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For all enquiries relating to this agenda please contact Charlotte Evans (Tel: 01443 864210 Email: EVANSCA1@caerphilly.gov.uk)

Date: 2nd March 2016

Dear Sir/Madam,

A meeting of the Audit Committee will be held in the Sirhowy Room, Penallta House, Tredomen, Ystrad Mynach on Wednesday, 9th March, 2016 at 10.00 am to consider the matters contained in the following agenda.

Yours faithfully,

Wis Burns

Chris Burns
INTERIM CHIEF EXECUTIVE

AGENDA

Pages

- 1 To receive apologies for absence.
- 2 Declarations of Interest.

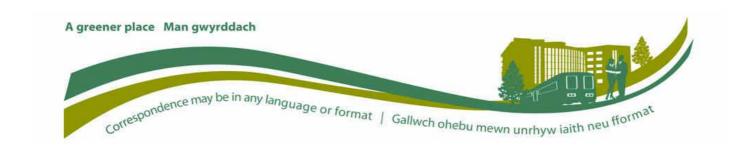
Councillors and Officers are reminded of their personal responsibility to declare any personal responsibility to declare any personal and/or prejudicial interest(s) in respect of any item of business on this agenda in accordance with the Local Government Act 2000, the Council's Constitution and the Code of Conduct for both Councillors and Officers.

To approve and sign the following minutes: -

3 Audit Committee held on 9th December 2015 (Minute nos. 1 - 11)

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To receive and consider the following reports: -



4 Business Continuity Management.

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5 Update on The Numbers of Complaints Received Under The Council's Corporate Complaints Policy.

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6 Internal Audit Services Annual Audit Plan.

71 - 82

7 Audit Committee Forward Work Programme.

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To receive and note the following information items:-

8 Regulation of Investigatory Powers Act 2000.

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9 Officers Declarations of Gifts and Hospitality.

89 - 92

*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 8th March 2016.

Circulation:

Councillors L. Ackerman, Mrs E.M. Aldworth, Mrs K.R. Baker, D.G. Carter, N. Dix, Ms J. Gale, C. Hawker, Ms J.G. Jones, Mrs G.D. Oliver, J.A. Pritchard, D. Rees (Chair) and J. Simmonds

Lay Member – Mr N.D. Yates (Vice Chair)

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 9TH DECEMBER 2015 AT 10.00 AM

PRESENT:

Councillor D. Rees - Chair Mr N. Yates - Vice Chair

Councillors:

Ms. L. Ackerman, Mrs K. Baker, D. Carter, N. Dix, Ms J. Gale, C. Hawker, Mrs G.D. Oliver, Mrs J.A. Pritchard and D. Rees.

Together with:

S.J. Byrne (Wales Audit Office), and I. Davies (PriceWaterhouseCoopers LLP).

N. Scammell (Acting Director of Corporate Services and Section 151 Officer), S. Harris (Interim Head of Corporate Finance), G. Williams (Interim Head of Legal Services and Monitoring Officer), C. Jones (Head of Performance and Property Services), R. Harris (Internal Audit Manager), R. Roberts (Corporate Performance Manager), C. Forbes-Thompson (Scrutiny Manager) and A. Dredge (Committee Services Officer).

1. APOLOGIES

Apologies for absence were received from Councillors Mrs E. Aldworth and Ms J. Jones.

2. DECLARATIONS OF INTEREST

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

3. MINUTES – 9TH SEPTEMBER 2015

RESOLVED that the minutes of the meeting of the Audit Committee held on 9th September 2015 (minute nos. 1 - 12) be approved as a correct record and signed by the Chair.

REPORTS OF OFFICERS

Consideration was given to the following reports.

4. PRESENTATION ON FINDINGS OF OUR DATA QUALITY REVIEW

Sara-Jane Byrne (Wales Audit Office) presented Members with findings of the Council's data quality review for 2015/16.

The review assessed the robustness of the Council's arrangements to check that performance data is accurately captured, calculated and reported in a timely manner. The corporate arrangements and their application were examined through testing the following six performance indicators (PIs):

- SCC025 Percentage of appropriate statutory visits.
- SCC037 The average external qualifications point score for 16 year old looked after children, in any local authority maintained learning setting.
- THS012 The percentage of principal roads, non-principal (B) roads and non principal (C) roads that are in overall poor conditions.
- Local The number of homes brought up to WHQS as recorded on annual return to Welsh Government.
- Local Number of homes compliant with WHQS in respect of external elements or Number of homes compliant in terms of internal elements.
- Local Percentage of cases who have had their risk of homelessness prevented by assistance to remain in their existing accommodation.

The findings show that the Council has further improved its data quality assurance arrangement resulting in increasingly robust quality in services measured by both national and local indicators and is now in a better position to strengthen how it uses performance information to improve services.

The Committee noted that there were a number of Corporate Strengths highlighted within the arrangements, such as a performance calendar in place with dates for data collection, data submission, self-assessment, CMT and Performance Reports. A standardised CMT scorecard for Directorate performance reports has been set up and PI owners are all provided with relevant statutory PI guidance.

Members discussed both local and national PIs and were informed that local PIs are developed by the Council who consider what is relevant and can be challenged by Officers. The sample national PIs taken were positive.

Members noted that the WAO had expressed its appreciation to Mrs Scammell and all the staff involved with the work undertaken in their area of activity.

The Scrutiny Committee thanked Ms Byrne for her informative presentation and for responding to queries raised during the course of the debate.

5. REQUEST FOR REPORT ON COMPLAINTS AND REPRESENTATIONS - CAERPHILLY HOMES

Catherine Forbes-Thompson (Scrutiny Manager) provided Members with an update on the request for a report to be presented to Policy and Resources Scrutiny Committee relating to housing complaints and representations.

It was explained that at the meeting of the Audit Committee on 11th March 2015, a request was made for a report to be presented to the Policy and Resources Scrutiny Committee in

relation to complaints about Caerphilly Homes because Members were specifically concerned about housing complaints. The report was subsequently presented to the Policy and Resources Scrutiny Committee on 30th September 2015.

Members were informed of the process in bringing this report to Committee and were reminded of the recent Scrutiny review and its recommendations. The Council is taking steps to reduce the pressure on scrutiny agendas by limiting the number of items for discussion to 4 per agenda and that each Scrutiny Committee will also discuss its Forward Work Programme at each meeting. In addition, Scrutiny Chairs are now able to add urgent items to work programmes.

The Audit Committee thanked Mrs Forbes-Thompson for the report and noted the contents.

6. REVIEW OF A) THE CORPORATE COMPLAINTS POLICY AND B) THE POLICY AND PROCEDURE OF DEALING WITH UNACCEPTABLE PERSISTENT AND UNREASONABLE ACTIONS BY COMPLAINANTS

Gail Williams (Interim Head of Legal Services) presented the report that sought views on the changes proposed to the Corporate Complaints Policy as set out in Appendix 1 of the report and the current Policy and Procedure for Dealing with Unacceptable, Persistent and Unreasonable Actions by Complainants as set out in Appendix 2, prior to its presentation to Cabinet.

Members were informed that on the 12th December 2012 the Audit Committee considered the implementation of the Council's new Corporate Complaints Policy which was subsequently endorsed by Cabinet and implemented on 1st April, 2013. The policy was developed with a view to ensuring that complaints were dealt with in a consistent manner across Wales with the significant change being the number of stages in the process being reduced from three to two. This provision remains prescriptive and cannot under any circumstances be varied. The Audit Committee receives six monthly update reports on the complaints received under the Corporate Complaints Policy and has recently received an Annual report reviewing the complaints policy for the period 1st April 2014 to 31st March 2015. The Audit Committee were advised that the policy is working well and there are no proposals to significantly amend the Policy other than to include those referred to in Appendix 1 of the report.

It was explained that the introduction of the Policy and Procedure for Dealing with Unacceptable Persistent and Unreasonable Action by Complainants was considered by Audit Committee on 6th November 2013 and adopted by Cabinet in November 2013. The Policy is subject to a two yearly review, this was due in November 2015. Members were informed that it remains the case that the majority of complainants pursue their complaints with the Authority in an appropriate manner. However a small number of complainants pursue their cases in a way that can impede investigation of their complaint or have significant resource implications in dealing with the case, for example the sheer number or nature of their enquiries may lead to them being considered as persistent. Members were advised that although there have been no formal referrals under this Policy since its introduction in November 2013, Officers have had regard to its provisions when considering the actions of any complainant whose behaviour is becoming unacceptable or persistent in nature. As such it remains a useful tool to Officers when dealing with complainants under the Corporate Complaints Policy.

In concluding, Mrs Williams confirmed that telephone calls are not recorded within Legal Services relevant notes are maintained and this is currently manageable.

Following consideration and discussion, it was moved and seconded that the recommendations in the report be approved and recommended to Cabinet. By a show of hands this was unanimously agreed.

RESOLVED that for the reasons contained in the Officers report it be recommended to Cabinet that:-

- (i) the changes proposed to the Corporate Complaints Policy as set out in Appendix 1 of the report be agreed;
- (ii) the current Policy and Procedure for Dealing with Unacceptable, Persistent and Unreasonable Actions by Complainants as set out in Appendix 2 of the report be agreed.

The Committee thanked Mrs Williams for her report.

7. REGULATOR PROPOSALS FOR IMPROVEMENT PROGRESS UPDATE

Ros Roberts (Corporate Performance Manager) introduced the report and updated members on the progress against the proposals made by all regulators since the Audit Committee in May 2015.

Since May 2015, 10 proposals have been addressed and 4 new ones have come onto the proposal register, 2 from the Financial Resilience Report and 2 that were transferred from the Improving Governance Panel, who have now disbanded following successful completion of their action plan.

