

Appendix B - Internal corporate governance controls for 2014

Ref	2012/13 Control	2013/ 14 Control	Policyholder/s	Compliance Measures	Compliance Monitoring	Guidance and Support Tools
1	All services have a business plan that reflects the vision of the authority, is actively managed with at least the relevant SD quarterly, and published annually on 31 March.	All services have a business plan that reflects the vision of the authority; meets a minimum set of standards; is actively managed; and is refreshed and published at least annually.	Paddy May/ Kelly Nash	<p>-All services must produce a three year business plan, subject to a refresh on at least an annual basis, which includes the following core elements:</p> <ul style="list-style-type: none"> <li>- The core business that must be delivered and the relevant standards and measures of performance, with reference to relevant benchmarks and comparators</li> <li>- Plans for improvement, development and disinvestment activity (including sector-led improvement) over a three year period based on the key aims set out in the council plan, financial planning, and performance and financial benchmarking activity</li> <li>- Arrangements for addressing key governance issues</li> <li>- Key service risks and management/mitigation activities</li> <li>- Arrangements for robust performance management within the services</li> </ul> <p>-All services must produce an up-to-date summary business plan which sets out:</p> <ul style="list-style-type: none"> <li>- The core service activities to be delivered, and the performance standards/measures</li> <li>- The key change/development projects for the service, with outcomes to be achieved and the key milestones</li> <li>- Key governance issues to be addressed, how and on what timeframe</li> <li>- Key risk issues to be addressed, how and on what timeframe</li> </ul> <p>-All services must share their draft business plan with their Strategic Director before it is finalised.</p> <p>-All services must ensure their business plan is formally approved by the relevant Portfolio Holder at the first portfolio meeting of the municipal year.</p>	<p>-Heads of Service must regularly monitor the performance of the Business Plan with their Strategic Director on a quarterly basis, their Departmental Management Team and Service Management Teams on a regular basis.</p> <p>-Services will be asked to collate the minimum business planning requirements and share the information with their DMT's in March 2014. SD's will be required to sign off the content before it is presented to Cabinet Members.</p> <p>-Policy Holder to check publication of signed business plan on an annual basis and relay and inform Strategic Directors if there are any compliance issues.</p>	<p>-Guidance notes for Heads of Service.</p> <p>-Support and guidance from the strategy unit on request.</p> <p>-Summary business plan template.</p> <p>-Performance monitoring template.</p>
2	Risk is regularly reviewed and tangible mitigation measures are in place and regularly tested.	Risk is regularly reviewed and tangible mitigation measures are in place and regularly tested.	Lyn Graham/ Frank Regan	<p>-All services must have a mechanism for identifying and assessing risk on a continuous basis</p> <p>-All new risks must be reported to SD's with immediate effect</p> <p>-All significant risks must be logged on the significant risk register and ranked as high, medium or low</p> <p>-All risks must be recorded in assurance categories and assurance must be available in the form of evidence that can be verified</p> <p>-100% of staff should read the risk management policy</p> <p>-E-learning on risk management should be completed as part of induction and every three years thereafter by all staff</p>	<p>-Risks to be considered at DMT's, meetings with portfolio holders, one to ones and any other meetings held to discuss service performance, objectives, progress, new decisions, options, changes in working practices and legislation</p> <p>-Internal audit will report to SDB and G&amp;A&amp;S within relevant timing of the risks on mitigation with either assurance or alerting to weaknesses in actions</p> <p>-Internal audit will carry out annual audits on assurance and effectiveness of RM procedures</p> <p>-Managers to monitor completion of training through the annual PDR process.</p>	<p>-Risk policy (which includes examples of questions to consider when assessing risks</p> <p>-One page briefing note on employee responsibilities and risk available through policyhub and Intralink</p> <p>-E-learning on risk management</p> <p>-Significant risk register (held by audit).</p> <p>-Risk alert forms available on intralink for staff to report risks to their manager</p>
3	All individuals (including volunteers/temporary posts) working with children and adults require an enhanced criminal records check prior to appointment in line with PCC's disclosure and barring policy.	All posts that fall within the legislation must be checked in line with the Disclosure and Barring service guidelines.	Jon Bell/ Gemma Limburn	<p>-All recruiting managers must adhere to the Council's Disclosure and Barring Service Policy. When a post is engaged in regulated activity with either children or adults, an enhanced DBS needs to be completed. Other posts may require a standard disclosure. The correct level of DBS must be completed during the recruitment process.</p> <p>-All Managers and staff involved in recruitment and selection of staff in areas where there is vulnerability are required to undertake 'Safer Recruitment' training and that 'safer recruitment' practices are mandatory in those areas.</p>	<p>-All eligible posts working with children and adults can be checked on a rolling programme. Each service may choose how to implement this.</p> <p>-Managers to monitor completion of safer recruitment training through MLE.</p>	<p>-Disclosure and Barring Policy (Policyhub)</p> <p>-Policyholders will receive email notification of any legislative/process changes.</p>

