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Date: 4th March 2015

Dear Sir/Madam,

A meeting of the **Audit Committee** will be held in the **Sirhowy Room, Penallta House, Tredomen, Ystrad Mynach** on **Wednesday, 11th March, 2015** at **10.00 am** to consider the matters contained in the following agenda.

Yours faithfully,

A handwritten signature in blue ink that reads 'Chris Burns'.

Chris Burns
INTERIM CHIEF EXECUTIVE

AGENDA

| | Pages |
|---|-------|
| 1 To receive apologies for absence. | |
| 2 Declarations of Interest. Councillors and Officers are reminded of their personal responsibility to declare any personal responsibility to declare any personal and/or prejudicial interest(s) in respect of any item of business on this agenda in accordance with the Local Government Act 2000, the Council's Constitution and the Code of Conduct for both Councillors and Officers. | |

To approve and sign the following minutes: -

| | |
|--|-------|
| 3 Audit Committee held on 10th December 2014 (minute nos. 1 - 11). | 1 - 6 |
|--|-------|

To receive and consider the following reports: -

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| | | |
|--|---|---------|
| 4 | Business Continuity Management. | 7 - 10 |
| 5 | Regulation of Investigatory Powers Act 2000 (RIPA). | 11 - 14 |
| 6 | Update on the Numbers of Complaints Received Under The Council's Corporate Complaints Policy. | 15 - 20 |
| 7 | Procedure Relating to School Based Complaints. | 21 - 24 |
| 8 | Caerphilly County Borough Council Partnerships and Collaborations Update. | 25 - 30 |
| 9 | Internal Audit Services Annual Audit Plan. | 31 - 40 |
| 10 | Internal Audit Services Action Plan. | 41 - 44 |
| To receive and note the following information items*:- | | |
| 11 | Officers Declarations of Gifts and Hospitality. | 45 - 50 |
| 12 | Audit Committee Forward Work Programme. | 51 - 54 |
| 13 | Minutes of the Corporate Governance Review Panel - 21st November 2014. | 55 - 56 |

**If a member of the Audit Committee wishes for any of the above information reports to be brought forward for discussion at the meeting please contact Charlotte Evans, 01443 864210, by 10.00 a.m. on Tuesday 10th March 2015.*

Circulation:

Councillors Mrs E.M. Aldworth, Mrs K.R. Baker, D.G. Carter, N. Dix, J.E. Fussell, N. George, D. Havard (Vice Chair), C. Hawker, S. Morgan, Mrs G.D. Oliver, J.A. Pritchard and D. Rees (Chair)

Lay Member – Mr N.D. Yates

Auditors - Ms S.J. Byrne (PriceWaterhouseCoopers LLP), Mr I. Davies (PriceWaterhouseCoopers LLP), Mrs L. Pamment (PriceWaterhouseCoopers LLP), Ms J. Joyce (Wales Audit Office) and Ms N. Jenkins (Wales Audit Office)

And Appropriate Officers.



AUDIT COMMITTEE

MINUTES OF THE MEETING HELD AT PENALLTA HOUSE, TREDOMEN, YSTRAD MYNACH ON WEDNESDAY 10TH DECEMBER 2014 AT 10.00 AM

PRESENT:

Councillor D. Rees - Chair
Councillor D. Havard - Vice Chair

Councillors:

N. Dix, C. Hawker, N. George, S. Morgan and J.A. Pritchard

Lay Member - Mr N. Yates

Together with:

G. Williams (Interim Head of Legal Services and Monitoring Officer), L. Jones (Acting Head of ICT and Customer Services), R. Harris (Internal Audit Manager), Jackie Dix (Policy & Research Manager), R. Roberts (Performance Manager), J. Morgans (Customer Services & Performance Co-Ordinator) and C. Evans (Committee Services Officer)

Also present:

Ian Davies (PricewaterhouseCoopers)

1. APOLOGIES

Apologies for absence were received from Councillors Mrs E.M. Aldworth, Mrs K. Baker, D. Carter, J. Fussell and Mrs G.D. Oliver.

2. DECLARATIONS OF INTEREST

There were no declarations of interest made at the beginning or during the course of the meeting.

3. MINUTES - 10TH SEPTEMBER 2014

RESOLVED that the minutes of the meeting of the Audit Committee held on 10th September 2014 (minute nos. 1 - 17) be approved as a correct record and signed by the Chair.

REPORTS OF OFFICERS

Consideration was given to the following reports.

4. REGULATION OF INVESTIGATORY POWERS ACT (RIPA) 2000

G. Williams, Interim Monitoring Officer, provided Members with an overview of the report, which highlighted the number of covert operations undertaken by the Council in accordance with the provisions of the Regulation of Investigatory Powers Act 2000.

It was reported that there was one RIPA operation undertaken by the Authority for the period September to October 2014.

A Member sought further information around RIPA operations in relation to Trading Standards and it was confirmed that there are circumstances where one approval includes the investigation of multiple premises. It was confirmed that in all cases operations are only commenced following receipt of intelligence from appropriate sources.

Members thanked the Officer for the report and noted its contents.

5. PROCEDURE RELATING TO SCHOOL BASED COMPLAINTS

Members agreed to defer this item to a future meeting.

6. SOCIAL SERVICES REPRESENTATIONS AND COMPLAINTS PROCEDURE ACTIVITY

The Council's Customer Services & Performance Co-Ordinator, Social Services provided the Audit Committee with information on the operation of the Social Services Directorate's Representations and Complaints Procedure and the subsequent reporting processes.

The Welsh Government introduced new Guidance on the handling of complaints by Social Services Directorate's across Wales in August 2014. The guidance replaces previous guidance and supports the implementation of the Social Services Complaints Procedure (Wales) Regulations 2014 and Representations Procedure (Wales) Regulations 2014.

The revised procedure has 3 stages for complaints, and enables complainants to progress their complaints to the Ombudsman following the completion of a Stage 2 investigation. Stage 1 of the process (Local Resolution), most commonly resolves the majority of complaints without a need for formal investigation and staff are required to observe established procedures, timescales and best practice at all times. However, the guidance does allow a complainant to progress their concerns directly to formal stage 2 investigation. Stage 2 (Formal Investigation) complaints are investigated by an externally commissioned Investigating Officer and statutory time limits are in place for completion. The complainant would receive a full response detailing findings, conclusions and recommendations. Stage 3 of the process enables a complainant to progress their issue to the Local Public Services Ombudsman for Wales, if they are not satisfied with the outcome of Stage 2. An investigation would be conducted and results reported to the Local Authority outlining the findings, in cases where the Ombudsman concludes that maladministration has taken place, the report is made public and the Directorate's Customer Services Manager and relevant Operational Managers will attend the Council's Standards Committee and full Council (if applicable) to offer a full explanation, and where necessary the matter is reported to the relevant Scrutiny Committee.

The Audit Committee thanked the Officer for the report and discussion and debate ensued.

Members discussed the complaints process and sought further information and clarification in relation to the Stage 2 investigations in which investigations were closed before completion and whether this has had any financial implications for the Authority. Officers highlighted that these circumstances had arisen in a number of cases and this had resulted in a cost implication of £800 for the Authority. Officers also discussed whether there was any merit in the application of a charge in relation to Stage 2 investigations to prevent this from happening in the future. Members discussed this proposal at length and it was felt that it could have negative implications for the process and could deter complainants from the process, and consequently was not supported by members.

Members raised concerns about the safety of staff, in particular as a result of the sensitivity of the area and queried the systems in place to monitor calls and protect staff. Officers highlighted that currently there are no call recording systems in place but informal arrangements have been implemented to minimise problems. Furthermore members were reminded that there are formal policies in place to support staff. Members were informed that a call recording system has been introduced for Customer Services, and details of this would be provided to Social Services for consideration.

The Audit Committee noted the contents of the report.

7. REGULATOR PROPOSALS FOR IMPROVEMENT PROGRESS UPDATE

The Performance Manager provided Members with an update on the progress against the proposals made by all regulators since the last Audit Committee update in June 2014.

The previous report detailed all the outstanding proposals as at June 2014. Since that time a number of proposals have been addressed and additional proposals, as a result of recent regulator review, have been added to the list. There are currently 45 proposals, made up of 26 outstanding proposals, 6 new proposals and 13 proposals that have been addressed. Members noted that closing the 13 proposals that have been addressed would leave 19 outstanding.

The Review of Management Arrangements following a Homicide Report remains static in reducing proposal numbers and no update has been provided.

The Committee discussed the Review of Management Arrangements following the Homicide Report and raised concerns around an incident in Llanbradach in 2009 and the recent case in Argoed. As no update had been provided, the Committee requested a progress report at the next available meeting.

The Audit Committee thanked the Officer for the detailed report and appendix and requested the risk register be provided in A3 size for future meetings, as A4 is visually difficult to read.

It was moved and seconded that the Audit Committee noted the contents of the report, the progress against the action plan and agreed to close the proposals noted as closed within the appendix. By a show of hands, this was unanimously agreed.

8. ICT SERVICES DISASTER RECOVERY ARRANGEMENTS

L. Jones, Acting Head of ICT and Customer Services, provided the Audit Committee with an information report on the existing ICT Disaster Recovery (DR) arrangements that are in place within the Council and how these arrangements were invoked to restore services following an incident in August. The report included the review process, which forms part of the Disaster Recovery arrangements, and ensures that such experiences and interruptions are used as a learning tool to improve existing plans and mitigate risk of future similar occurrences.

Members noted the Council's existing ICT DR Plan and arrangements how they were utilized to recover ICT systems, as quickly as possible following the incidents, which interrupted the provision of ICT Services in August 2014.

The Council has in excess of 500 ICT applications in use throughout all Service Areas, which range from large corporate solutions to smaller niche service applications. As part of the DR arrangements, priorities are assigned to each system depending on the nature of the application.

The Committee noted that The ICT Disaster Recovery arrangements in place are compliant with the ISO 270001 ICT security standard, which includes disaster recovery and are regularly audited by the British Standards. CCBC has now held BSI accreditation for 10 consecutive years.

The Audit Committee thanked the Officer for the report and discussion and debate ensued.

A Member sought clarification on the impact on stored data during the incident in August. Officers confirmed that no data was lost during this incident and assured that back-up systems, which are located at other sites and store copies of all data are in place, however, the systems were not required.