Members were advised that the Council currently has 24 proposals, 10 of which have been addressed and should now be closed following their consideration by Audit Committee. Closing 10 proposals would leave 14 outstanding as of the end of November 2015. There are only 4 new proposals which are included in the above figures. 2 of the new proposals relate to Financial Resilience work, which are not statutory recommendations. They are suggestions for improvement and are included for the first time into this register for monitoring at the Audit Committee.

In terms of Asset Management, Members were informed there were 6 proposals outstanding and there has been no further progress made on this recommendation as previously agreed with the Policy and Resources Scrutiny Committee. Until the financial/political future for the Authority becomes clearer it is difficult to foresee any immediate progress. Individual strategies are being formulated as part of the Council's MTFP considerations. Mrs Scammell reassured Members that an Asset Management Group has been established that reports to Cabinet. The Authority has a duty to ensure the market value is received for assets sold. The Committee were informed that although there is no strategy in place, the principle adopted is trying to keep front line services functioning.

In conclusion, Ms Roberts confirmed that good progress had been made overall.

The Chair thanked the Officer for her report and Members questions were welcomed.

Following consideration and discussion, it was moved and seconded that the recommendation in para 9.1 of the report be noted (by a show of hands this was unanimously agreed) and the recommendation in relation to para 9.2 be approved (by a show of hands and in noting there was 1 abstention) this was supported by the majority present).

RESOLVED that for the reasons contained in the Officers report:-

- (i) the content of the report be noted and it be agreed to close the proposals that are noted as 'recommended to be closed' within Appendix A of the report;
- (ii) the merging of recommendations as detailed in para 4.7 of the report be approved.

8. CORPORATE RISK MONITORING

Colin Jones (Head of Performance and Property Services) provided Members with an update of the Corporate Risk Register in accordance with the recommendations to Audit Committee at their meeting 17th September 2013.

The Audit Committee were afforded the opportunity to satisfy itself that appropriate arrangements are in place for the council's risk management processes to be regularly and robustly monitored and scrutinised.

He advised that Members have a critical role to play in evaluating the council's risk management arrangements and in particular understanding how the council identifies, manages and, where possible, mitigates/removes risk. Risk Management is crucial to the effective delivery of council services.

At its meeting on 17th September 2013, Audit Committee accepted the council's new Risk Management Strategy and supporting Guidelines, which were subsequently approved by Cabinet on the 2nd October 2013.

The Strategy identified the role of Audit Committee on the risk management process as being:

- Review the effectiveness of the risk management and internal control framework.
- Review the Council's Risk Management Strategy and how it is being implemented.
- Review and challenge the risk register and resultant action plans for the council's key strategic and corporate risks.
- Satisfy itself that robust processes and procedures exist and are applied for the management of operational risks including health and safety risks.

Members were advised that for some time Corporate Management Team (CMT) has identified and monitored the council's key corporate risks. Monitoring arrangements have been strengthened following the introduction of the Risk Management Strategy. CMT now monitor the Council's Corporate Risks on a monthly basis and report progress to Cabinet on a regular basis. The Strategy identifies that the Corporate Risk Register should be owned and understood by Cabinet and CMT. It also recognises that Audit Committee would be the guardians of the risk management strategy and should satisfy itself that it is being adhered to.

It was explained that a programme of Risk Management Training has been introduced for members commencing with Audit Committee (30th October 2013). Cabinet Members have also received training. Further and continuous training will be provided to satisfy one of the Proposals for Improvement identified in the Auditor General's Corporate Governance Follow Up Report.

The Audit Committee thanked Mr Jones for his report and full discussion ensued.

Having fully considered the report, it was moved and seconded that the Audit Committee accept the Corporate Risk Register Update. By a show of hands this was unanimously agreed.

RESOLVED that the Corporate Risk Register Update be accepted.

9. UPDATE IN RESPECT OF THE AREA FOR IMPROVEMENT IN THE ANNUAL GOVERNANCE STATEMENT FOR 2014/15

Catherine Forbes-Thompson (Scrutiny Manager) presented the report and advised the Audit Committee of the progress in respect of the area for improvement agreed in the Annual Governance Statement for 2014/15 'to improve the effectiveness of current scrutiny arrangements'.

Members were informed that in June 2015, Audit Committee agreed an area for improvement 'The effectiveness of the current scrutiny arrangements'. The report provides an update on the progress made to date. Council approved 20 recommendations to improve the effectiveness of Scrutiny on 6th October 2015, following the Scrutiny Review. These will be implemented between October 2015 and May 2016, and will be reviewed via a self-evaluation process after 12 months.

It was explained that each Scrutiny Committee will discuss their respective forward work programme in detail in February 2016 and the limit of no more than 4 agenda items will be introduced from the Committee meetings after April 2016.

Members were advised that communication, engagement and training as well as detailed protocols and guidance will be essential to ensuring successful implementation.

The Committee thanked Mrs Forbes-Thompson for her report and noted the contents.

10. AUDIT COMMITTEE FORWARD WORK PROGRAMME

The Forward Work Programme up to September 2016 was presented for Member consideration.

Having fully considered its detail the Audit Committee noted its content.

11. INFORMATION ITEMS

The Committee received and noted the following information items:-

- (1) Examples of a Partially Upheld Complaints Under the Corporate Complaints Policy.
- (2) Regulation of Investigatory Powers Act 2000.
- (3) Officers Declarations of Gifts and Hospitality.
- (4) Certificate of Compliance Audit of Caerphilly County Borough Council's Assessment of 2014-15 Performance.
- (5) Annual Audit Letter Caerphilly County Borough Council Partnership and Collaborations Work Programme.
- (6) Corporate Governance Panel Minutes 22nd May 2015.
- (7) Corporate Governance Panel Minutes 28th September 2015.

The meeting closed at 11.30am.

Approved as a correct record and subject to any amendments or corrections agreed and recorded in the minutes of the meeting held on 9th March 2016, they were signed by the Chair.

CHAIR	

Agenda Item 4



AUDIT COMMITTEE – 9TH MARCH 2016

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 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 Corporate Business Continuity Management Plan has been developed 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.
- 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. 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.

- 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. Where services have identified a need in relation to accommodation and IT availability an organisation wide view is required and a task and finish group was established in order to assess the requirements. The Corporate Business Continuity Management Plan at Appendix 1 sets out organisational arrangements for the prioritisation of accommodation and IT resources in the event of a business disruption.
- 4.5 Each service has its own business continuity management arrangements. Throughout the business continuity analysis process, it became evident that two of the key risks to continued service delivery were the loss of, or disruption to Information Technology and Council Premises. The Corporate Business Continuity Management Plan has been developed for both these areas and provides structure for maintaining and/or restoring existing services and for providing alternative facilities to support the continuity of service delivery.

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 notes the Corporate Business Continuity Management Plan.

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

Colin Jones, Head of Performance & Property Service

Paul Lewis, IT Development Manager Mark Faulkner, Senior Facilities Manager Gwyn Williams, Acting ICT Operations Manager Ian John Martin, Emergency Planning Officer Ceri Edwards, Environmental Health Manager Donna Jones, Health and Safety Manager

Mike Eedy, Finance Manager Shaun Watkins, HR Manager

David A. Thomas Senior Policy Officer (Equalities and Welsh Language)

Background Papers:

Audit Committee Reports of 5th March 2014, 10th September 2014 & 11th March 2015 entitled "Business Continuity Management", and of 10th December 2014 entitled "ICT Disaster Recovery Arrangements".

Appendices:

Appendix 1 - Corporate Business Continuity Management Plan

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CORPORATE BUSINESS CONTINUITY MANAGEMENT PLAN

VERSION: DRAFT

Date: February 2016



Introduction

Caerphilly County Borough Council delivers a diverse range of day to day activities which if interrupted for any reason could be highly disruptive to our communities and stakeholders.

Serious disruptions can happen at any time. When they do we must ensure that we are resilient and capable to respond effectively so we can continue to deliver the critical aspects of our service delivery and reduce any impact.

The Council is therefore committed to ensuring that robust and effective business continuity management is a key mechanism in restoring and delivering continuity of key services.

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Purpose and Scope

Purpose

The purpose of this Plan is to:

- Provide a strategic framework for maintaining the Council's identified critical services in the event of serious disruption
- Outline the co-ordination/command and control arrangements for responding to a corporate business continuity incident
- Where possible restore all affected council services disrupted during an incident in a structured way within a reasonable timescale
- Ensure the welfare, safety and security of staff, their environment and members of the public who use the affected council services
- Communicate with staff, suppliers/partners and the public
- Provide a flexible framework for the overall business continuity management response

To assist the above, detailed operational arrangements are included within this plan. These include schedules of identified critical services, relocation options and IT requirements. The schedules focus on the first 24hours of a major disruption. However, to assist medium to long term decision making, also included in the appendices are 'Identified Critical Services Alternative Workspace Schedules' for 1-5 days and 5+ days.

Unless necessary this Plan will not replicate information contained within the Service Area Business Continuity Arrangements. Where appropriate reference to information contained in other plans will be made.

Scope

This plan covers the business continuity management of the identified critical services provided by Caerphilly County Borough Council. During the business continuity analysis process, it was recognised that some service areas are reliant on the provision of services from third party providers. Although the Council's Business Continuity Management Policy Statement includes a requirement for each nominated supplier to provide, for evaluation, a business continuity plan, this Plan does not provide business continuity management for those providers.

As stated this Plan is specifically designed to ensure that the Council can continue to maintain identified critical services in the event of serious emergency or disruption. Should a Major Incident occur which, with or without warning; "may cause or threaten death or injury, damage to property or the environment or disruption to the community," and because of its scale cannot be dealt with as part of Caerphilly County Borough Council's day-to-day activities, then the Council's Corporate Major Incident Plan should be activated.