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4	All staff adhere to clear desk and clear screen practices related to sensitive/personal information.	All staff must adhere to the clear desk and clear screen policy wherever they are working and ensure that sensitive/personal information is appropriately secured when travelling to/from work.	Peter Harding/ Helen Magri	-All staff must adhere to the Clear Desk Clear Screen Policy.	-Heads of Service are responsible for ensuring that spot checks are carried out at least every 6 months. Managers must record any non-compliance and escalate issues to the Head of Service and Information Governance Group. Audit may carry out adhoc spot check to test that managers are undertaking checks/enforcing this policy. Staff found to have breached this policy, may be subject to PCC's disciplinary procedure. If a criminal offence is considered to have been committed further action may be taken to assist in the prosecution of the offender(s).	-Clear Desk, Clear Screen Policy (Policyhub) -Data Protection Policy (Policyhub) -Default screen lock (set to 15 seconds)
				-All staff must read the Information Security Policy on an annual basis.	-Policyhub will send reminders to staff to read the Policy. Staff must confirm that they have read the Policy.	
				-All staff must read the Data Protection Policy on an annual basis.		
5	All services understand our legal equalities duties, and embed them as part of service projects and plans.	The Council understands its legal equalities duties, and embed them as part of service projects and plans.	James Sandy/ Iwona Defer	-All new members of staff must complete the one day introductory Equalities and Diversity course within their probationary period.	-Managers to monitor completion of equalities training through PDR's and MLE.	-Guidance on the Equality Act 2010 and equalities duty. -Advice and guidance from the equalities team -Corporate consultation process -Equalities and Diversity Strategy -EIA toolkit -EIA forms
				-All employees must complete the Equalities and Diversity e-learning Health Check on MLE every 3 years. If employees do not pass the healthcheck they will be required to attend either the half-day refresher workshop, or an hour-long briefing. Training requirements should be discussed during staff PDR's.		
				-Heads of Service must ensure that Equality Impact Assessments (EIA's) are carried out on all major services and functions of the council, and all projects and policies to assess any potential adverse implications for some of our staff, residents and visitors. All EIAs must be sent to E&D Team for quality assurance at least two weeks prior to decision meetings.	-The Equalities and Diversity Team will monitor completion of EIAs and chase where appropriate. Non-compliance issues will be escalated to SD's.	
6	All services have business continuity plans in place that are regularly tested and reviewed.	All services have business continuity plans in place that are regularly tested and reviewed.	Kate Scott	-All services must have a business continuity plan in place, which includes: Key service outputs, Resources required to maintain key service outputs, along with outline response options to ensure continuity of key service outputs.	-Each service must have a business continuity representative responsible for producing and maintaining the plan(s).	-Business continuity plan template -Log of table-top exercise activity (kept by Policyholder).
				-Business continuity plans need to be revised every 3 years, following recommendations from table top exercises or after a significant service change i.e. restructure/change in personnel.	-All services must take part in a table top exercise to test the robustness and quality of the business continuity plan within one year of the plan being developed and every 3 years thereafter. The Policyholder must complete a debrief report following any exercise.	
				-The key service outputs and resource requirements that have been identified within each service business continuity plan must be used to inform the Corporate Business Continuity Plan.		
7	Complaints are dealt with in a timely manner, responded to effectively, and outcomes recorded.	Complaints are responded to within a timely manner, causes addressed, and outcomes recorded.	Peter Harding/ Carole Cunningham	-All complaints are must be logged and responded to within the designated timescales i.e. 10 working days for a first-stage complaint, 15 working days for a second-stage complaint and 20 working days for a third-stage complaint.	-Corporate Complaints must send reminders to Heads of Service when responses are overdue.	-Corporate Complaints Policy (Policyhub) -Adults' Social Care Complaints Guidance -Children's Social Care Complaints Guidance
				-Regular training must be carried out, to ensure that employees deal with complaints in line with the statutory procedure set.	-An Annual Complaints report must be submitted to the Governance, Audit and Standards Committee	
				-Heads of Service must review complaints on a quarterly basis and ensure that any underlying process issues are addressed.	-Complaints statistics (number of complaints received/number of complaints responded to within timescales/number of complaints closed by service area) are compiled on a quarterly basis and discussed through DMT's in line with performance monitoring.	