The Committee discussed the impact of the incident on public services such as Libraries and Leisure Centres and it was highlighted that Members had received a number of queries and complaints. Following request, Officers agreed to provide details of the system priorities for future reference.

The Audit Committee noted the report and extended their gratitude to IT Services for the efforts undertaken to ensure that systems were back up and running as quickly as possible.

9. CAERPHILLY COUNTY BOROUGH COUNCIL PARTNERSHIP AND COLLABORATIONS

The Policy and Resources Manager provided the Audit Committee with an update report on the Council's (CCBC) Collaboration and Partnership Protocol, twelve-month action plan and Partnership Governance Toolkit, following its endorsement by Cabinet.

Following recommendation by the Wales Audit Office, an exercise commenced in October 2013 to identify partner organisations, significant partnerships and collaborations, which revealed a total number of significant partner organisations for CCBC as 146, with 35 formal partnerships, 25 collaborations and CCBC leading in 8 of the collaborative arrangements. It was noted that quarterly review through Heads of Service would be conducted on the list and steps are now being undertaken to implement the twelve-month action plan for ensuring robust partnership working, on which Members observations are welcome.

The Officer highlighted the monitoring process, which would be conducted through spot checks on the partnerships and collaborations, which has been discussed and agreed by the Corporate Governance Review Panel in November. It was decided that, during January and February 2015, spot checks would be carried out on two of the partnerships and three of the collaborations and the outcomes would be reported back to the Corporate Governance Review Panel, Improving Governance Programme Board and Corporate Management Team (CMT). Further monitoring and spot checks would be conducted through the year, along with quarterly reviews and monitoring of the 12 month action plan, which will be incorporated into the Councils Annual Constitution Review; inform that Corporate Governance Review Panel, Improving Governance Programme Board and Annual Governance Statement, along with an annual summary report to the Audit Committee in June 2015.

The Audit Committee thanked the Officer for the report and discussion and debate ensued.

Members queried the governance aspects in relation to the voluntary organisations and Charities involved in the Council's partnerships and collaborations. The Officer highlighted that the voluntary organisations and charities that the Council is in partnership with are held accountable by the Charity Commission and Charity Law, and are usually registered with Companies House, providing the legal and regulatory framework. The Voluntary Sector Liaison Committee, which brings together key voluntary organisations in partnership working with the Council has also been selected as one of the partnerships for spot checking.

The Audit Committee thanked the Officer for the report and noted the progress made around partnership and collaborative.

10. ANNUAL GOVERNANCE STATEMENT

The Audit Committee was presented with a report, which provided information on the progress made in dealing with the areas for improvement identified during the 2013/2014 process.

As part of the 2013/14 Annual Governance Statement process the following three areas were identified as requiring improvement, the Council's business continuity arrangements, the Interim management arrangements and the timeliness of responses to Freedom of Information and Environmental Information Regulations requests.

To assist with the improvement process and to allow for the monitoring of progress the Annual Governance Review Panel has compiled an action plan. Following updates from the responsible staff at panel meetings the action plan is used to determine progress and to focus on outstanding issues.

The Audit Committee considered the report and appendix, which provided details of the progress made against the recommendations. A Member queried the increase in the numbers of Freedom of Information requests (FOI) received. Officers explained that there was no specific reason for the increase in requests, members of the public are now far more aware of their rights in relation to decisions made by all public bodies, and it was noted that the increased presence in the press could have had an impact. Members noted that all staff were provided with training, however, a smarter approach to responding is required and the training assists with this.

In addition, a Member queried whether or not the Council maintains a public log of all responses to FOI requests, it was confirmed that this has been considered but currently is not recommended by officers. Following consideration and discussion, the Audit Committee noted the report and action plan and progress made to date and Members thanked Officers for including the Committee in the process.

11. INFORMATION ITEMS

The Committee received and noted the following information items:-

- (1) Officers Declarations of Gifts and Hospitality;
- (2) Whistleblowing Policy;
- (3) Forward Work Programme;
- (4) Minutes of Corporate Governance Review Panel – 18th July 2014.

The Chair highlighted that as part of the Scrutiny Improvement Process, Audit Committee have been asked if a Peer Review could be conducted by the Scrutiny Research Officer. The Audit Committee unanimously agreed.

The Chair thanked all the Officers and Members for their attendance and wished them all a Merry Christmas and Happy New Year.

The meeting closed at 11.20 am.

Approved as a correct record and subject to any amendments or corrections agreed and recorded in the minutes of the meeting held on 11th March 2015, they were signed by the Chair.

CHAIR



AUDIT COMMITTEE – 11TH MARCH 2015

SUBJECT: BUSINESS CONTINUITY MANAGEMENT

REPORT BY: CORPORATE DIRECTOR, SOCIAL SERVICES

1. PURPOSE OF REPORT

- 1.1 To update the Committee on business continuity management arrangements within the Council.

2. SUMMARY

- 2.1 This report provides an update on the business continuity management arrangements being implemented across the Council. A three stage process has been implemented incorporating Business Impact Analysis of services, followed by a Risk Assessment and Action Plan where appropriate. A Business Impact Analysis of 255 functions has been undertaken with 238 being subject to a subsequent Risk Assessment. The Risk Assessments have identified 124 functions for which Business Continuity Action Plans have been developed. A task and finish group has been established to address the corporate priorities and arrangements in relation to accommodation and ICT in the event of a business disruption.

3. LINKS TO STRATEGY

- 3.1 Business Continuity Management is a process which supports the delivery of all services and strategies across the organisation.

4. THE REPORT

- 4.1 The Civil Contingencies Act 2004 requires Local Authorities to put business continuity management arrangements in place. This Committee has received a number of updates on the business continuity management arrangements being implemented across the Council including planning in schools and IT disaster recovery arrangements.
- 4.2 The business continuity management process requires services to undertake a Business Impact Analysis in the first instance. This involves the identification of critical services and functions and an assessment of the impacts on the Council if these were disrupted or lost. It includes consideration of the length of time over which a disruption could be managed and the resources required. 255 functions have been subject to a Business Impact Analysis with 238 moving forward to Risk Assessment to identify the potential threats to these critical services.

4.3 In accordance with our Business Continuity Management Strategy our approach involves:

- implementing appropriate measures to reduce the likelihood of incidents occurring and/or reduce the potential effects of those incidents
- taking account of mitigation measures in place
- providing continuity for critical services during and following an incident
- taking account of services that have not been identified as critical.

Services have identified actions to mitigate loss, and to support effectiveness in maintaining the Council's ability to deliver critical service functions. Completion of this organisation wide process has resulted in Business Continuity Action Plans being developed for 124 functions. This is a large body of work that has required significant input from staff across the organisation.

4.4 In analysing services the impact of disruption has been considered in relation to staff, accommodation, specialist equipment, and IT. In the main service managers are able to identify and implement actions to mitigate risks to critical services. However, an organisation wide view is required where services have identified a need in relation to accommodation and IT availability. A task and finish group has been established in order to assess the requirements identified through the Business Continuity Management process and to set out proposals for the prioritisation of accommodation and IT resources as necessary in the event of a business disruption; consideration will also be given to our approach to agile working.

4.5 Service managers are responsible for ongoing review and maintenance of business continuity arrangements and the Annual Governance Statement review provides a process for seeking assurance that this is in place.

5. EQUALITIES IMPLICATIONS

5.1 There are no potential equalities implications of this report and its recommendations on groups or individuals who fall under the categories identified in Section 6 of the Council's Strategic Equality Plan, however having sound business continuity management arrangements in place in the event of any disruption ensures that the most vulnerable in society are not without the services they need at such a time.

6. FINANCIAL IMPLICATIONS

6.1 Business Continuity Planning will be undertaken within existing resources and therefore there are no financial implications arising directly from this report. The resourcing of measures to mitigate the likelihood or impact of a business disruption will need to be considered on a case by case basis as appropriate.

7. PERSONNEL IMPLICATIONS

7.1 There are no personnel implications arising directly from this report.

8. CONSULTATIONS

8.1 This report has been sent to the Consultees listed below and all comments received are reflected in this report.

9. RECOMMENDATIONS

- 9.1 That the Committee note the progress that has been made to date in relation to Business Continuity Management.

10. REASONS FOR THE RECOMMENDATIONS

- 10.1 To advise the Committee in relation to Business Continuity Management within the Council.

11. STATUTORY POWER

- 11.1 Civil Contingencies Act 2004

Author: Rob Hartshorn, Head of Public Protection
Consultees: Dave Street, Corporate Director
Nicole Scammell, Acting Director of Corporate Services
Colin Jones, Head of Performance & Property Service
Lynton Jones, Head of ICT & Customer Services
Sheryl Andrews, Senior Emergency Planning Officer
Ceri Edwards, Environmental Health Manager
Donna Jones, Health and Safety Manager
Gail Williams, Monitoring Officer
Mike Eedy, Finance Manager
Sian Phillips, HR Manager
David A. Thomas Senior Policy Officer (Equalities and Welsh Language)

Background Papers: Audit Committee Reports of 5th March 2014 & 10th September 2014 entitled "Business Continuity Management", and of 10th December 2014 entitled "ICT Disaster Recovery Arrangements".

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AUDIT COMMITTEE - 11TH MARCH 2015

SUBJECT: REGULATION OF INVESTIGATORY POWERS ACT 2000

REPORT BY: INTERIM HEAD OF LEGAL SERVICES AND MONITORING OFFICER

1. PURPOSE OF REPORT

- 1.1 To advise Members of the numbers of covert surveillance operations undertaken by the Council in accordance with the provisions of the Regulation of Investigatory Powers Act 2000.

2. LINKS TO STRATEGY

- 2.1 The Council is under an obligation to comply with legislative requirements - this report helps to achieve that.

3. THE REPORT

- 3.1 The Regulation of Investigatory Powers Act 2000 (RIPA) sets out strict controls for public authorities wishing to carry out covert surveillance of individual members of the public as part of their exercise of their statutory functions. In addition to the Act, advice and guidance is found within the Codes of Practice issued by the Home Office.
- 3.2 The Authority has a corporate policy, which provides guidance on how surveillance should be used by the relevant officers.
- 3.3 Public Authorities undertaking covert surveillance of individual members of the public are subject to inspection by an Assistant Surveillance Commissioner or by a Surveillance Inspector (or in some cases both).
- 3.4 The Appendix to the Report includes details of the RIPA operations undertaken by the Authority for the period September to October inclusive. There has been one RIPA operation undertaken in this period.