However, dependent on the severity and scale of the incident or emergency, both the Corporate Business Continuity Management Plan and Corporate Major Incident Plan could be activated at the same time.

Business Continuity Planning Process

Why We Plan

Business continuity is defined as 'the process of identifying potential threats to an organisation's business operations', and as a process 'which provides a framework for building organisational resilience with the capability of an effective response that safeguards the interests of its key stakeholders, reputation, brand and value-creating activities.' (ISO22301:2012)

The primary legislation that requires the Council to have business continuity plans in place is the Civil Contingencies Act 2004. Under the act the Council is designated a Category One responders and as such has a number of duties placed upon it. One of these duties is to have in place plans and procedures to 'ensure that they can continue to perform their functions in the event of an emergency, so far as is reasonably practicable'.

The Act requires the Council to have place plans to ensure that we can:

- Continue to exercise our civil protection (emergency planning) functions and
- Continue to perform our ordinary functions (day to day activities)

Therefore the duty relates to all of the functions that the Council delivers and not only our emergency responsibilities.

In undertaking Business Continuity Management, it is suggested good practice to align the process with recognised standards.

In developing the Council's Business Continuity Management plans and procedures we have set our framework for compliance in line with the best practice guidelines produced by the International Standards Organisation:

- ISO 22301:2012 'Societal Security Business continuity management systems Requirements' and
- ISO 22313:2012 'Societal Security Business continuity management systems Guidance'

How We Plan

The first step in the Business Continuity Management process is to establish a Policy and Strategy. The 'Business Continuity Management Policy Statement' and 'Business Continuity Management Strategy' were developed and set out the framework for our management programme. Both key documents were endorsed by the Corporate Management Team.

Understanding the organisation is a key aspect of the business continuity management lifecycle. To achieve this, an analysis of Council functions and services was undertaken to determine the critical functions, their vulnerability and the actions required to maintain continuity following a major disruption.

Business Impact Analysis:

Each service area was required to complete a Business Impact Analysis form. Through a series of questions, it was determined if the non delivery of any part of their service would:

- cause a risk to life or injury to a person
- have an effect on the public
- have a serious effect on revenue and/or property
- cause a serious contract violation
- have an adverse effect on the reputation of the council

If a service area answered yes to any of these initial questions, they were required to continue by identifying the urgency of each of their functions by assessing the impact over time of an interruption.

Risk Assessment:

For those functions determined as critical in the Business Impact Analysis, the next step was to consider the effect of a number of identified risks on their service delivery. These risks included:

- loss of staff
- loss of utilities
- loss of key suppliers/partners
- loss of systems (IT and telecommunications)
- loss of or access to premises

The Risk Assessment process considered the impact of each risk and the likelihood of the risk occurring. In addition the process identified what arrangements are currently in place and what additional activities would be required to mitigate the risk. Using an industry standard risk matrix, each function was able to score each risk 1 to 5 (low/very high) for both impact and likelihood.

Action Plans:

The final part of the analysis process was the completion of Action Plans for any function whose risk score was medium, high or very high.

This identified the actions that are to be taken to ensure that the service areas are able to maintain the critical activities that underpin the delivery of the key functions and services following a major disruption.

Business Continuity Management Structure

To ensure the Council can provide robust, effective and integrated management across all stages of a serious business continuity disruption, the following management structure has been put in place.

By their nature, all incidents are different. Therefore, this structure is designed to be flexible and allows the Council to respond at an operational, tactical and strategic level.



Business Continuity Management Response Team

The Business Continuity Management Response Team provides the strategic direction to the Council's response to a serious disruption which affects our ability to provide critical services.

The team will be headed by the Head of Public Protection or a nominated representative and will include senior managers supported by appropriate officers with Business Continuity responsibilities.

It must be noted that should the Business Continuity Management Response Team be activated due to the consequences of a major emergency or incident, it is highly likely that senior managers will already be engaged dealing with that incident and be part of the Corporate Major Incident Response Team. Therefore, it is important should this occur, that any nominated representatives attending either response team have the appropriate level of authority and are able to make strategic decisions.

In addition to providing the overall strategic direction, the Business Continuity Management Response Team will also consider:

- Implement the Corporate Business Continuity Management Plan
- Receive and consider situation reports
- Authorise expenditure
- Establish and maintain clear communication channels
- Keep Elected Members informed
- Consider requesting Mutual Aid

Directorate/Service Area Business Continuity Response Team

Should the nature of the disruption require Directorate/Service Area Business Continuity Response Teams will be convened. These teams will undertake their roles and responsibilities as outlined in the relevant Service Area Business Continuity Response Procedures. They will also support the Business Continuity Management Response Team and carry out any actions delegated to them.

Corporate Major Incident Response Team

The role of the Corporate Major Incident Response Team is to organise and coordinate the Council's response to a major incident and ensure that all steps have been taken to provide for the care of the public and welfare of staff.

Not all major incidents will require the activation of the Corporate Business Continuity Response Team. However, should both be running at the same time, then it is essential that close communication between both teams is maintained.

Corporate Management Team (CMT)

CMT consists of the Chief Executive and Directors. Other appropriate Senior Strategic Officers can also be included as required. CMT provides general strategic advice and therefore, if necessary, long-term strategic issues can be referred to them for consideration and guidance.

Elected Members

Elected Members could play a significant role in dealing with the impacts of a disruption to Council Services, in particular relaying information between the Council and the Community (and back again).

Business Continuity Management Planning Structure

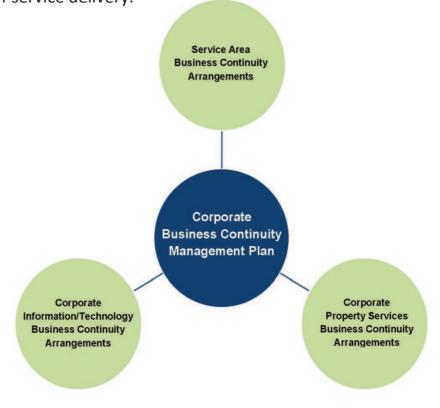
To support the Business Continuity Management Structure a set of integrated arrangements addressing the strategic, tactical and operation levels of response have been developed.

In addition to this Plan, which establishes the strategic objectives and overall management framework, each Service Area has its own Business Continuity Management arrangement. These outline the tactical and operational levels of response by:

- Setting out the Service Areas responsibilities for ensuring its identified critical services are maintained during a serious disruption
- Providing details of the critical services and how they are to be maintained
- Providing checklists for key personnel
- Providing contact details for key staff and other resources

Throughout the business continuity analysis process, it became evident that two of the key risks to continued service delivery were the loss of, or disruption to Information Technology and Council Premises.

Therefore, specific Business Continuity Management Arrangements have also been developed for both these areas and provide structure for maintaining and/or restoring existing services and for providing alternative facilities to support the continuity of service delivery.



Plan Activation

The following sections will detail the circumstances under which this plan will be activated and the processes used to activate it. The process of activation, including determining whether it is necessary to do so, is the responsibility of members of the Business Continuity Management Response Team, supported by appropriate nominated officers.

It must be noted that the incident causing the serious disruption to council services and therefore requires the activation of this Plan, may take place at the same time as, or be part of, an external emergency. Depending on the type of incident and the resources available, the response to the two activities will, as far as practical, be kept separate to ensure focus.

Triggers for Activation

This Plan will be activated when a serious disruption to Council services has or is likely to occur.

In particular the Plan may be activated under the following circumstances. This list is not exhaustive, but provides a general overview for consideration:

- An issue that is likely to cause widespread disruption to a number of identified critical council services
- A co-ordinated corporate response is required to deal with the disruption
- A disruption that cannot be dealt with through normal day to day procedures or the implementation of a number of Service Area Business Continuity Plans
- Existing response arrangements within Service Area Business Continuity Plans are in danger of being, or have been overwhelmed
- A key corporate site being rendered unavailable requiring the reallocation of staff or resources
- Significant or prolonged loss of Information Technology
- Prolonged severe weather conditions
- Any incident leading to significant loss of staffing levels, particularly in the identified critical service areas
- Special arrangements need to be implemented by the Council in order to deal with a disruption.

Identified Risks

Based on the risk assessments undertaken as part of the critical services analysis, the following list represents possible risks and threats to the delivery of key council services. This list is not exhaustive, but provides a general overview for consideration.