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8	100% staff are given good quality PDRs, and training needs are sent to HR	100% of staff are given good quality PDRs and any actions resulting from the PDR must be completed within agreed timescales.	Jon Bell/ Gemma Limburn	-100% of employees receive a good annual PDR.	-Managers must monitor when staff PDR's are due and ensure that they take place on an annual basis. -MLE will alert staff when their PDR has expired. -The Line Manager of the Manager completing the PDR must sign off the PDR and in doing so confirm that it is of good quality. The Line Manager's Manager must sign off the PDR and in doing so confirm that it is of good quality.	-PDR template -PDR development tools
				-Employee development needs and mandatory training needs are captured through PDR's and an action plan to address key needs is put in place.	-MLE will alert staff when mandatory training needs (Welcome to PCC, People First, Health check for Information Governance, Health and Safety - DSE, Health and Safety - Fire Safety, Equality and Diversity Health check, Financial Rules), are due to expire.	
9	100% staff complete the annual code of conduct and return to manager. Managers have procedures for dealing with misconduct.	100% of staff complete the code of conduct form on joining the Council and notify managers if there are any changes.	Jon Bell/ Gemma Limburn	-All new employees must complete and return a code of conduct form during the recruitment and induction process and check that there are no changes to declarations on an annual basis.	-Managers must check if there have been any changes to the code of conduct during the annual PDR process. A new form only needs to be completed if there are changes/additional declarations made to the previously submitted annual code of conduct form. Any changes must be noted on the PDR form and returned to HR.	-Employee code of conduct form
					-Policyhub will send a copy of the code of conduct to all staff on an annual basis. Staff must confirm that they have read the form.	

## Supporting Information

- CIPFA/SOLACE good governance principles

1. We focus on the purpose of the Authority and on outcomes for the community and implementing a vision for the local area. (covered by control 1)
2. Members and officers work together to achieve a common purpose with clearly defined functions and roles. (covered in the constitution)
3. We promote values for the authority and demonstrate the values of good governance through upholding high standards of conducts and behaviour. (covered by control 8)
4. We take informed and transparent decisions, which are subject to effective scrutiny and managing risk. (covered by control 2)
5. We develop the capacity and capability of members and officers to be effective. (consider introducing a control that supports this principle)
6. We engage with local people and other stakeholders to ensure robust public accountability. (consider introducing a control that supports this principle)

- Corporate Guiding Principles

1. Put customers first (covered by control 7)
2. Provide value for money (covered by control 1)
3. Be ambitious (covered by control 1)
4. Use evidence to shape services (covered by control 1)
5. Simplify, strengthen and share processes (covered by control 7)
6. Get it right first time (covered by control 7)
7. Support councillors as strategic leaders (consider introducing a control that supports this principle)
8. Value and support staff (covered by control 8)
9. Listen and learn (covered by control 7)

- Previous Controls

1. Terms of reference for all partnerships and portfolio holders (do not re-introduce - this is clear in the constitution)
2. All services take into account safeguarding duties for both adults and children (do not re-introduce - control 3 should cover this)
3. Ensure all staff adhere to our ways of working (do not re-introduce - control 8 should cover this)
4. What systems do you have in place for recording and monitoring health and safety issues? All staff completed compulsory training (do not re-introduce - control 8 should cover this)
5. Services with buildings are reducing their carbon emissions in line with corporate target (consider re-introducing)
6. All services provide value for money (do not re-introduce - control 1 should cover this)
7. Discussions with category manager before making a decisions on a new contract (do not re-introduce - business as usual)
8. Contract outcomes should be monitored to ensure they are delivering what they should be. (do not re-introduce - business as usual)
9. 100% completion of info governance/anti-fraud/bribery/financial rules training by all officers. Audit spot checks highlight 100% compliance (do not re-introduce - control 8 should cover this)
10. Do you have a community engagement plan? What methods do you use to engage with users? (consider re-introducing)
11. Do you respond to Fol requests within legal timescales? (do not re-introduce - business as usual)
12. Information published on website in line with Scheme of Publication and kept up to date (do not re-introduce - this is clear in the constitution)

## Key Themes

Support Members

Effective engagement

Reducing carbon emissions