4. EQUALITIES IMPLICATIONS

- 4.1 None, the report is for information only.

5. FINANCIAL IMPLICATIONS

- 5.1 None.

6. PERSONNEL IMPLICATIONS

6.1 None.

7. CONSULTATIONS

7.1 None. The report is for information only.

8. RECOMMENDATIONS

8.1 None. Members note the information provided.

9. REASONS FOR THE RECOMMENDATIONS

9.1 To ensure compliance with statutory requirements.

10. STATUTORY POWERS

10.1 Regulation of Investigatory Powers Act 2000.

Author: Gail Williams, Interim Monitoring Officer (willige@caerphilly.gov.uk)
Consultees: Nicole Scammell, Acting Director of Corporate Finance

Appendices:
Appendix 1 Details of RIPA Operations

**RIPA Investigations
November to February (inclusive)**

Trading Standards

1. Investigation into sale of alcohol products to minors.

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AUDIT COMMITTEE - 11TH MARCH 2015

SUBJECT: UPDATE ON THE NUMBERS OF COMPLAINTS RECEIVED UNDER THE COUNCIL'S CORPORATE COMPLAINTS POLICY

REPORT BY: INTERIM HEAD OF LEGAL SERVICES AND MONITORING OFFICER

1. PURPOSE OF REPORT

- 1.1 To provide Members with an update on the number of complaints received under the Corporate Complaints Policy for the period mid July 2014 to mid January 2015.
- 1.2 To advise Members whether any trends have been identified and if so the action to be taken.
- 1.3 To update Members on the use of the Policy and Procedure to deal effectively with unacceptable, persistent or unreasonable actions by complainants.

2. SUMMARY

- 2.1 To provide members with an overview of the corporate complaints, which are one of the ways in which, the Council gains information on the level of satisfaction or dissatisfaction of the services provided corporately by the Council. The result of the monitoring enables each department to focus on areas of concern, to improve services and to monitor performance and ensure that any trends in issues raised are identified and dealt with so as to be avoided in the future.
- 2.2 To ensure that corporate complaints are dealt with consistently and fairly across all service areas.
- 2.3 To update members on the implementation of the Policy and Procedure to deal effectively with unacceptable, persistent or unreasonable actions by complainants.

3. LINKS TO STRATEGY

- 3.1 Monitoring of the Council's corporate complaints and successful resolution of those complaints supports the provision of higher quality and more effective services to the public across all service areas.

4. THE REPORT

Background

- 4.1 Members will be aware from previous reports presented to Audit Committee that, on 1st April 2013, the Council implemented a new Corporate Complaints Policy (referred to as the Policy in this report) in order to reflect the model policy introduced by the Welsh Government.

- 4.2 The Policy has introduced a two-stage complaints process to be followed within the Council. Stage 1 complaints are intended to be dealt with within 10 working days and Stage 2 within 20 working days. If a complainant remains dissatisfied with the outcome of a Stage 2 response, he/she will have the opportunity to refer the matter to the Public Services Ombudsman for Wales.
- 4.3 Members were advised that a Learning from Complaints Group (referred to throughout this report as “the Group”) had been established, which is chaired by the Interim Monitoring Officer, and includes Complaints Officers from across the Council, the Council’s Senior Policy Officer (Equalities and Welsh Language) and a representative from the Council’s Performance Management Unit.
- 4.4 The Group meet on a quarterly basis in order to consider complaints statistics, identify trends and where appropriate review policies and procedures including the introduction of associated policies and procedures arising from the implementation of the complaints policy.
- 4.5 The result of the monitoring enables each department to focus on main areas of concern, to improve services and to monitor performance and ensure that any trends in issues raised are identified and dealt with so as to be avoided in the future. The Group’s findings are then reported to the Audit Committee on a six monthly basis.
- 4.6 This report provides an update on the corporate complaints received for the period mid July 2014 and mid January 2015.
- 4.7 **Review of Corporate Complaints**
- 4.7.1 The data referred to below represents the number of complaints received from mid July 2014 to mid January 2015 for each Directorate referred to, together with an overview of the response timescales.
- 4.7.2 In addition, the complaints data captured includes the outcome of each complaint; namely whether a complaint has been upheld, not upheld or partially upheld. An overview of the outcomes in respect of Stage 1 complaints are set out in paragraph 4.7.5 (c) and an overview of the outcomes in respect of Stage 2 Complaints are set out in paragraph 4.7.6 (d) below.
- 4.7.3 The total number of corporate complaints received across the Authority during this period is 91 comprising the following: -

| | | % of total number of corporate complaints received |
|----|---------------------------|---|
| 15 | Corporate | 16.5 |
| 3 | Education | 3.3 |
| 28 | Environment | 30.8 |
| 43 | Housing | 47.2 |
| 1 | Social Services | 1.1 |
| 1 | Other (cross Directorate) | 1.1 |

4.7.4 The breakdown of the types of complaints are summarised as follows: -

4.7.5 Stage 1 Corporate Complaints

- | (a) Title | Actual |
|---|--------|
| Number of Stage 1 complaints received in Corporate Services | 13 |
| Number of Stage 1 complaints received in Education | 3 |
| Number of Stage 1 complaints received in Environment | 25 |
| Number of Stage 1 complaints received in Housing | 32 |
| Number of Stage 1 complaints received in Social Services | 1 |
| Number of Stage 1 complaints received Other (cross directorate) | 0 |
- (b) The total number of complaints received at Stage 1 were 74, of those 67 were responded to within timescale and 7 outside the timescale.
- (c) Of the 74 Stage 1 complaints responded to, 13 have been upheld, 49 were not upheld and 12 have been partially upheld. The breakdown of outcomes for each Directorate is listed below.

Outcomes of Stage 1 complaints

| | Upheld | Not Upheld | Partially Upheld |
|---------------------------|--------|------------|------------------|
| Corporate Services | 2 | 7 | 4 |
| Education | 1 | 2 | 0 |
| Environment | 4 | 16 | 5 |
| Housing | 6 | 23 | 3 |
| Social Services | 0 | 1 | 0 |
| Other (cross directorate) | 0 | 0 | 0 |

4.7.6 Stage 2 Corporate Complaints

- | (a) Title | Actual |
|---|--------|
| Number of Stage 2 complaints received in Corporate Services | 5 |
| Number of Stage 2 complaints received in Education | 0 |
| Number of Stage 2 complaints received in Environment | 6 |
| Number of Stage 2 complaints received in Housing | 19 |
| Number of Stage 2 complaints received in Social Services | 0 |
| Number of Stage 2 complaints received Other (cross directorate) | 1 |
- (b) The total number of complaints received at Stage 2 were 31 of those 30 were responded to within timescale and 1 outside the timescale.
- (c) Of the Stage 2 complaints, 17 were commenced at Stage 2 and 14 were escalated from Stage 1 to Stage 2; 3 within Corporate Services, 8 within Housing, and 3 within Environment.
- (d) Of the 31 Stage 2 complaints responded to, 7 have been upheld, 15 were not upheld, and 9 were partially upheld. The breakdown of outcomes for each Directorate is listed below.

Outcomes of Stage 2 Complaints

| | Upheld | Not Upheld | Partially Upheld |
|---------------------------|--------|------------|------------------|
| Corporate Services | 0 | 2 | 3 |
| Education | 0 | 0 | 0 |
| Environment | 0 | 5 | 1 |
| Housing | 7 | 7 | 5 |
| Social Services | 0 | 0 | 0 |
| Other (cross directorate) | 0 | 1 | 0 |

- 4.7.7 Members are reminded that the number of complaints listed for Social Services and Education are significantly lower than those of other Directorates such as Housing and the Environment. The reason for the difference is that this report only includes details of corporate complaints received for those service areas. Social Services operate a separate complaints policy for service users. Within Education the respective schools deal with their own complaints. Members received a separate report from Social Services at its meeting on 10th December 2014 entitled Social Services Representations and Complaints Procedure Activity. The report regarding the Procedure Relating to School Complaints was deferred and is a separate item on the Agenda for this meeting.
- 4.7.8 Equalities and Welsh Language complaints dealt with under the Corporate Complaints Policy are monitored and reported to members of this committee as part of the overall figures but detailed information also forms part of the statutory annual reporting framework to the Equality and Human Rights Commission and the Welsh Language Commissioner's Office. The Council's Policy and Resources Committee and Cabinet receives an annual report regarding progress against the targets in the Council's Strategic Equality Plan and Welsh Language Scheme, prior to submission to the relevant commission.
- 4.7.9 Members will note that the number of complaints responded to within the timescales has slightly decreased when compared with the data presented in the previous report. Complaints Officers from all Directorates will be asked to remind staff of the importance of responding to complaints within the policy timescales. The response times will continue to be monitored and a further update provided within the next six monthly report.
- 4.8 Review of Trends and types of complaints**
- 4.8.1 At the recent meeting of the Group, officers considered the data collected during this reporting period for each specific department however no specific trends could be identified.
- 4.8.2 Types of complaints received have been wide ranging for example, student finance, recharges, housing/Council tax benefit, grass cutting, collection of waste and highway works. The Group will continue to monitor this data closely at its meetings held quarterly and Members will be kept updated.
- 4.8.3 Whilst no trends have been identified during this reporting period the Group recognises the importance of learning from all complaints handled under the policy with a view to monitoring and improving outcomes for both future complainants and the Authority as a whole. To this extent the last meeting of the Group considered a report from the Ombudsman issued in October 2014, which was duly reported to Members (see paragraph 4.9.2). The report related to a housing complaint, which the Ombudsman upheld and made a number of recommendations. The findings were reviewed by the Group to try and improve processes and learn lessons for the future.
- 4.9 Ombudsman referrals**
- 4.9.1 Members were advised in the previous report to Committee that the Ombudsman had yet to conclude his consideration of three complaints. Of these three complaints the Ombudsman has decided not to investigate one and has issued draft reports in relation to the remaining two complaints, which are currently under consideration.
- 4.9.2 Members were also advised that the Ombudsman had issued a draft Report to the Authority in relation to his findings following an investigation into an earlier complaint. This report was finalised in October 2014 and is referred to in para 4.8.3 above. As part of the formal reporting process the Ombudsman's report has been considered by the Standards Committee and will be considered by the Policy and Resources Scrutiny Committee on 3rd March 2015.
- 4.9.3 Since the last report to Audit Committee 5 complaints have been referred to the Ombudsman following receipt of a response under Stage 2 of the Council's Corporate Complaints policy. The Ombudsman has decided not to investigate 4 of the complaints, and 1 is under

investigation. The report is awaited.