LOSS OF OR SIGNIFICANT DISRUPTION TO COUNCIL PREMISES

- Fire
- Flood
- Prolonged loss of utilities
- · Extreme weather
- Damage to premises

LOSS OF OR SIGNIFICANT DISRUPTION TO INFORMATION TECHNOLOGY/COMMUNICATIONS

- Loss of server access
- Loss of power
- Cyber attack
- Loss of information

LOSS OF STAFF

- Communicable disease outbreak (i.e. Pandemic Influenza)
- Industrial action
- Extreme weather

LOSS OF OR SIGNIFICANT DISRUPTION TO UTILITIES

- Loss of supply (offsite)
- Loss of supply (onsite)

LOSS OF OR SIGNIFICANT DISRUPTION TO SUPPLIES

- Failure of suppliers business continuity procedures
- Lack of suppliers business continuity procedures
- · Supplier going into receivership

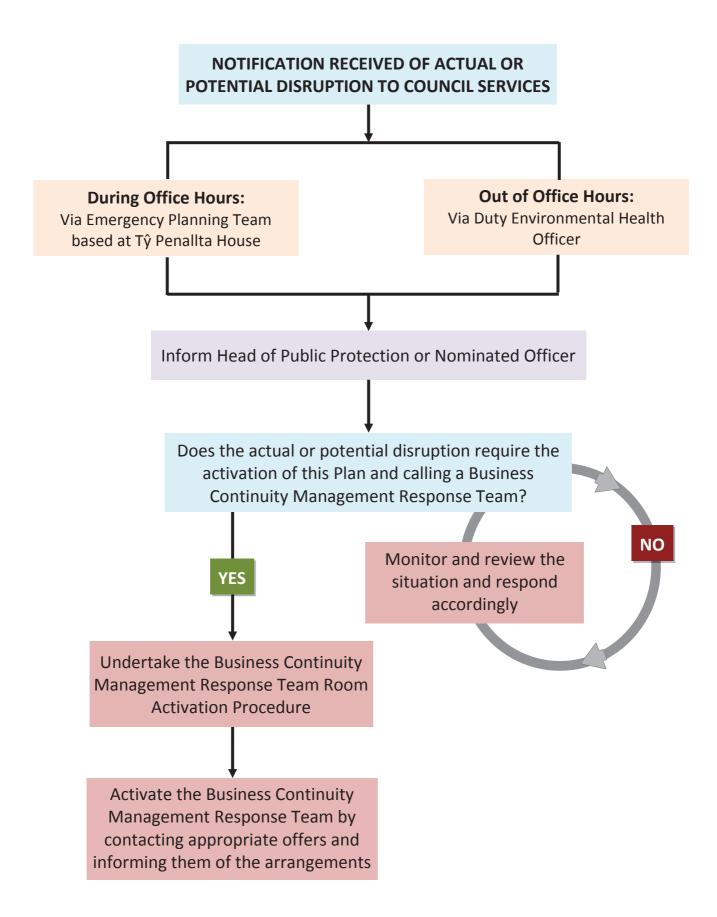
ADVERSE AFFECT ON THE COUNCIL'S REPUTATION

- Adverse media coverage
- Lack of public confidence
- Contract violation
- · Failure to deliver a legal or regulatory function

SERIOUS FINANCIAL RISK

- Lack of sufficient budget/financial regulation
- · Fines due to contract violation

Plan Activation Procedure

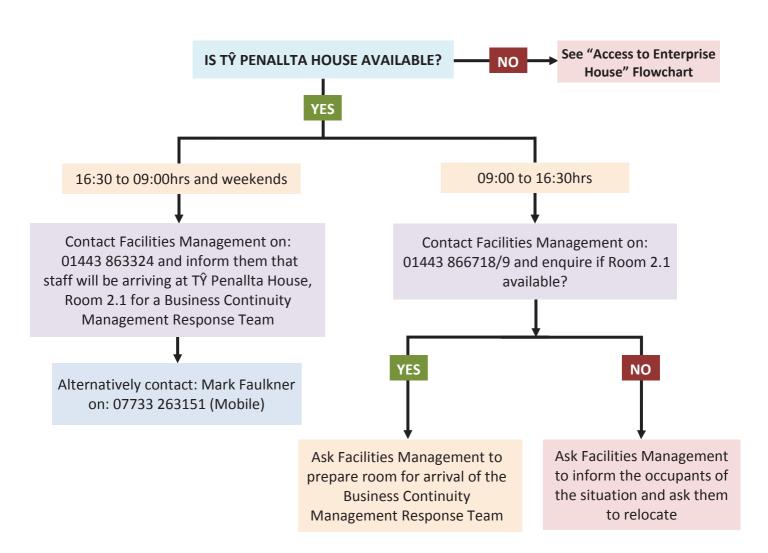


Business Continuity Management Response Team Room Activation Procedure

If there is a requirement for the Business Continuity Management Response Team to be established, it will convene in Room 2.1 which is situated on the Second Floor at Tŷ Penallta House.

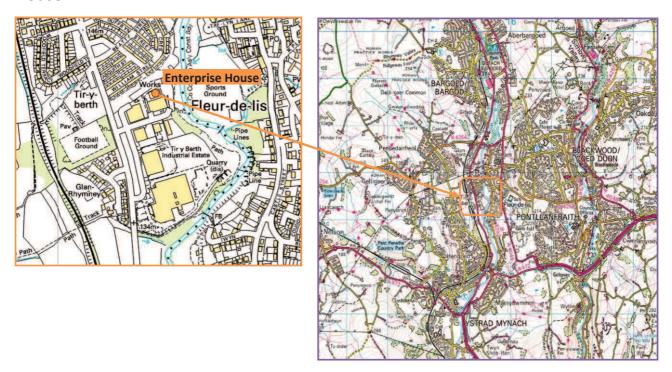
Facilities in the room Include: Power Sockets, Drop Down Screen, Conference Phone, Network Outlet, On Stand Flip Chart and Overhead Projector.

Access to Tŷ Penallta House

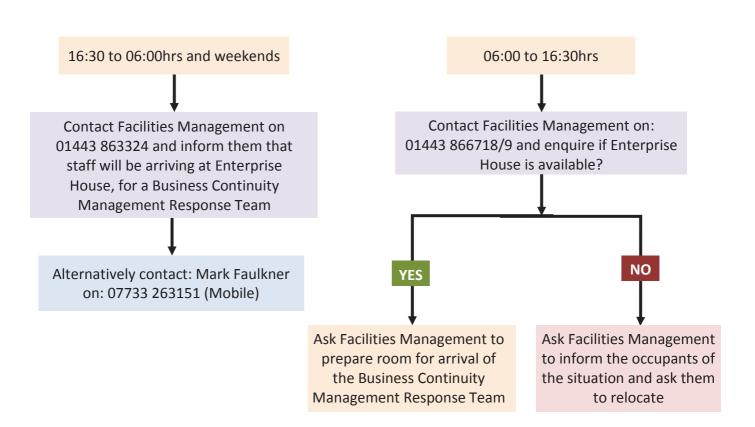


Alternative Location

Should Ty Penallta House be unavailable, the Team will convene at Enterprise House.



Access to Enterprise House



Incident Logging Procedure

The importance of maintaining a written log of events cannot be overstressed. It will be a vital document after the incident to recall actions taken, and will assist in reviewing any changes that may be needed in future responses. In the event of a public enquiry logs would be requested as evidence. For consistency the Council has adopted the following logging arrangements for major incident, whether business continuity or emergency related.

INCIDENT LOGGING ARRANGEMENTS

Purpose

This procedure establishes a uniform approach to recording of information relating to emergency situations.

This procedure applies whenever an officer receives a request to respond to a business continuity incident and outlines the procedure for recording all information relating to an incident.

START AND MAINTAIN INCIDENT LOG

Each incoming and outgoing telephone call, fax message, radio or other conversation must be recorded showing:

- Time (using 24hr clock notation)
- Message (From for incoming calls and To for outgoing calls)
- · Contact Name and Number
- Log Message/Request/Information
- · Leave a line between entries for clarification
- · At regular intervals check outstanding actions and attempt to complete
- When an action is completed, up-date the log detailing the outcome



When stand-down for the incident is declared, close the log, ensure that all sheets are gathered together and all outstanding actions have been completed. Give reasons if any are not completed.



Following the standing down of the incident, copies of the completed log are to be passed to Emergency Planning.

Communications

A critical aspect of the Council's response to a serious disruption to any of our services is the ability to effectively communicate both to the general public, our own staff and the media.

It is essential that we communicate promptly, accurately and confidently during the disruption from the immediate hours through the days or weeks that may follow.

The Corporate Communication Manager or nominate representative must attend the Business Continuity Management Team.

The Council's Business Continuity Communications Strategy will:

- Outline the management of communications with all interested parties including:
 - > Internal Staff;

> Elected members;

> Members of the Public:

> Contactors;

> Suppliers;

> Regulatory Authorities;

- > Media
- Determine the most appropriate methods/channels for communicating with each interested party, for example, internet, social media, local radio, public helpline and national newspapers;
- Include a selection of available communication methods/channels, so that the Business Continuity Management Team can be assured of availability even if the disruption incident impacts one or more channel;
- Identify the group or person who has the responsibility, authority and technical knowledge to deliver communication via each of the available methods/channels.
 Where possible established relationships should be used to communicate with interested parties;
- Identify who the public/media spokesperson(s) will be and then making sure that:
 - > The spokesperson(s) has been trained in their role;
 - > The process to create and issue media statements is known, including how they will be approved internally prior to release;
 - > There are sufficient people to brief the media at a central location as well as representatives who can be on site at a local incident if necessary, bear in mind that a major incident could be happening at the same time;
- Monitor and review responses to any issued communications via each of the available methods/channels to assess its effectiveness and adjust messages as required.
- Include pre-formatted messages or pre-written statements.

Health, Safety and Welfare

The Council has a duty to provide a safe environment for its employees, those acting under its direction and members of the public who may be affected by its activities.

Health and safety considerations are recognised as an integral part of the Council's activities and are a prime responsibility of Directors, Managers and Members.

During any major disruption, the Council will meet the requirements of health and safety legislation and, where possible, seek to demonstrate exemplary health and safety performance.

The Council's Corporate Health and Safety Policy recognise that any emergency/disruptive situation presents specific risks and every possible precaution should be taken to minimise these.

Where the major disruption results in staff being relocated to alternative/temporary accommodation, it is required that such accommodation, including any work equipment provided, meets the legal requirements set out in relevant Council policy. This includes but is not restricted to, safe access and egress, welfare provision, suitable work equipment including display screen equipment and appropriate lighting, heating and ventilation. Any alternative/temporary workplaces will be subject to Health and Safety inspection prior to occupation.

Managers have responsibility for the health, safety and welfare of their staff and teams.

