC Audit Plan 2017/18	1617-015	CSC - Legal Privilege (Public Law Outline)
PCC Audit Plan 2017/18	1617-023	CDC - Museums and Visitor Services
PCC Audit Plan 2017/18	1617-022	CDC - Safety Signage
PCC Audit Plan 2017/18	1617-024	CDC - Cemeteries
PCC Audit Plan 2017/18	1617-030	C&C - Lord Mayors Office
PCC Audit Plan 2017/18	1617-026	PBH - Wellbeing Service
PCC Audit Plan 2017/18	1617-033	C&C - Traded Services
PCC Audit Plan 2017/18	1617-037	CSE - Music Services
PCC Audit Plan 2017/18	1617-115	CSE - Attendance Monitoring
PCC Audit Plan 2017/18	1617-045	FIS - Capital accounting
PCC Audit Plan 2017/18	1617-051	FIS - VAT
PCC Audit Plan 2017/18	1617-056	FIS - Access Controls, Database Access
PCC Audit Plan 2017/18	1617-058	HLP - Performance Management
PCC Audit Plan 2017/18	1617-077	H&P - Green and Clean
PCC Audit Plan 2017/18	1617-078	H&P - Municipal Waste Management
PCC Audit Plan 2017/18	1617-066	RCS - Animal Health & Licensing
PCC Audit Plan 2017/18	1617-067	RCS - Community Funerals
PCC Audit Plan 2017/18	1617-070	H&P - Resident Development
PCC Audit Plan 2017/18	1617-071	H&P - Commercial Rents
PCC Audit Plan 2017/18	1617-072	H&P - Emergency Procedures
PCC Audit Plan 2017/18	1617-075	H&P - Asbestos
PCC Audit Plan 2017/18	1617-081	C&C - Printing Shared Service
PCC Audit Plan 2017/18	1617-083	HLP - Spend on Staffing Off Contract
PCC Audit Plan 2017/18	1617-086	PRT - Pilotage
PCC Audit Plan 2017/18	1617-087	PRT - Port CCTV
PCC Audit Plan 2017/18	1617-090	TEB - Community Learning
PCC Audit Plan 2017/18	1617-093	MMD - Insurance & Claims
PCC Audit Plan 2017/18	1617-094	MMD - Repairs & Maintenance
PCC Audit Plan 2017/18	1617-116	EXT - Craneswater
PCC Audit Plan 2017/18	1617-117	EXT - Medina Primary
PCC Audit Plan 2017/18	1617-120	H&P - Compliance with Fire Policy
PCC Audit Plan 2017/18	1617-121	H&P - Asset Register & Valuation
PCC Audit Plan 2017/18	1617-052	FIS - E-business
PCC Audit Plan 2017/18	1617-074	H&P Lifts & Mechanical Plant
PCC Audit Plan 2017/18	1617-062	HLP Recruitment & Vetting of staff

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