4.10 Update on the Introduction of a Vexatious Complainants Policy

4.10.1 Members will recall that the Policy was presented to and endorsed by Cabinet on 27th November 2013. As a result the Policy has now been introduced and circulated to service areas. It is also available to view on the Council's website.

4.11.2 Members are advised that to date there have been no referrals made under this policy although the Group will continue to monitor the use of the policy.

5. EQUALITIES IMPLICATIONS

5.1 Monitoring of complaints via the Corporate Complaints policy addresses the Council's statutory duties under the Equalities Act 2010 (Statutory Duties) (Wales) Regulations 2011 and the Welsh Language Measure (Wales) 2011 in two ways. It addresses specific complaints to the Council around alleged discrimination by service areas and also addresses the monitoring of complaints from people who fall under the categories protected by these statutory duties.

5.3 The full details of these issues (that cover wider matters than are recorded as Corporate Complaints in this report) are included in the annual reports provided to the Equalities and Human Rights Commission and the Welsh Language Commissioner's Office. These reports are considered by Policy and Resources Scrutiny and Cabinet prior to being published by the end of June each year.

6. FINANCIAL IMPLICATIONS

6.1 There are no direct financial implications associated with this report

7. PERSONNEL IMPLICATIONS

7.1 There are no personnel implications associated with this report.

8. CONSULTATIONS

8.1 The views of the consultees have been incorporated into this report.

9. RECOMMENDATIONS

9.1 It is recommended that Members note the contents of the report.

10. REASONS FOR THE RECOMMENDATIONS

10.1 To monitor the complaints process to ensure effective delivery of Council services.

11. STATUTORY POWER

11.1 Local Government Act 1972 - 2003

Author: Gail Williams, Interim Head of Legal Services/Interim Monitoring Officer
Consultees: Nicole Scammell, Acting Director of Corporate Services

Angharad Price, Interim Deputy Monitoring Officer
Lisa Lane, Solicitor
Jan Carter, Senior Housing Officer
Gemma Hoare, Housing Officer (Customer Services)
David Titley, Customer Services Manager
Kim Davies, Customer Services/Complaints Officer
Karen Williams, Support Officer
Judith Morgans, Customer Services Manager
Ros Roberts, Performance Manager
Andrea Jones, Corporate Complaints Officer
David A Thomas, Policy Officer
Richard Harries, Internal Audit Manager
Leigh Brook, Corporate Finance

Background Papers

Report to Audit Committee 10th December 2014 – Social Services Representations and Complaints Procedure Activity



AUDIT COMMITTEE – 11TH MARCH 2015

SUBJECT: PROCEDURE RELATING TO SCHOOL BASED COMPLAINTS

REPORT BY: CUSTOMER SERVICES/COMPLAINTS OFFICER (CSCO), EDUCATION & LIFELONG LEARNING

1. PURPOSE OF REPORT

- 1.1 To provide Members with information on the Complaints Process within Education relating to Schools.

2. SUMMARY

- 2.1 Section 29 of the Education Act 2002 requires the governing bodies of all maintained schools in Wales, including nursery schools, to establish and implement and publish procedures for dealing with complaints from parents, pupils, members of staff, governors, members of the local community and others. The provisions of Section 29 came into force on 1 September 2003.
- 2.2 The Local Authority (LA) is able to choose what advice it provides to governing bodies. In the case of CCBC, the Customer Services/ Complaints Officers provide advice, support and training to school governors, head teachers and school staff in dealing with complaints
- 2.3 The LA is able to consider if there is any evidence that suggests a governing body is failing in its statutory duty.

3. LINKS TO STRATEGY

- 3.1 Monitoring of school complaints assists the LA in providing targeted support to schools in terms of advice and monitoring

4. THE REPORT

Background

- 4.1 In 2002 the Local Education Authority assisted schools by producing a model policy called "How to get it right". The majority of schools within the Borough adopted this model. It was based on the provisions of Section 39 of the Schools Standards and Framework Act 1998 which covered the establishment of complaints procedures in schools.
- 4.2 In May 2004 the Welsh Assembly Government issued Guidance to Schools in Wales in the form of Circular 03/2004, School Governing Complaints Process. Caerphilly Council produced a model policy for schools to consider and the majority adopted it.

4.3 In October 2012, Welsh Government (WG) updated its guidance to schools on complaints procedures and published Circular 011/2012 Complaints procedures for school governing bodies in Wales. This guidance replaced the circulars above and included a model complaint procedure, which was recommended to schools to adopt. The complaints process is accessible to all including pupils, who have the right to make a complaint themselves. Schools have an age appropriate version for pupils that they can use.

4.4 **Why do schools need a complaints procedure?**

4.4.1 Schools like other organisations need a structure or process that allows for anyone with an interest in the school to raise a concern, with the confidence that it will be heard and if well founded, addressed in an appropriate and timely fashion.

4.4.2 It is very important that governing bodies have a clear and comprehensive policy on how complaints will be dealt with. This allows everyone to understand the process from the start. Treating complaints seriously and responding to them quickly often means that they can be resolved at an early stage.

4.4.3 In essence, it provides a framework that allows:
Anyone with an interest in the school is clear how they can express complaints and how they will be responded to at each stage.
School staff and governors to be clear about their roles and responsibilities in responding to complaints.

4.4.4 Schools to learn lessons and improve procedures as a result of the cases it deals with and monitor long-term trends.

4.4.5 All parties to be assured of a consistent, documented approach.

4.5 **The A, B, C. Approach to Complaints Resolution**

4.5.1 WG recommends that governing bodies establish a 3-stage procedure:

- Stage A – Informal Stage - Complaint raised with (and usually resolved) by first recipient within the school.
- Stage B – Formal Stage - Matter referred to Headteacher for investigation, decision and resolution.
- Stage C – Complaints hearing - Matter referred to the Governing Body Complaints Committee for consideration, decision and resolution.

4.6 **Roles and Responsibilities**

4.6.1 The governing body is responsible as a corporate body to ensure that the school has a published complaints process. To ensure that personnel at each stage of the process are aware of their roles and responsibilities.

4.6.2 The governing body has a strategic role in monitoring complaints presented to them as an overview in the Annual Report. This allows for the identification of long-term trends and recurring themes.

4.6.3 The individuals at the respective stages have roles in investigating, documenting (keeping appropriate records) and resolving complaints.

4.6.4 All parties must behave reasonably and treat the process and parties involved with respect.

4.6.5 Complainants must allow the school to try to resolve the complaint at each stage, and not try to circumvent stages, and to co-operate with the school in providing information so that a complainant can be investigated and heard.

4.6.6 **Local Authority (LA)**

The LA has a role in satisfying itself that schools have a complaints process and that it is published. The complaints policy is one of the schools statutory policies and was scheduled by the Education Achievement Service for South East Wales (EAS) on all governing body agendas following the production of the revised guidance from WG in October 2012.

The LA is able to choose what advice it provides to governing bodies. In the case of CCBC, the Customer Services/ Complaints Officers provide advice, support and training to school governors, head teachers and school staff in dealing with complaints.

The LA is able to consider if there is any evidence that suggests a governing body does not have a complaints procedure, has inadequate procedures or fails to follow its published procedure.

The LA may arrange, with the agreement of the governing body, for a panel of independent persons to consider a complaint where a school complaint procedure is inoperable or if there are grounds to cast doubt on its independence.

The LA may use its powers of intervention under the Schools Standards and Framework Act 1998 if the governance or management of a school is inadequate.

4.6.7 **Welsh Government (WG), Public Services Ombudsman for Wales (PSOW), Children's Commissioner for Wales (CCfW).**

If WG receives a complaint about a school it will advise that the complaint should be addressed to the school for consideration under the schools complaints process.

The PSOW has no role with respect to school complaints.

The CCfW provides an advice and support service for children and young people. The CCfW does not take the place of governors or of governing body complaints procedures. However the Commissioner may examine individual cases and in the course of that action may require information, explanations and assistance from governors, LA officers and members, and school staff. The Commissioner may produce reports with recommendations but does not have the power to require their implementation, although can publicise any failure to do so.

4.7 **Review of Data**

4.7.1 The data below relates to the period **01 April 2013 – 31 March 2014**.

4.7.2 In total **629** requests for service were received that were related to schools and include not only parents contacting the CSCO direct but Headteachers and governors requiring support in dealing with the complexities of the complaints, as well as general enquires. In accordance with WG Guidance, this authority has due regard to the governing body's statutory duty for dealing with school complaints.

4.7.3 Target times for responses are: correspondence should be acknowledged within 5 working days and a full substantive response within 20 working days. **99.7%** were acknowledged within timescales and **100%** were responded to within timescales.

4.7.4 Types of complaints are wide ranging, for example: bullying, head lice, split year groups, failure to educate, outdoor play, school trips, unauthorised absence.

4.7.5 The CSCO monitors correspondence and where there are trends or areas of particular concern, these are shared with relevant officers and acted upon as appropriate.

4.7.6 Monitoring also informs trends for the CSCO to develop appropriate training programmes for Headteachers, school staff and governors in managing school complaints

5. EQUALITIES IMPLICATIONS

- 5.1 Monitoring of school complaints is one tool that provides the Local Authority with an alert into cases of alleged discrimination under the Equalities Act 2010 directed at schools.

6. FINANCIAL IMPLICATIONS

- 6.1 There are no direct financial implications associated with this report

7. PERSONNEL IMPLICATIONS

- 7.1 There are no personnel implications associated with this report.

8. CONSULTATIONS

- 8.1 All comments received have been recorded in the report.

9. RECOMMENDATIONS

- 9.1 It is recommended that the Audit Committee note the contents of this report and related documentation.

10. REASONS FOR THE RECOMMENDATIONS

- 10.1 To monitor the complaints process as it relates to schools.

11. STATUTORY POWER

- 11.1 School Standards and Framework Act 1998.