In undertaking their duties, staff have a responsibility to:

- Take reasonable care of their own health and safety and that of others who may be affected by what they do or do not do
- Co-operate with their employer on health and safety (including acting on health and safety instructions)
- Correctly use work equipment provided by their employer, including personal protective equipment, in accordance with instructions and training
- Not interfere with or misuse anything provided for their health, safety and welfare
- Report hazards

If due to a significant disruption, staff are relocated, Managers must ensure that relocated staff are made aware of all relevant risk assessments and safe systems of work, and any appropriate equipment must be provided.

During and following an incident causing service disruption, the Council will have regard to the potential impact it will have on its staff. A 24 hour counselling service is available and should be considered as an integral part of meeting the emotional wellbeing of staff.

The Corporate Health and Safety Manager or nominate representative must attend the Business Continuity Management Team.

Financial, Insurance and Legal

Finance

The Council financial regulations and standing orders recognise the need to make arrangements for emergencies, as outlined in the Civil Contingencies Act, 2004 and associated regulations/guidance. Arrangements need to provide sufficient flexibility for Managers to act where additional expenditure is required to prevent or alleviate serious disruption to Council services.

Following the activation of this Plan, expenditure relating to the management of the Council's business continuity response will be co-ordinated and authorised by the Business Continuity Management Response Team.

During the response to a major disruption it will be necessary for proper financial control to be adopted and therefore, the Head of Corporate Finance or nominate representative must attend the Business Continuity Management Team.

Procurement of Goods & Services

It is recognised that the response to a significant disruption may result in normal procedures relating to the procurement of goods and services not being appropriate. Although every effort should be made to issue official orders, it may be necessary to make orders by telephone or other means. All such orders and resulting commitments should follow the retrospective ordering process.

Standing Orders:

The Council Standing Orders state "the following contracts are exempt from the requirements of theses standing orders"

- 4.1 (c) In a genuine emergency threatening public health, injury to persons or serious and immediate damage to property the Authorising Officers can take any necessary action to alleviate the threat. This power is limited to the alleviation of the threat and does not extend to any works beyond what is strictly essential.
- 4.1 (d) In circumstances where a matter, which is not deemed to be an emergency, but nonetheless is considered to be an urgent nature, arises, prior approval from the appropriate Head of Service must be given in writing. However, should the estimated expenditure exceed £20,000 approval must be sought from 2 of the following Officers:
- S151 Officers, Head of Legal or Head of Procurement subject to an upper threshold prior to the commencement of the procurement process of £100,000 for goods, works and services.

Where it has been necessary to procure under Standing Order 4.1 (c) every such case must be reported to the next available meeting of the Corporate Management Team.

Funding

Officers wishing to procure goods or services as part of the management/response to a significant disruption should use existing cost codes. In exceptional circumstances consideration regarding the use of an emergency expenditure code can be considered (if available). The use of this code is managed by the Business Continuity Management Response Team and the prior approval to use the emergency cost code, will be required in all cases.

Insurance

It is important that the Council's Insurance and Risk Manager is kept informed through all stages of the Council's response to make sure that any requirements set down by the Council's insurers are adhered to and correct procedures for subsequent insurance claims are met. In addition the Council's Insurance and Risk Manager will act as the point of contact between the Council and the Council's insurers

Legal

Legal Services advice will be required throughout the response and restoration to ensure that compliance with all legal, statutory and regulatory obligations are adhered to. In addition Legal services will also provide advice in giving statements to the media and ensure that adequate comprehensive records of all decisions taken are made.

Human Resources

Any major disruption to Council services including the subsequent restoration and recovery may have an effect on employees. Whether this is staff being relocated, adjusting to new work practices, or being informed that they will be required to not attend work for a period of time.

Any aspects of the response could be unsettling and it is the responsibility of Managers to ensure that staff are fully informed of the situation and kept up to date of the progress in returning to normality.

It is important that the concerns of employees are acknowledged and Staff counselling services will be made available through the Council's 24 hours counselling service.

The Council's Human Resources Division will maintain links with Heads of Service of the areas affected by the major disruption.

The Council's Head of Human Resources and Organisational Development advice will be sought throughout all aspects of the disruption especially should there be interim changes to employees working practices.

In addition, liaison with appropriate Trade Unions will be considered, particularly if the disruption results in significant changes to employees work practices.

To assist staff deal with the consequences of a major disruption, it is acknowledged that all staff should have an awareness of the Council's Business Continuity Management programme and their role within it.

Restoration and Recovery

Following any enactment of Service Area Business Continuity Arrangements, the Business Continuity Management Response Team will request departments or Service Areas to provide details of their plans for return to normal operations. This should include procedures for damage assessment, asset salvage, recovery and restoration. Details of any external services/contractors that might be required to assist must also be provided.

The Business Continuity Management Response Team/Directorate-Service Area Business Continuity Response Teams to ensure that appropriate liaison teams are established to liaise with the Emergency Services, External Service Providers and Contractors.

Throughout the restoration and recovery process it is essential that affected staff are kept informed of proposed timescales and if necessary new working arrangements.

It is also essential that any new working practices that affect the general public/partners are appropriately communicated.

Temporary Measures

The time required for temporary measures will depend on the type of incident and its severity. The Council will endeavour to return to normal activities as soon as practicable. Often this will require a phased approach. The aim is to recover all services within a reasonable and appropriate time frame beginning with the critical services. Regular assessments will be carried out by the Service Areas Business Continuity teams and progress fed back to the Business Continuity Management Response Team.

Stand-down

The Business Continuity Management Response Team will continue to meet to review the situation until such time as the scale of the incident has diminished to the extent that departmental teams can continue the recovery independently.

Operational Procedures

- Business Continuity Management Response Team Leader
 Organise and co-ordinate the Council's overall strategic response to a Corporate Business Continuity Incident.
- Business Continuity Management Response Team Member
 Assist the Team Leader in managing the corporate strategic response to a Corporate
 Business Continuity Incident
- Identified Critical Services Relocation Options (1-24hours)
- Identified Critical Services Relocation Option Activation Procedure
- Incident Log Sheet

Notes

Business Continuity Management Response – Team Leader

Lead Officer – (Head of Public Protection or Nominated Officer) On commencement of Confirm that relevant personnel are in attendance. Essential members include: Corporate Communications/Corporate Health and Safety/Corporate Finance/Corporate Property and meeting, Lead Officer to Corporate Information Technology and Communications. (Membership of the team can be reviewed as the disruption progresses) Ensure that a Committee Clark is part of the team to minute actions and decision made. Make sure that all members are briefed on the extent of the disruption. Make sure all essential information is recorded on a central whiteboard/flipchart. Make sure that everyone maintains a log of all actions taken including telephone calls made and received. Confirm with the Emergency Planning Team (During Office Hours or the Environmental Health Duty Officer (Out of Office Hours) which internal and multi-agency liaison arrangements have been established. Ensure that all team members have a copy of the Corporate Business Continuity Management Plan and appropriate BC arrangements including an incident log. Copies of relevant documents and stationary can be found in the cupboard within the Business Continuity Management Response Team Room. Review the scale and availability of resources required to respond to the disruption, while maintaining unaffected council services as far as possible. Actions to be undertaken Liaise with affected Directorate/Service Area Business Continuity Response Team to determine their procedures for damage assessments, asset salvage, recovery and restoration of services. Where possible identify timescales. Identify and assess any Health and Safety risks due to the disruption to services on the General Public and Council Staff. Make sure that effective information and communication systems are in place to enable liaison between all elements of the Council's Business Continuity Management response, including any Emergency Services liaison. Consider: • Nominating an officer within the team to co-ordinate information flow; • Provide regular verbal or written situation reports for appropriate staff. Arrange for the Communications Manager to implement the agreed Communication Strategy, including messages to the general public, Council staff, the Media and suppliers. Ensure that appropriate emergency financial arrangements are in place and communicated to staff responding to the disruption of service. Refer to the Head of Corporate Finance and the Financial, Insurance and Legal section of this Plan. Implement the appropriate Critical Services Relocation Option and Procedure. (See the Identified Critical Services Relocation Options (1-24hours) section of this plan for assistance). Corporate Property will undertake this procedure. If established ensure attendance at the Council Major Incident Response Team so that tactical and strategic decisions are agreed and implemented. Where required obtain technical and professional advice to inform the decision making process. Where necessary ensure that appropriate responding agencies have sufficient and accurate information so to enable the effective co-ordination of response. Manage requests for mutual aid assistance. Begin to address the issues concerning the medium and long-term relocation of affected services. Schedules of the identified critical services for 1 to 5 days and 5+ days are included in the appendices of this Plan to assist and direct this process. Begin to address the issues concerning the restoration of affected services including any temporary measures. Continuously review the response, updating or varying the strategy to reflect changing situations. If necessary, refer strategic issues to the Corporate Management Team.