Author: Mary Hougham, Customer Services/Complaints Officer
Kim Davies, Customer Services/Complaints Officer

Consultees: Sandra Aspinall, Deputy Chief Executive- Acting, Tony Maher, Assistant Director Planning and Strategy, Keri Cole, Assistant Director, Learning, Education and Inclusion, Bleddyn Hopkins, Assistant Director, Our School's, Our Future, Tanis Cunnick, Manager - Community, Youth Service & Adult, Gareth H Evans, Business Development Manager, Library Services & Community Centres, Donna Jones, Service Manager Health, Safety & Welfare.

Background papers:

Corporate Complaints Report presented to Audit Committee 10th September 2014

Report to All Governing Bodies on Revised Complaints Procedures

A Revised Model Complaints Process- October 2012



AUDIT COMMITTEE – 11TH MARCH 2015

SUBJECT: CAERPHILLY COUNTY BOROUGH COUNCIL PARTNERSHIPS AND COLLABORATIONS UPDATE

REPORT BY: ACTING DIRECTOR CORPORATE SERVICES & SECTION 151 OFFICER

1. PURPOSE OF REPORT

- 1.1 To update Members on work being undertaken around Caerphilly County Borough Council (CCBC) Collaboration and Partnership Protocol and Action Plan for Delivery between December 2014 to February 2015.

2. SUMMARY

- 2.1 Since last reporting to the Audit Committee on 10 December 2014 the first quarterly review has been undertaken of the CCBC partnership and collaboration list following its initial completion in 2014. The number of CCBC formal partnerships has increased by 4 and now totals at 39 partnerships, and collaborations have increased by 3 and now totals at 28 collaborations. CCBC now leads in 9 of the collaborations (previously 8). CCBC has been identified as hosting the Gwent Visually Impaired Service Collaboration (a newly identified collaboration), and as a lead for Caerphilly and Blaenau Gwent Youth Offending Service (not previously stated) but is no longer the scrutiny lead for Prosiect Gwyrdd.
- 2.2 Partnership governance checks have been conducted for: the Voluntary Sector Liaison Committee, Monmouthshire Farm School Collaboration, Missing Children Collaboration, Welsh Rugby Unit Partnership, with a check to be undertaken with the Local Investment Fund Collaboration on 17th March 2015.

3. LINKS TO STRATEGY

- 3.1 Compliance with recommendations of the Wales Audit Office under the Council's Improvement Plan, and requirements of the Annual Governance Review Panel on partnerships and collaborative working of the Council.

4. THE REPORT

- 4.1 The first quarterly review has been undertaken of the list of CCBC's partnerships and collaborations through Heads of Service between January and mid February 2015. The following Service Areas have confirmed there were no changes to the list of partnerships/collaborations to report:
- Social Services – Adult Services and Childrens Services
 - Engineering Services
 - Legal and Democratic Services
 - Learning, Education and Inclusion

- 4.2 Additional partnerships and collaborations were noted in the following Service Areas, with detailed information now collated:
- **Education Achievement Service** - with the following collaborations noted for inclusion in the list: Gwent Visually Impaired Service (hosted by CCBC), and Hearing & Language Impaired Communication Intervention Team (hosted by Torfaen Council)
 - **Community Education** – with the following partnerships added: Adult Community Learning 5 County Partnership, Caerphilly Adult Community Learning Partnership, Working Skills for Adults ESF Partnership and Bridges into Work ESF partnership
 - **Public Protection** – with the following collaboration added to the list: Gwent Substance Misuse Area Planning Board

4.3 Changes were noted in the details for the following partnership and collaboration:

- **Cwm a Mynydd Partnership** - the current programme has now ended and CCBC and is in the final close down process. The Cwm a Mynydd Partnership as it stands will be replaced by a Local Action Group for the new programme from April 2015. The membership is likely to be similar, but not identical to the previous partnership, as the partnership will now cover two wards in Blaenau Gwent. There will be no rebranding so Cwm a Mynydd will remain as the name for the partnership. The Lead Officer has changed to: Principal Planner.
- **Prosiect Gwyrdd** - CCBC is no longer the scrutiny lead for this collaboration.

4.4 The updated CCBC partnership/collaboration table and index of partners will be placed on CCBC's intranet site for continued staff reference.

Appendix 1 contains information on the newly added partnerships and collaborations.

4.5 Four governance audits have been undertaken, with the following observations:

- **Voluntary Sector Liaison Committee** - the main issues of concern is that this partnership receives intensive support from the Policy and Research Manager, and there are risks if this support is tapered back, or indeed lost through potential Local Government Re-organisation.
- **Monmouthshire Farm School Endowment** – there is a possible risk in securing applicants to the funding scheme through the centralisation of the administration of education grants into the Welsh Government. Currently administration is done through the Education Grants Administrator at Monmouthshire County Council who is aware of grant applications coming through for agricultural related studies. To help ameliorate this CCBC has agreed to advertise the grants schemes in the Policy Unit's annual grants publication.
- **Gwent Missing Children Collaboration** – this is a unique project and has received lots of interest across England and Wales. However, the project funding is only for 3-years, and may not be renewed as the Welsh Government is considering a new approach to this type of work through establishing Multi Agency Safeguarding Hubs (MASH). These are to be based on a regional basis covering adult, young people and children safeguarding issue, and could be expanded to include missing people.
- **Welsh Rugby Union** - there is a level of risk around the annual funding of this partnership received through the Welsh Government, which causes staff continuity problems. In undertaking the audit it became apparent that the other CCBC sports partnerships have similar arrangements in place (Football Association of Wales Trust, Hockey Wales, Sport Wales and Welsh Netball).

Background papers on the governance audit write ups are available from the report's author.

5. EQUALITIES IMPLICATIONS

5.1 The Council's partnerships and collaborative working take into consideration the Equalities Act 2010 (Statutory Duties) (Wales) Regulations 2011, and the Welsh Language (Wales)

Measure 2011.

6. FINANCIAL IMPLICATIONS

- 6.1 The background reports available for Members contain details of funding arrangements in place for partnership and collaborative working by the Council.

7. PERSONNEL IMPLICATIONS

- 7.1 Significant staff time is invested in partnership and collaborative working by the Council and is met within existing resources.

8. CONSULTATIONS

- 8.1 All of the write ups of the partnership/collaborations and audit governance checks have been verified with the officers supplying the details.

9. RECOMMENDATIONS

- 9.1 For the Audit Committee to note the contents of this report and progress made with implementing the 12-month Partnership Protocol 12-month action plan for delivery up to June 2015.

10. REASONS FOR THE RECOMMENDATIONS

- 10.1 The work on CCBC partnerships is regularly reported to the Audit Committee to show compliance with the Wales Audit Office two proposals for partnership working by the Council.

11. STATUTORY POWER

- 11.1 Local Government Act 2000, and the Local Government (Wales) Measure 2009 (Part 2) Community Strategies

Author: Jackie Dix – Policy & Research Manager
Consultees: Nicole Scammell - Acting Director of Corporate Services & S151
Colin Jones - Head of Performance and Property Services
Gail Williams – Interim Head of Legal and Democratic Services
Richard M Harris - Internal Audit Manager

Background Papers:

Updated CCBC Table and Index of Partnerships and Collaborations
Voluntary Sector Liaison Committee Governance Check 17th December 2014
Monmouthshire Farm School Endowment Governance Check 13th January 2015
Gwent Missing Children Governance Check 14th January 2015
Welsh Rugby Union Governance Check 15th January 2015

Appendices:

Appendix 1 New Partnerships and Collaborations identified from January 2015 Review

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Appendix 1 New CCBC Partnerships and Collaborations identified from January 2015 Review

| Formal Partnerships | Collaborations |
|---|--|
| <p>Caerphilly Adult Community Learning Partnership Lead: Senior Community Education Manager Welsh Govt instruction to collaborate: No</p> | <p>Gwent Substance Misuse Area Planning Board Lead: Community Safety Manager Welsh Govt instruction to collaborate: Statutory Partnership</p> |
| <p>Adult Community Learning 5 County Partnership Lead: Senior Community Education Manager Welsh Govt instruction to collaborate: No</p> | <p>Gwent Visually Impaired Service Collaboration Lead: Service Manager ALN Welsh Govt instruction to collaborate: GVIS provides support for the statutory Special Educational Needs process CCBC Lead: Host for service</p> |
| <p>Bridges Into Work European Social Fund Partnership Lead: Senior Community Education Manager Welsh Govt instruction to collaborate: No</p> | <p>Hearing Impaired Service & Communication Intervention Team Lead: Service Manager ALN Welsh Govt instruction to collaborate: The Service provides support for statutory processes as identified in Special Educational Needs Code of Practice for Wales</p> |
| <p>Working Skills for Adults European Social Fund Partnership Lead: Senior Community Education Manager Welsh Govt instruction to collaborate: No</p> | |

Table Notes:

1. The total number of partner organisations is 146 (Partnership Index available)
2. The overall total of CCBC Formal Partnerships now stands at 39
3. The overall total of CCBC Collaborations now stands at 28
4. CCBC is the collaborative lead in 9 of the ventures

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AUDIT COMMITTEE - 11TH MARCH 2015

SUBJECT: INTERNAL AUDIT SERVICES ANNUAL AUDIT PLAN

REPORT BY: INTERNAL AUDIT SERVICES MANAGER

1. PURPOSE OF REPORT

1.1 To seek Members approval of the Internal Audit Services Annual Audit Plan 2015/16.

2. LINKS TO STRATEGY

2.1 To ensure that the Council's strategies are delivered in a proper and transparent way.

3. THE REPORT

3.1 The attached report outlines the internal audit coverage for 2015/16. The approach is broadly similar to previous years but reflects the ongoing development of the plan in terms of coverage and risk identification.

4. FINANCIAL IMPLICATIONS

4.1 There are no financial implications.

5. PERSONNEL IMPLICATIONS

5.1 There are no personnel implications other than the approved manpower resource.

6. CONSULTATIONS

6.1 Any comments received have been reflected in the report.

7. RECOMMENDATIONS

7.1 Members are asked to note and approve the Annual Audit Plan 2015/16.

8. REASONS FOR THE RECOMMENDATIONS

8.1 To enable Internal Audit Services to carry out its function.

Author: R. Harris, Internal Audit Services Manager
Consultees: N. Scammell, Acting Director of Corporate Services and Section 151 Officer
S. Harris Acting Head of Corporate Finance



AUDIT COMMITTEE - 11TH MARCH 2015

SUBJECT: ANNUAL AUDIT PLAN 2015/16

REPORT BY: ACTING DIRECTOR OF CORPORATE SERVICES & SECTION 151 OFFICER

1. PURPOSE OF THE REPORT

- 1.1 The purpose of the report is to outline the intended allocation of audit time for the financial year ending 31st March 2016.

2. INTRODUCTION

- 2.1 The Public Sector Internal Audit Standards and the Council's own Financial Regulations require that an annual Audit Plan should be prepared to ensure that there is an effective and efficient use of audit resources. The 2015/16 Annual Plan is broadly based on an on-going assessment of risk which makes use of data gathered from numerous sources including senior management, Heads of Service and Members. The purpose of an annual plan is to outline the resources available and set out the intended allocation of audit time for the forthcoming year. Actual work carried out will be regularly assessed against the Plan.
- 2.2 During the coming year as the Authority continues to review its operations, its methods of delivery and its performance, the delivery of the internal audit service will flex to accommodate changes to service delivery models and to take account of emerging risks as the Authority reshapes itself. This process will not be confined to the coming year and the level and impact of any flexing cannot be gauged at the present time, however as identified in previous annual plan reports to the Audit Committee resource priority will always be given to high risk areas, new or existing.
- 2.3 In addition to the Authority wide landscape changes, the internal audit service is in the process of re-aligning its approach in response to the requirements of the new Public Sector Internal Auditing Standards and the developing risk management and governance agendas.
- 2.4 Additionally, an action plan has been produced to assist the delivery of improvements that have been suggested by the external auditors following the completion of their inspection in relation to corporate governance. It is anticipated that working to realign working practices and audit coverage in response to the detailed issues identified will also contribute to the wider requirements of the Internal Audit Standards.
- 2.5 It is considered that changes or adjustments to either service delivery or coverage will have to be introduced on a rolling basis with a view to maintaining the level of service and keeping operational disruption to a minimum. The effect of this being that the 2015/16 plan will continue to evolve over time as the effect of increased engagement and profile filters through.

3. STAFFING

- 3.1 The establishment level of the Internal Audit Section for 2015/16 is 8.2 FTE's which although reducing from the previous year continues to mirror the Welsh average.

4. PLAN

- 4.1 An outline of the 2015/16 Annual Audit Plan showing the audit days allocated to the main service areas is attached as Appendix A. In preparing the Plan, due consideration has been given to the previous years' coverage, emerging issues and any "local factors" as well as acknowledging themed areas that are linked to priorities highlighted in the Auditing Standards.

In addition to the above due regard has been made to the following:

4.2 Systems

- 4.2.1 System audits continue to receive a high level of resource allocation with certain high risk corporate systems being reviewed on an annual basis, either by undertaking a full audit or carrying out an "overview" of system controls. This allocation also allows the expansion of the service into cross cutting reviews and specific risk or business related projects as identified on an ongoing basis.
- 4.2.2 Throughout the year Internal Audit staff will continue to have a role to play in both advising on the introduction of new systems and in undertaking regularity checks to ensure that the risks inherent in systems are minimised.
- 4.2.3 Internal Audit will liaise with the Council's external auditors in order to ensure that fundamental systems receive adequate coverage and to prevent duplication of effort.
- 4.2.4 A total of 678 audit days are therefore allocated to systems audit/reviews.

4.3 Establishments

- 4.3.1 The majority of council establishments continue to receive a visit over a three to five year period and a more structured approach to establishment audits has been established to ensure that audit resources are deployed where most benefit can be achieved. It is intended to review the focus of these audits and consider alternative approaches that incorporate a greater link with the governance and risk agendas. This review will take place throughout the year as part of the drive to change the focus of the service. A rolling visiting schedule covering all establishments has been set up, and a schedule of visits relating to 2015/16 is shown as Appendix B.
- 4.3.2 In addition to ensuring that the link between the establishments and the "corporate centre" are strengthened, it is hoped that the more structured approach to establishment audits will continue to:
- highlight the need for probity in financial administration;
 - deal with problems where advice and assistance are required;
 - identify any significant areas where procedures are weak;

and, on a more positive note, continue to promote best practice across a wide range of establishments.

- 4.3.3 A total of 365 audit days have been allocated to this area.

4.4 Contract Audit

- 4.4.1 The move to a more pro-active system based approach to contract auditing will continue and

will be further developed by moving the focus to auditing schemes as they progress. The more traditional approach of auditing contractors' final accounts will continue and information obtained via the final account audits will be used to complement the systems work.

4.4.2 Internal Audit staff will continue to work closely with staff from Procurement Services to promote a high level of contract compliance throughout the Council. It is also anticipated that during 2015/2016 resource will continue to be focussed on ensuring the successful implementation of revised Standing Orders and Financial Regulations and there will also be ongoing coverage in respect of the developing arrangements in respect of the WHQS works.

4.4.3 A total 135 days have been allocated to the audit and review of contract systems and procedures.

4.5 Computer Audit

4.5.1 Reliance on IT systems is critical to the ongoing success of the Authority. As most systems and processes are IT based the ongoing systems reviews are being updated to include an element of what was previously considered to be IT Audit. The less technical IT systems reviews have been merged into the systems work stream and existing work programmes will be adjusted to cover the new approach.

4.5.2 During the year as specific issues arise or additional risks are identified consideration will be given to how best to build these into the ongoing plan as would be the case for all emerging issues.

4.5.3 Audit work will still be undertaken to review and report on the central controls for those areas that are within scope of the BSI accreditation.

4.6 Corporate/Other

4.6.1 An action plan review process is in place to monitor the implementation of agreed actions as the final part of the audit cycle. This work is regarded as additional to the actual audit as it provides assurance on a corporate basis that agreed recommendations are being implemented by managers. Additionally in order to provide reports to, and address any issues emanating from, the Audit Committee, a time allocation has been included.

4.6.2 The Internal Audit Section also co-ordinates and contributes work in respect of the National Fraud Initiative, the production of the Annual Governance Statement and the periodic reviews of Standing Orders for Contracts and Financial Regulations.

4.6.3 A total of 103 days have been included in the Plan to cover such topics.

4.6.4 In anticipation of "unplanned" issues arising during the year, such as special investigatory work, and work brought forward from the previous year, days have been allocated as a general contingency. This approach should reduce problems with audits having to be postponed or cancelled and make the audit plan more aligned to actual eventualities. A total of 80 days (5%) has been allowed for this.

4.7 Non-Audit Days

4.7.1 Certain tasks are carried out by the Internal Audit Section that despite providing a valuable insight into emerging issues do not technically fall within the precise definition of internal auditing. For ease of administration and corporate benefit these tasks are at the present time carried out by internal audit staff.

4.7.2 The following list is indicative of those tasks:

- Co-ordination / monitoring of anonymous letters received.
- Returned cheques - control and administration.

4.7.3 A total of 145 days have been allocated to these tasks.

4.8 Overheads

4.8.1 For 2015/16 the allocated overhead is 654 days. The largest element of this figure relates to bank holidays and annual leave which in total stands at 322 days. The remaining balance consists mainly of managerial provisions but some indicative figures include a training provision of 20 days, a sickness provision of 32 days, an audit planning provision of 50 days, a time recording provision of 20 days.

5. **SUMMARY**

5.1 The report has dealt with the allocation of audit resources and highlighted the main areas of coverage.

5.2 The plan continues to reflect a proactive and constructive approach to Audit matters.

5.3 The desire to “continually improve” will have an impact on the way audit functions in that there is a continuous need to ensure that we provide a service of the highest quality at the most competitive cost.

5.4 In the coming months efforts will continue to build on existing practices and procedures in order to meet the requirements of the new auditing standards and the service will be working with the Audit Committee to reset the focus of the audit coverage and realign the direction of travel to improve the service to meet the constantly changes demands placed upon it.

5.5 Additionally consultation will take place with audit “clients” and our External Auditors throughout the year and their views and future requirements will be taken on board in the ongoing development of audit service provision.

5.6 Audits which due to unforeseen reasons were not carried out in the previous year have been re-assessed and prioritised and if considered appropriate have been included in the Plan. Similarly, areas for audit included in the 2015/16 Annual Plan which, due to unforeseen circumstances, are not audited within the forthcoming year will be assessed for inclusion in future year plans. The Plan must therefore be viewed as a fluid document which not only addresses traditional or historic areas but is also able to respond to new or emerging issues.

Author: Richard M Harris, Internal Audit Manager, Internal Audit Services

Appendices:

Appendix A Summary of Audit Plan 2015/16

Appendix B Schedule of planned visits 2015/2016

Caerphilly County Borough Council

Summary of the Audit Plan 2015/2016

| Service area | Main Areas covered | Days |
|------------------------|---------------------------------------|------|
| Education | Establishment reviews | 243 |
| | Central systems | 55 |
| Social Services | Establishment visits | 54 |
| | Central systems | 70 |
| Engineers | Central systems & compliance | 65 |
| Planning/ Regeneration | Central systems & compliance | 35 |
| | Establishment visits | 20 |
| Community & Leisure | Establishment visits | 48 |
| | Central systems | 60 |
| Public protection | Central systems | 25 |
| Corporate Services | | |
| | Housing | 110 |
| | Legal, procurement members services | 40 |
| | Human Resources | 90 |
| | ICT & Citizen engagement | 5 |
| | Performance & Property | 70 |
| | Corporate finance / Central systems | 124 |
| | Corporate / cross cutting / non audit | 312 |
| Contingency | incl. General advice | 80 |
| SUBTOTAL | Allocated work | 1506 |
| | Overheads | 654 |
| TOTAL | | 2160 |

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Caerphilly County Borough Council

INTERNAL AUDIT SERVICES

Schedule of planned visits 2015/2016

Primary Schools

CWMABER JUNIOR
 MACHEN PRIMARY
 CEFN FFOREST PRIMARY
 CRUMLIN HIGH LEVEL PRIMARY
 PLASYFELIN PRIMARY
 NANT Y PARC PRIMARY