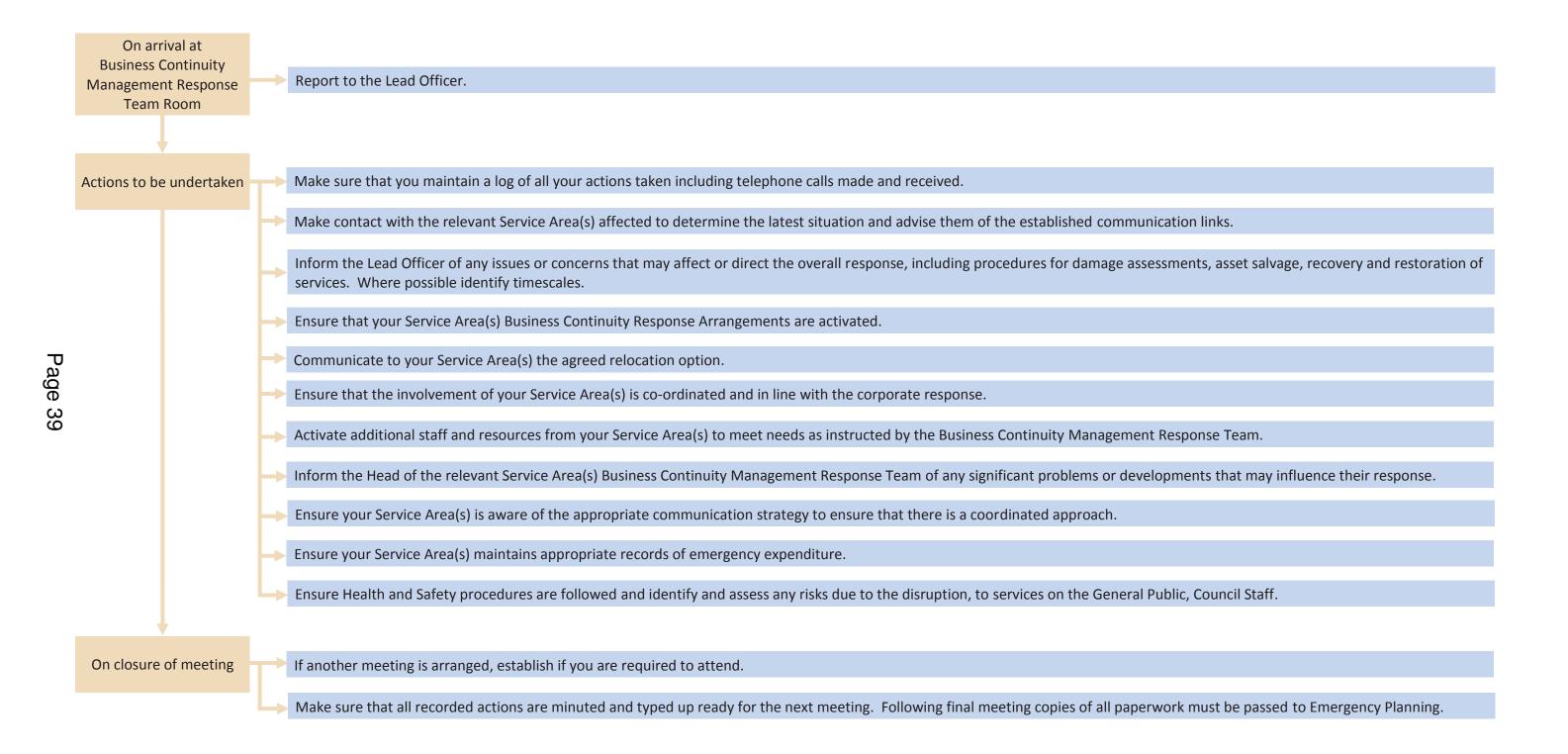
Make sure that all recorded actions are minuted and typed up ready for the next meeting. Following final meeting copies of all paperwork must be passed to Emergency Planning.

On closure of meeting

Arrange time and date of next meeting(s) if necessary.

Notes

Business Continuity Management Response – Team Member



Notes

Identified Critical Services Relocation Options (1-24hours)

Tŷ Penallta House

	ical Service Area	Number of Employees to	Workstation	IT Requirements (In addition to Corporate Servers	Additional	Relocation Options		
Requiring	g Relocation	be Relocated	Requirements	and Internet)	Requirements	Option 1	Option 2	Option 3
	Legal and Governance	4	2 x PC, 2 x IGEL	MOD GOV;Stellent.	-	Enterprise House	Tŷ Pontygwindy House	Tŷ Tredomen House
Legal Services and Governance	Legal Services	2	2 x PC	 Remote access to Secure Email GCSx and Egress; Secure remote access to legal case management system Sentinel Documentor. 	-	Enterprise House	Tŷ Pontygwindy House	Tŷ Tredomen House
Learning, Education and	Safeguarding	1	1 x PC	IDOX;TRIBAL SYNERGY;SIMS (School Based System);SWIFT.	-	Enterprise House	Tŷ Pontygwindy House	Tŷ Tredomen House
Inclusion	General ELL Directorate	1	1 x IGEL	IDOX;TRIBAL SYNERGY;SIMS (School Based System).	-	Enterprise House	Tŷ Pontygwindy House	Tŷ Tredomen House
	Corporate Communications Team	2	1 x PC, 1 x IGEL	-	-	Enterprise House	Tŷ Pontygwindy House	Tŷ Tredomen House
Corporate Services	Human Resources	2	1 x PC, 1 x IGEL	HR/Payroll (Trent)		Enterprise House	Tŷ Pontygwindy House	Tŷ Tredomen House
	Corporate Health and Safety	4	2 x PC, 2 x IGEL	-	-	Enterprise House	Tŷ Pontygwindy House	Tŷ Tredomen House

Tŷ Penallta House /cont'd

Identified	Critical Service	Number of	Workstation	IT Requirements	Additional		Relocation Option	s
Area Requi	iring Relocation	Employees to be Relocated	Requirements	(In addition to Corporate Servers and Internet)	Requirements	Option 1	Option 2	Option 3
	Environmental Health (General)	1	1 x PC	CIVICA APP;ARC GIS;SAP (Welsh Water web based system).	-	Enterprise House	Tŷ Pontygwindy House	Tŷ Tredomen House
	Environmental Health (Emergency Planning)	2	2 x Laptops or PC	 Access to Citrix Access Gateway; Access to GIS Packages (QGIS or ARCGIS). 	-	Enterprise House	Tŷ Pontygwindy House	Tŷ Tredomen House
	Environmental Health (Food and Health & Safety)	3	2 x IGEL, 1 x PC	IBID;Secure Email GCSX;EPI-INFO;CIVICA APP;FSSNET.	-	Enterprise House	Tŷ Pontygwindy House	Tŷ Tredomen House
Public Protection	Environmental Health (Pollution Control and Out of Hours Service)	1	1 x PC	GIS;Uniform (spatial mapping);CIVICA APP;Internet Access essential.	-	Enterprise House	Tŷ Pontygwindy House	Tŷ Tredomen House
	Licensing	2	1 x PC, 1 x IGEL	Diamond Database;Remote Access.	A room to meet applicants for public hearings, attendance by legal clerk & support from committee services. Quorum of members must attend. Access to hard copy files.	Enterprise House	Tŷ Pontygwindy House	Tŷ Tredomen House

Tŷ Penallta House /cont'd

Identified Critical Service Area	Number of	Workstation	IT Requirements (In addition to		R	elocation Optio	ns
Requiring Relocation	Employees to be Relocated	Requirements	Corporate Servers and Internet)	Additional Requirements	Option 1	Option 2	Option 3
Public Registrars Protection	3	3 x PC	-	 A Designated Register Office to include: A room in which civil marriages and civil partnerships could take place to accommodate a couple; 2 witnesses and 2 registration officers. A private facility in which legal notices could be taken. A secure location is also required to keep stocks of: Authorities for marriage Marriage Registers Manual Stock - Notice Forms 	County Bord	ould be anywhe ough Council Ard a separate ident he Registrar Gei Register Office	ea but would cifiable place neral and the

Tŷ Tredomen House

Identified Criti	cal Service Area	Number of Employees	Workstation	IT Requirements	Additional		Relocation Option	ons
Requiring Relocation		to be Requiremen		(In addition to Corporate Servers and Internet)	Requirements	Option 1	Option 2	Option 3
	Development Management and Building Control	3	3 x PC	• UNIFORM.	-	Enterprise House	Tŷ Pontygwindy House	Tŷ Penallta House
	Land Charges	1	1 x PC (must be Windows7)	 UNIFORM; Access to Internet to allow access to: TLC; NLIS; TM. 	Seating area required to meet public.	Enterprise House	Tŷ Pontygwindy House	Tŷ Penallta House
Regeneration and Planning	Local Land and Property Gazetteer (LLPG)	1	1 x PC	 UNIFORM; GMS EXCHANGE; FILEZILLA (Stand alone system located within service area); GEOPLACE (National Address Database to which we upload essential data); Access to Internet (essential requirement to upload data to Geoplace). 	-	Enterprise House	Tŷ Pontygwindy House	Tŷ Penallta House

Tŷ Dyffryn House

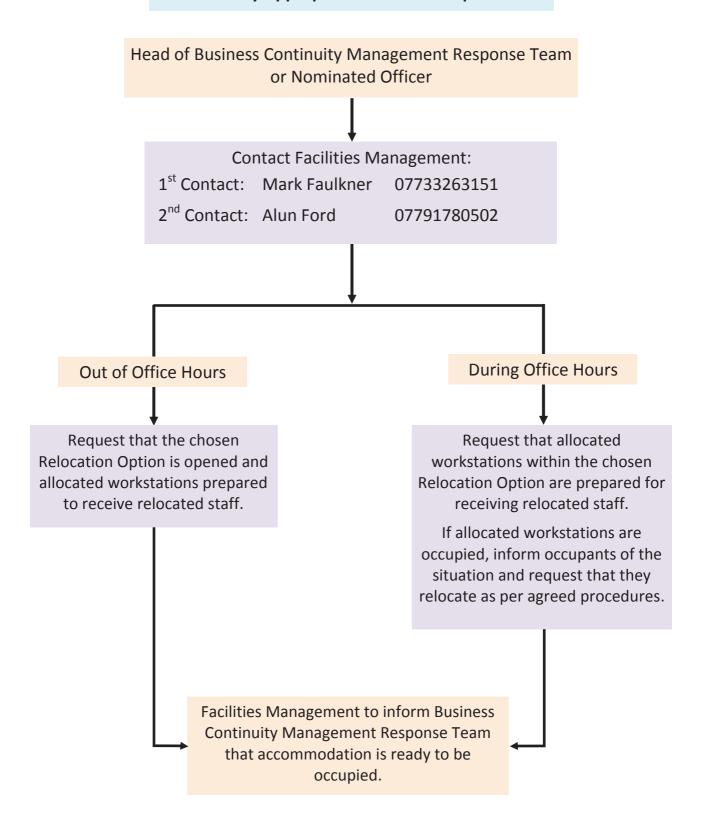
Identified Critical Service Area	Number of Employees to	Workstation	IT Requirements (In addition to Corporate	' Additional		Relocation Options		
Requiring Relocation	be Relocated	Requirements	Servers and Internet)	Requirements	Option 1	Option 2	Option 3	
Engineering Integrated Services Transport Unit	1	1 x PC	The Parkeon system is a bespoke software and hardware only located in Ty Pontllanfraith. All data generated by small bus operators through transactions on the ticket machines is stored on behalf of the operator by the Council. The information is critical to the business requirements of the operators		Enterprise House	Tŷ Penallta House	Tŷ Pontygwindy House	

Tiryberth Depot

	Identified Crit	Identified Critical Service Area		Workstation	IT Requirements (In addition to Corporate	Additional	Relocation Options			
'	Requiring	g Relocation	Employees to be Relocated	Requirements	Servers and Internet)	Requirements	Option 1	Option 2	Option 3	
	Community	Fleet Management	5	5 x IGEL	Fuel Web Based System.	-	Enterprise House	Tŷ Penallta House	Tŷ Pontygwindy House	
	and Leisure Services	Parks and Bereavement Services	2	2 x PC	 Access to BACAS System. 	-	Enterprise House	Tŷ Penallta House	Tŷ Pontygwindy House	

Identified Critical Services Relocation Option Activation Procedure

Business Continuity Management Response Team: Identify Appropriate Relocation Option



Incident Log Sheet

Sheet No /	Call Details/Actions Taken				
Incident	Call Detai				
	Contact No				
Date / /	Contact				
Officer Name					
fficer	F/T				
Ö	Time				

Appendices

- 1 5 Days Identified Critical Services Alternative Workspace Schedule
- 5+ Days Identified Critical Services Alternative Workspace Schedule
- Corporate Property Office Accommodation Schedule
- Information and Technology Recovery Schedule

1 – 5 Days Identified Critical Services - Alternative Workspace Schedule

10.0110111001101110	ical Service Area Relocation	Number of Employees to be Relocated and Current Location	IT Requirements (In addition to Corporate Servers and Internet)	Additional Requirements
Corporate Finance	All Functions	19 Tŷ Penallta House	 Capita Revenues and Benefits Capita Revenues and Benefits NNDR Financial Ledgers (e5) Accountis BACSTELIP COSMIS DLO payroll feeder 	-
Public Protection	Registrars	2 Tŷ Penallta House	-	 Ensure alternative private interview facilities can be made available for registration of births and deaths and to take legal notices. A secure location is also required to keep stocks of: Medical Certificates Cause of Death Coroner Forms Manual Stock - Authorities for disposal of bodies, register pages (birth, death and stillbirth), certificates.
	Trading Standards	3 Tŷ Penallta House	• CIVICA	-
Regeneration and Planning	Development Management and Building Control	6 Tŷ Tredomen House	• Uniform	-

1 – 5 Days Identified Critical Services - Alternative Workspace Schedule /Cont'd

	al Service Area Requiring Relocation	Number of Employees to be Relocated and Current Location	IT Requirements (In addition to Corporate Servers and Internet)	Additional Requirements
		20 Tŷ Penallta House	-	-
Adult Services-	Assessment & Care Management Functions - All Social Work Teams	15 Tŷ Pontygwindy House	-	-
Children Services- Business Support		15 Foxes Lane	-	-
	Business Support - Administrative Support Functions	6 Tŷ Penallta House	-	-

5+ Days Identified Critical Services - Alternative Workspace Schedule

Identified C	ritical Service Area Requiring Relocation	Number of Employees to be Relocated and Current Location	IT Requirements (In addition to Corporate Servers and Internet)	Additional Requirements
Corporate Finance	All Functions	52 Tŷ Penallta House	 Capita Revenues and Benefits Capita Revenues and Benefits NNDR Financial Ledgers (e5) Accountis BACSTELIP COSMIS DLO payroll feeder 	These are in addition to 19 workstations required for timescale 1 – 5 days.
	Licensing	4 Tŷ Penallta House	Diamond Database;Remote Access.	-
Public Protection	on Trading Standards	1 Tŷ Penallta House	• CIVICA	-
Community and Leisure Services		2 Tiryberth Depot	• BACAS	-

Corporate Property Office Accommodation Schedule

Office Name	Address	Estimated Number of Workstations	Contact Person	Telephone Number	Comments
Ty Gilfach	William St, Bargoed CF81 8ND	100 (60 SS/40 Housing)	Sharon Williams (SS) Deb Bishop (Housing)	01443 873580 01443 873519	NOT VOIP
Ty Pontygwindy	Pontygwindy Ind Est, Caerphilly CF83 3HU	150	Teresa Steele	02920 849700	VOIP
Mill Road Office	Mill Road, Caerphilly CF83 3FD	30	Mel Steer	02920 855020	NOT VOIP
Foxes Lane	3 Foxes Lane, Oakdale	80	Jane Jordan	01495 232828	NOT VOIP
Penmaen House	Penmaen Ind Est, Blackwood	30	Alison Lee	01495 235732	NOT VOIP
	Penmaen Road, Pontllanfraith, Blackwood NP12 2DG				NOT VOIP
	Unit 1	30	Paul Joseph	07879693904/	
Woodfieldside	Unit 2	2	rauriosepii	01495 235168	
Units	Unit 3	35			
Offics	Unit 4	45	Michaela Rogers	01495 235640	NOT VOIP
	Unit 6	30	Paul Joseph	07879693904/ 01495 235168	
Cherry Tree House	Carlton Drive, Pen y fan Business Park, Oakdale, NP11 4EA	83	Phil Davy	01443 864208	VOIP
Enterprise House	Tiryberth Ind Est, New Road, Tiryberth,CF82 8AU	44	Wayne Turner	01443 866901	Mostly VOIP
Dyffryn House	Dyffryn House Ind Est, Ystrad Mynach, Hengoed, CF82 7TW	80			
Tredomen House Nelson Road, Tredomen, Hengoed, CF82 7WF		200	Kersty Nightingale	01443 863304	Mixed VOIP - currently upgrading
Bargoed Contact Centre	1 St Gwladys Way, Bargoed, CF81 8AB	47	Kersty Nightingale	01443 863304	VOIP
Ty Penallta	Tredomen Park, Ystrad Mynach, Hengoed, CF82 7PG	940	Mark Faulkner	07733263151	VOIP

Information and Technology Recovery Schedule

Detailed Description	Priority 1	Priority 2	Priority 3	Priority 4	Priority 5
VMWare environment	Υ				
VisionCore Server	Υ				
Active Directory	Υ				
Domain Controllers	Υ				
Antivirus / Spyware	Υ				
Firewalls	Υ				
Internet Connection	Υ				
Firewall Management	Υ				
Network	Υ				
Caerphilly Website	Υ				
UPS	Υ				
Generator	Υ				
Air Conditioning	Υ				
Fire Protection	Υ				
VDI environment	Υ				
Patch Management	Υ				
Exchange	Υ				
Exchange Front end	Υ				
Telephony	Υ				
VDI	Υ				
TSM server		Υ			
Storage Area Network		Υ			
Tape Libraries		Υ			
Solidus			Υ		
Emergency Team Tiryberth			Υ		
Northgate front office CRM			Υ		
Civica App - Environmental Health			Υ		
ICS			Υ		
Social Services			Υ		
CACI Domiciliary Care system			Y		
Capita Revenues and Benefits			Υ		
Capita Revenues and Benefits NNDR			Υ		
IDOX EDRMS			Υ		
Financial Ledgers (e5)			Υ		

Information and Technology Recovery Schedule /Cont'd

Detailed Description	Priority 1	Priority 2	Priority 3	Priority 4	Priority 5
Capita Housing	_	_	Υ	-	
Accountis BACSTELIP			Υ		
Vubis Smart - Libraries (GEAC)			Υ		
CAPS UNIFORM - Land & Property Gazetteer			Υ		
CAPS UNIFORM - Planning & Building Control			Υ		
CAPS UNIFORM - Land Charges			Υ		
GIS (ArcView)			Υ		
MENTEC Income Management System inc. E- Payments Cash Receipting (Mentec)			Υ		
HR/Payroll (Trent)			Υ		
Schools Management (IDEAR)				Y	
Free School Meals (IDEAR				Υ	
Pupil Support (IDEAR)				Υ	
Early Years (IDEAR)				Υ	
Special Education Needs (IDEAR)				Υ	
Admission and Transfers (IDEAR)				Υ	
Content Management (Stellent)				Υ	
Consilium Total DLO system				Υ	
Gladstone plus2 Leisure Management system				Υ	
Smart connect smartcard system				Υ	
Strand Electoral Registration services system					Υ
Proactis E-Procurement system					Υ
Corporate Purchasing Card system					Υ
EXOR Highways system					Υ
Autocad systems					Υ
Confirm					Y
UMIS Cashless Catering system					Υ
Saffron Catering Services system					Υ
Citadel Door Access System Penallta House					Υ
COSMIS DLO payroll feeder					Υ
LACHS Insurance system					Υ
Matador					Υ
CASPAR Soc Services Receivership system					Υ
Helpdesk Heat Application					Υ

Plan Maintenance, Training & Exercising

Document Review and Maintenance

The Corporate Business Continuity Management Plan will be reviewed every two years. In addition, the Plan will be updated in the following circumstances:

- Structural, procedural or systems changes within the Council that would significantly affect the management of a major disruption to critical services;
- External changes that would significantly affect the management of major disruption to the Council's identified critical services;
- New national guidance;
- Recommended changes following testing/exercises;
- Recommended changes following a major disruption or the activation of this plan;
- Any other significant factors.