PANTSIDE PRIMARY
 BEDWAS JUNIOR
 GLYNGAER PRIMARY
 ST. HELENS R.C.PRIMARY
 YNYSDDU PRIMARY
 YSGOL PENALLTAU

PONTLLANFRAITH PRIMARY
 HENGOED PRIMARY
 DERI PRIMARY
 YSGOL IFOR BACH
 WHITE ROSE PRIMARY

PENLLWYN PRIMARY
 CWM IFOR PRIMARY
 TIRYBERTH PRIMARY
 TY ISAF INFANTS
 HENDRE INFANTS

TRINITY FIELDS SCHOOL & RESOURCE CENTRE

Comprehensive Schools

YSGOL GYFUN CWM RHYMNI
 CWMCARN HIGH SCHOOL
 ST. CENYDD COMPREHENSIVE

OAKDALE COMPREHENSIVE
 RISCA COMPREHENSIVE
 LEWIS SCHOOL PENGAM

Leisure Centres

SUE NOAKES (Y M) LEISURE CENTRE
 CWMCARN LEISURE CENTRE
 NEW TREDEGAR LEISURE CENTRE

BEDWAS LEISURE CENTRE
 CEFN FFOREST LEISURE CENTRE
 HEOLDDU LEISURE CENTRE

Other

LLANCAIACH FAWR MANOR
 CWMCARN FOREST DRIVE VISITORS CENTRE

CAERPHILLY LIBRARY
 RISCA LIBRARY

BARGOED LIBRARY

Social Services

BROOKLANDS ATC
 EBENEZER RESOURCE BASE
 HEOL ANEURIN COMMUNITY HOME
 CASTLE VIEW HFE

SPRINGFIELD RESOURCE CENTRE
 MARKHAM RESOURCE CENTRE
 MIN-Y-MYNYDD RESOURCE CENTRE

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AUDIT COMMITTEE - 11TH MARCH 2015

SUBJECT: INTERNAL AUDIT SERVICES ACTION PLAN

REPORT BY: INTERNAL AUDIT SERVICES MANAGER

1. PURPOSE OF REPORT

- 1.1 To set out for Members information in respect of an action plan of tasks with associated timelines to address the suggested improvements identified in the Corporate Governance Inspections.

2. SUMMARY

- 2.1 As a result of the follow up Corporate Governance Inspection undertaken by the External Auditors an action plan is required to monitor progress and ensure actions previously identified are completed. The attached Appendix 1 summarises the issues that were identified both in the initial review and the follow up review. Actions to address the points have been identified and timescales for completion attached to each.

3. THE REPORT

- 3.1 The initial Corporate Governance Inspection took place in the winter of 2013. In addressing the areas for improvement identified by the review the initial focus was on the reshaping of the annual internal audit plan and the updating of the Audit Charter to better reflect the requirements of the Public Sector Internal Audit Standards, both subsequently being presented to the Audit Committee for approval.
- 3.2 The follow up review which was undertaken towards the end of 2014 has recognised the progress made but has recommended an action plan be developed to ensure that areas for improvement identified by the External Auditors are progressed. The delivery of this action plan will be closely monitored by the Improving Governance Project Board (IGPB).
- 3.3 An action plan is attached as Appendix 1 for Members consideration.

4. FINANCIAL IMPLICATIONS

- 4.1 None

5. PERSONNEL IMPLICATIONS

- 5.1 None

6. RECOMMENDATIONS

- 6.1 Members are asked to note the contents of the action plan, provide comment and suggestions and note the progress made to date.

7. REASONS FOR THE RECOMMENDATIONS

- 7.1 To ensure that Members are aware of the work that remains outstanding and the associated timescales in order to allow the future monitoring of progress by the IGPB.

Author: Mr R M Harris, Manager Internal Audit
Consultees: Mr S Harris Acting Head of Corporate Finance
Mrs N Scammell Acting Director of Corporate Services & Section 151 Officer

Appendices:
Appendix 1 Action Plan

| INITIAL REVIEW | FOLLOW UP REVIEW | INTENDED ACTIONS | Responsible officer & target date |
|--|--|--|--|
| Re-assesses its expectations of the Internal Audit service and puts in place a change programme to address the findings of this inspection | The Council is beginning to address aspects of our recommendations to improve Internal Audit but it lacks a robust action plan to ensure it can keep track of progress | Completion of action plan and presentation to Audit Committee. | RH - 11/3/15 |
| Strategy & vision | | | |
| Audit Charter & strategy. | Audit charter / strategy in place. Key challenge is to ensure that these are now translated into practice. | Audit Charter approved by Audit Committee 10/09/14. | RH - ongoing |
| Engagement with Audit Committee | | | |
| Greater interaction with the Audit Committee. | | Interaction with the Audit Committee has already increased and is set to continue with IAM input into Audit Committee training programme and regular meetings with the Audit Committee Chairman. | RH throughout 2015 |
| Input into strategy and vision. | | Audit Charter approved by Audit Committee 10/09/14. | RH - ongoing |
| Planning | | | |
| Greater interaction with the Directors & CEO. | | Periodic attendance at Directorate Management Teams to supplement emails to Heads of Service. | RH - Jan/ Feb 2015 and ongoing |
| Available resource v. audit need. | | This will be covered annually in the Annual Audit Plan report. | RH - ongoing |
| Terms of reference agreed for each audit assignment. | | This has already started to happen and is evolving with every piece of work. | RH - ongoing |
| Risk based focus | | | |
| Mapping strategic risk to audit plan. | Audit plan is evolving but still predominantly focussed on financial areas. | Audit plan will continue to evolve and develop in line with engagement with Management. Key risk areas discussed at Directorate Management Team meetings. | RH - ongoing but no later than June 2016 |
| Reporting & communication | | | |
| Not all reports signed out by IAM. | | To be reviewed and included within audit manual. | RH/DG - March 2016 |
| Follow up mechanisms could be improved. | | To be reviewed and included within audit manual. | RH/DG - March 2016 |
| Communication with stakeholders somewhat variable. | | Audit clients are to be briefed on the audit process at the commencement of each assignment. Reporting protocols within the Audit Service will be defined within the audit manual. | RH/DG - ongoing RH/DG - March 2016 |
| Quality assurance & performance mgt. | | | |

| | | | |
|--|---|---|--|
| Quality review of files. | Has not assessed against PSIAS although is looking to participate in contract arrangement being established within South Wales. Working papers could be improved in terms of level of review & quality of documentation. | A self assessment against PSIAS will be undertaken in order to identify areas for further development prior to the external assessment. This will be reviewed and addressed in the new audit manual. | Staff group – Sept. /Oct. 2015 RH/DG - March 2016 |
| Inconsistency in the issue of reports. | | This will be reviewed and addressed in the new audit manual. | RH/DG - March 2016 |
| Performance measures should be introduced & reported. | | All wales annual benchmarking exercise is undertaken with quarterly data collected and recorded on Fynnon. | Ongoing on a quarterly basis |
| Use of technology | | | |
| No integrated mgt. system in place for audit planning, execution, documentation & reporting. | | Cost and resource implications will need to be assessed against benefits. Have been using existing software since 1996 without major issues. | RH/DG - March 2016 |
| | | | |
| | | Audit manual to be re instated. Full rewrite to include the outcomes of the reviews identified above. | RH/DG - March 2016 |
| | | Enhanced commitment to training of staff to increase knowledge of the requirements of the new standards. | Courses already booked up to June 15 |



AUDIT COMMITTEE – 11TH MARCH 2015

SUBJECT: OFFICERS DECLARATIONS OF GIFTS AND HOSPITALITY

REPORT BY: HEAD OF WORKFORCE AND ORGANISATIONAL DEVELOPMENT

1. PURPOSE OF REPORT

- 1.1 Quarterly report to advise members of the Audit Committee of the gifts and hospitality declared by officers for the period October to December 2014.

2. SUMMARY

- 2.1 Attached as Appendix A, is a list of Gifts and Hospitality received by officers of the Council for the 3 months 1 October to 31 December 2014.

3. LINKS TO STRATEGY

- 3.1 The Council acting through this Committee has an obligation to maintain high standards, probity and conduct throughout its workforce.

4 THE REPORT

- 4.1 Heads of Service provide data on a monthly basis to the Head of Workforce and Organisational Development for collation and monitoring purposes.
- 4.2 The Head of Workforce and Organisational Development will continue to monitor the returns and work with Heads of Service to improve their understanding and corporate compliance to the policy.

5. EQUALITIES IMPLICATIONS

- 5.1 None.

6. FINANCIAL IMPLICATIONS

- 6.1 None.

7. PERSONNEL IMPLICATIONS

- 7.1 The Head of Workforce and Organisational Development will continue to monitor the declarations to promote best practice and ensure compliance.

8. CONSULTATIONS

- 8.1 The Improving Governance Project Board and Corporate Management team have been consulted on this report.

9. RECOMMENDATIONS

- 9.1 The Members of the Audit Committee are asked to note the information provided in Appendix A.

10. REASONS FOR THE RECOMMENDATIONS

- 10.1 To ensure the Audit Committee have an oversight of the position in relation to officers Gifts and Hospitality.

11. STATUTORY POWER

- 11.1 Local Government Act 2000.

Author: Gareth Hardacre, Head of Workforce and Organisational Development.
Consultees: CMT
Improving Governance Project Board

Appendices:
Appendix A – Declarations of Gifts and Hospitality

Declarations of Gifts and Hospitality – 1 October to 31 December 2014

| Directorate | Service Area | Form Number | Type of Declaration | Form Details Of Declaration i.e. name of person, nature of relationship, company, gift, hospitality, etc | Head of Service who signed the declaration | Outcome |
|--------------------|-----------------------|-------------|---------------------|--|--|--|
| Chief Executive | Corporate Services | 590 | Hospitality | Invitation from a partner at PwC, CCBC auditors. PwC hosted a dinner at Cardiff City Hall on Thursday 16 October 2014. Estimated value £75. Accepted. Have no influence on who is appointed as our Auditors this decision is not taken by CCBC | Chris Burns | Accepted |
| Corporate Services | Housing | 2459 | Gift | A CCBC resident provided a bottle of wine + 1 box of chocolate approx. £7. Employee had supported her in resolving tenancy issues. | Shaun Couzens | Accepted in line with Code of Conduct for gifts up to £25. |
| Corporate Services | Human Resources | N/a | Gift | Gift from the Acting Manager, Min y Mynydd of a box of chocolates approximate value £8 | Gareth Hardacre | Accepted |
| Corporate Services | Property and Planning | 1556 | Gift | Tidy Productions Ltd. Fee for use of Ty Dyffryn as a Unit Base for filming an episode of the Stella Series 4. Voluntary contribution of £150 to the Mayors Charity | Colin Jones | Accepted. Cheque sent to Mayors Assistant, Democratic Services |

| Directorate | Service Area | Form Number | Type of Declaration | Form Details Of Declaration i.e. name of person, nature of relationship, company, gift, hospitality, etc | Head of Service who signed the declaration | Outcome |
|--------------------|--------------------------------|-------------|---------------------|---|--|---|
| Corporate Services | WHQS | 2310 | Hospitality | Invited to Welsh Housing Awards Dinner on 21.11.14, as partner to Fiancée, who is a sales manager for Horbis Ltd, who supply security services to CCBC. | Phil Davy | Accepted. Dinner attended. Role at CCBC is unrelated to the supplier. |
| Environment | Community and Leisure Services | 2396 | Hospitality | I recently (5/12/14) attended the Chartered Institute of Wastes Management Xmas Seminar and Dinner. The dinner tables are sponsored by various companies/organisations as are other parts of the event (Charity Raffle, Speaker, etc.) the CIWM is a Professional Body of which I am a Full Member. Approx cost £30-£40 per head. | Mark S Williams | Accepted. No conflict of interest as the CIWM is a Professional Body and not a commercial organisation. |
| Environment | Community and Leisure Services | 2397 | Hospitality | I recently (5/12/14) attended the Chartered Institute of Wastes Management Xmas Seminar and Dinner. The dinner tables are sponsored by various companies/organisations as are other parts of the event (Charity Raffle, Speaker, etc.). Approx £30-£40 per head. | Mark S Williams | Accepted. No conflict of interest as the CIWM is a Professional Body and not a commercial organisation. |

| Directorate | Service Area | Form Number | Type of Declaration | Form Details Of Declaration i.e. name of person, nature of relationship, company, gift, hospitality, etc | Head of Service who signed the declaration | Outcome |
|-------------|--------------------------------|-------------|---------------------|--|--|---|
| Environment | Community and Leisure Services | 2398 | Hospitality | I recently (5/12/14) attended the Chartered Institute of Wastes Management Xmas Seminar and Dinner. The dinner tables are sponsored by various organisations as well as other parts of the event (Guest Speaker, Raffle). Approx cost £34-£40 per head. | Mark S Williams | Accepted. No conflict of interest as the CIWM is a Professional Body and not a commercial organisation. |
| Environment | Community and Leisure Services | 2399 | Hospitality | On Friday 5/12/14 I attended CIWM (Chartered Institute of Wastes Management) Christmas Seminar and Dinner. The tables are sponsored by various organisations as well as other parts of the event (Guest Speaker, Raffle). Approx cost £30-£40 per head. | Mark S Williams | Accepted. No conflict of interest as the CIWM is a Professional Body and not a Commercial organisation. |
| Environment | Community and Leisure Services | 2395 | Hospitality | I recently (5/12/14) attended the Chartered Institute of Wastes Management Xmas Seminar and Dinner. The dinner tables are sponsored by various companies / organisations as are other parts of the event (Charity Raffle, Speaker, etc.) the CIWM is a Professional Body of which I am a Fellow. Approx cost £30-£40 per head. | Sandra Aspinall | Accepted. No conflict of interest as the CIWM is a Professional Body and not a Commercial organisation. |

| Directorate | Service Area | Form Number | Type of Declaration | Form Details Of Declaration i.e. name of person, nature of relationship, company, gift, hospitality, etc | Head of Service who signed the declaration | Outcome |
|-----------------|-------------------|-------------|---------------------|---|--|---|
| Environment | Public Protection | 1478 | Gift | Public Health Wales - Stop Smoking Wales and Stoptober. Received two WRU tickets for Wales v Australia in support of the winner completing Stoptober. Tickets received in a personal capacity | Robert Hartshorn | Accepted. Tickets received in a personal capacity. |
| Environment | Public Protection | 1477 | Gift | Public Health Wales - Stop Smoking Wales and Stoptober. Received two WRU tickets for Wales v Australia for completing Stoptober. Tickets accepted as recognition of personal achievement | Robert Hartshorn | Accepted. Tickets received in a personal capacity. No conflict of interest. |
| Social Services | Adult Services | 2497 | Gift | A CCBC resident, son of a deceased client who resided at Brodawel Resource Centre. Has offered a Marks and Spencer gift voucher of £30 to SJ, Care Worker and key worker for the client. See email audit trail for authorisation that voucher could be kept by SJ | Jo Williams | Accepted. No conflict refusal would cause distress |



AUDIT COMMITTEE - 11TH MARCH 2015

SUBJECT: AUDIT COMMITTEE FORWARD WORK PROGRAMME

REPORT BY: ACTING DIRECTOR OF CORPORATE SERVICES & SECTION 151 OFFICER

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1. The attached report demonstrates the Audit Committee Forward Work Programme.
 2. Forward Work Programmes are essential to ensure that Audit Committee agendas reflect the strategic issues facing the Council and other priorities raised by Members, the public or stakeholders.
 3. The Audit Committee Forward Work Programme identifies reports that are due to be presented to the Committee until December 2015. The document is a working document and is regularly updated when additional reports are identified.
 4. The latest Audit Committee Forward Work Programme is attached at Appendix 1.

Author: C. Evans, Committee Services Officer, Ext. 4210

Appendices:

Appendix 1 Audit Committee Forward Work Programme

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FORWARD WORK PROGRAMME FOR AUDIT COMMITTEE

| Deadline (12 Noon) Reports To Committee Services | Meeting Date | TOPIC | RESPONSIBILITY |
|--|-----------------|--|--|
| 26/05/15 | 10/06/15 | WAO Proposals Register Draft Annual Governance Statement <i>Forward Work Programme (Information)</i> <i>Register- Gifts and Hospitality (Information)</i> | Ros Roberts Nicole Scammell <i>Nicole Scammell</i> <i>Gareth Hardacre</i> |
| 24/08/15 | 09/09/15 | Complaints Report (6 monthly basis) Regulation of Investigatory Powers Act 2000 <i>Register- Gifts and Hospitality (Information)</i> <i>Forward Work Programme (Information)</i> ISA 260 | Gail Williams Gail Williams <i>Gareth Hardacre</i> <i>Nicole Scammell</i> Steve Harris |
| 23/11/15 | 09/12/15 | WAO Proposals Register Register- Gifts and Hospitality (Information) | Ros Roberts Gareth Hardacre |

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**Minutes of meeting on 21st November 2014
Room 4.2 at 9.30 a.m.**

Attendees: Nicole Scammell, Cllr Forehead, Colin Jones, Lynton Jones, Gail Williams, Richard Harris

1. There were no apologies.
2. Jackie Dix attended to update the panel on the latest progress with the work on partnerships and collaborations. JD confirmed that Cabinet had endorsed the work that had been undertaken and following the approval both the Partnership and Collaboration Protocol and the toolkit had been updated onto the Corporate Governance section of the Council's intranet. A report was now to go to the December Audit Committee which will include an action plan initiating reviews of the governance in place from a sample of partnerships & collaborations as chosen by the review panel. It was agreed that initially these reviews be undertaken jointly by JD and internal audit staff and five were selected ie. the Local Investment Fund, Monmouthshire Farm School Endowment Collaboration, W.R.U., the Voluntary Sector Liaison Committee and Gwent Multi Agency Missing Children Project. It was agreed to update the management network group and prior to the review fieldwork beginning notification would be given to Directors /Heads of Service.
3. The minutes of the meeting held on 18th July 2014 were reviewed and agreed.
4. Rob Hartshorn attended with Ian Martin to update on the progress made with the BCP work. RH/ IM summarised that 259 business impact analysis' had been received and that these were in the process of being reviewed however it was anticipated that the whole process would be completed by the end of the financial year. IM provided a view of the contents of the database that was being used to hold the submitted data to give an indication of the complexity and volume of data. It is anticipated that the database's tracking facilities will be a big bonus going forward in speeding up the process and enabling different scenarios to be considered, additionally updating in future means we will be starting from a much better position.

Going forward it was suggested that CMT input would be required to rank/ prioritise services as well as consideration of capacity in respect of accommodation and IT infrastructure prior to any finished product being agreed.

The panel agreed that it had been a huge undertaking but having the key data electronically is a big step forward and should be beneficial going forward.

It was agreed that a progress report should go to the March Audit Committee so that it can be considered as part of the annual governance review for 14/15.

5. Joanne Jones talked thru the update papers she had provided prior to the meeting highlighting some of the key items. JJ outlined some findings from a visit to Merthyr and from some work undertaken with Ruth Betty and the information unit and JJ indicated that a visit to Carmarthenshire was planned in the near future. JJ is going to management network and Directorate SMT's to talk about FOI and JJ is going to be speaking to the CEO about his experiences in Carmarthenshire.

Training is continuing with good numbers albeit the trainer is due to finish in March. The information team are hoping to continue training but in a reduced capacity.

JJ tabled a list of sites where CCTV is in operation to show how big an issue it may be after discussion it was agreed that it was ok as a starting point but there was a lot of work to do to make it a comprehensive list.

6. The action plan from 13/14 was discussed and it was agreed that following updating it should go to the December Audit Committee. RH to update the action plan with comments on progress and put into a covering report for the committee.
7. NS confirmed that there had been no indication on how the CGI review went.
8. In order to improve the overall process it was felt that the CEO should be included in the detailed review stage in order for high level concerns or risk areas to be identified and considered when the panel is considering compilation of the AGS.

It was also agreed to emphasise the ongoing importance of corporate governance within the initial email used to start the current year's process.

We are still waiting for the AGS All Wales review report to confirm best practice and when received we will look again at our procedures with a view to aligning them with best practice.

9. The checklist for use in the 14/15 process was discussed and it was identified that some questions needed reviewing to bring them up to date and to cover off some recent developments ie Partnerships and collaborations and decision making. RH to speak to GW and JD to formulate some appropriate wording.
10. It was agreed that the Code of Corporate Governance was due for a review/ updating and RH would start by updating structural or responsibility changes and then would circulate to panel members for comments on others areas that are in need of updating.