The Senior Emergency Planning Officer will be responsible for administrating any changes to the Plan.

Two versions will be available. An 'Uncontrolled' version will be widely distributed while a 'Controlled' version (containing contact numbers) will be circulated to appropriate officers.

Plan Training and Exercising

Belief in any plan is based on how well it works in practice.

The first step in making sure that any plan is effective, is for those with defined roles or are likely to be involved in its implementation are aware of the policies, principles, roles, responsibilities and procedures referred to in the plan.

A plan cannot be considered reliable until it is exercised and has proved to be workable. Therefore the second step is to maintain high levels of confidence in using the plan and this is achieved through regular testing and exercising.

The reason we test and exercise plans are to:

- Test well-established procedures;
- Develop staff competencies and give them practice in carrying out their roles in the plans;
- Validate the plan.

It is intended to use three main types of exercise to test the Plan:

- Workshop An exercise usually used to develop awareness about a subject through discussion.
- Table top A tabletop exercise is based on simulation, not necessarily literally around a tabletop. Usually, it involves a realistic scenario with a time line which may or may not be real time.
- Live A live exercise is a live rehearsal for testing a plan. Such exercises are
 particularly useful for checking logistics, communications and physical
 capabilities. They also make excellent training events from the point of view of
 experiential learning, helping participants develop confidence in their skills and
 providing experience of what it would be like to use a plan's procedures in a real
 event.

A comprehensive training and exercising programme will be organised by the Emergency Planning Team in conjunction with appropriate Business Continuity Management officer.

Business Continuity Management Contacts Directory

Name and Title	Office Telephone Mobile Phone E-mail Address	Out of Hours Number(s)

Document Control

Plan Distribution Schedule

Copy Number	Copy Holder	Position

Plan Amendment Schedule

Ar	mendment	Instruction	Amended By
Number	Date		

Produced By:
Emergency Planning Team
Caerphilly County Borough Council
Tŷ Penallta House,
Tredomen Park,
Ystrad Mynach, Hengoed, CF82 7PG

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AUDIT COMMITTEE – 9TH MARCH 2016

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 1st August 2015 to 31st January 2016.
- 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, is 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

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 1st August 2015 to 31st January 2016.

4.7 Review of Corporate Complaints

- 4.7.1 The data referred to below represents the number of complaints received from 1st August 2015 to 31st January 2016 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 4.7.4 (c) and an overview of the outcomes in respect of Stage 2 Complaints are set out in paragraph 4.7.4 (g) below.
- 4.7.3 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 have received separate reports on both issues in the past.
- 4.7.4 The total number of corporate complaints received across the Authority during this period is 86 comprising the following: -

% of total number of complaints received August 2015 – January 2016

8	Corporate	9.3
3	Education	3.5
29	Environment	33.7
42	Housing	48.8
3	Social Services	3.5
1	Other (cross Directorate)	1.2

4.7.5 A breakdown of the types of complaints are summarised as follows: -

Stage 1 Corporate Complaints

(a)	Title	Actual
	Number of Stage 1 complaints received in Corporate Services	8
	Number of Stage 1 complaints received in Education	2
	Number of Stage 1 complaints received in Environment	21
	Number of Stage 1 complaints received in Housing	35
	Number of Stage 1 complaints received in Social Services	3
	Number of Stage 1 complaints received Other (cross directorate)	<u>0</u>
	- , , , , , , , , , , , , , , , , , , ,	6 9

- (b) The total number of complaints received at Stage 1 were 69, of those 62 were responded to within timescale and 4 outside the timescale (5.8%), 3 are ongoing.
- (c) Of the 69 Stage 1 complaints, responded to 19, have been upheld, 35 were not upheld, 12 have been partially upheld and 3 are ongoing. The breakdown of outcomes for each Directorate is listed below.

Outcomes of Stage 1 complaints

	Upheld	Not Upheld	Partially Upheld	Ongoing
Corporate Services	1	2	4	1
Education	0	1	0	1
Environment	9	9	3	0
Housing	9	20	5	1
Social Services	0	3	0	0
Other (cross directorate)	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	19	35	12	3

Stage 2 Corporate Complaints

(d)	Title	Actual
	Number of Stage 2 complaints received in Corporate Services	2
	Number of Stage 2 complaints received in Education	1
	Number of Stage 2 complaints received in Environment	16
	Number of Stage 2 complaints received in Housing	12
	Number of Stage 2 complaints received in Social Services	1
	Number of Stage 2 complaints received Other (cross directorate)	<u>_1</u>
	. , , , , , , , , , , , , , , , , , , ,	33

- (e) The total number of complaints received at Stage 2 were 33 of those 30 were responded to within timescale and 1 outside the timescale 3.0% and 2 are ongoing.
- (f) Of the Stage 2 complaints, 17 were commenced at Stage 2 and 16 were escalated from Stage 1 to Stage 2; 2 within Corporate Services, 8 within Environment, 5 within Housing and 1 within Social Services.
- (g) Of the 33 Stage 2 complaints responded to, 7 have been upheld, 22 were not upheld, 2 were partially upheld and 2 are ongoing. The breakdown of outcomes for each Directorate is listed below.

Outcomes of Stage 2 Complaints

	Upheld	Not Upheld	Partially Upheld	Ongoing
Corporate Services	0	2	0	0
Education	0	1	0	0
Environment	2	12	2	0
Housing	5	5	0	2
Social Services	0	1	0	0
Other (cross directorate)	<u>0</u>	<u>1</u>	<u>0</u>	<u>0</u>
	7	22	2	2

4.7.6 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.

4.8 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 Again the types of complaints received have been wide ranging for example, housing recharges, planning processes, housing benefit, council tax, publications not produced bilingually. A brief overview of a selection of complaints received during this period is annexed at Appendix 1 for member's information. 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. Members will recall that as part of the Annual Complaints Report presented to Committee on the 9th September, the Group would be embarking on an analysis of complaints to focus on the causes of the complaints. The Group discussed a potential list of causes at its recent meeting in November and agreed to record causes against each complaint based on the following list:
 - 1 collaborative working,
 - 2 decision making,
 - 3 delay in service provision,
 - 4 officers contacted with public (including sensitivity/empathy of staff/politeness)
 - 5 policies/relevant legislation.
 - 6 accessibility of services,
 - 7 clarity/accuracy/timeliness of information,
 - 8 quality of work,
 - 9 openness/fairness/honesty,
 - 10 compliance with the complaints procedure.
- 4.8.4 The Group has commenced work to record the causes of complaints received, with a view to monitoring and evaluating the data and reporting and providing updates to this committee.

4.9 Ombudsman referrals

4.9.1 Since the last report to Audit Committee 10 complaints have been referred to the Ombudsman following the issue of the Council's Stage 2 response. The Ombudsman has decided not to investigate any of the complaints.

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.
- 4.10.2 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.
- 4.10.3 The Vexatious Complainants Policy together with the Corporate Complaints Policy were recently reviewed by the Group resulting in some minor changes being proposed to the Complaints Policy. There were no changes proposed to the Vexatious Complainants Policy. This Committee received a report on both policies on the 9th December, 2015, which were endorsed and subsequently agreed by Cabinet on 20th January, 2016. The amended Corporate Complaints Policy has been uploaded on the intranet and internet.

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.
- 5.2 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. Policy and Resources Scrutiny and Cabinet consider these reports 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

Lisa Lane, Solicitor

Jan Carter, Senior Housing Officer

Gemma Hoare, Housing Officer (Customer Services)

David Titley, Customer Services Manager Rob Waggett, Customer First Team Leader

Kim Davies, Customer Services/Complaints Officer

Joanne Winstone, 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

Appendices:

Appendix 1 - Brief Overview of a Selection of Complaints Received

Appendix 1

Stage 1 Complaint – Regeneration and Planning

A complaint was received regarding the service offered by the Council in respect of knotweed treatment. Last year a procedure was adopted where the Council has offered a three year programme for which a resident would pay £150.00 after the first year's treatment had been carried out. The reason for non-treatment was that payment had not been received as the resident had opted for one years' treatment. The resident was contacted and the options discussed resulting in the resident deciding to pay for another two years treatment. The complaint was not upheld.

Stage 1 complaint - Community and Leisure Services

A complaint was received as a resident had received an email concerning a football camp flyer which had been sent in English only. The flyer had been produced in both English and Welsh but unfortunately due to an administrative error the Welsh version was not distributed. An apology was given in respect of the error and a bilingual flyer was also provided. In addition staff were reminded to check all necessary correspondence is bilingual before sending out. The complaint was upheld.

Stage 2 complaints – Housing

The housing department was contacted by a concerned family member in relation to electrical rewiring works being carried out at a designated older person's accommodation. It was brought to officer's attention that the location of the consumer unit was not accessible for the tenant and could, therefore, remove some level of independence for the tenant and possibly raise some safety issues. The situation was reviewed and the consumer unit was relocated to an accessible position. It was also agreed that this situation would be taken into consideration in all subsequent rewires in this type of property. The complaint was upheld.

The housing department was contacted by a tenant who had received a recharge for a missed appointment. The investigation revealed that an attempt had been made to contact the tenant by telephone to arrange the appointment but as there was no answer a letter was hand delivered giving an appointment in 2 days' time. The tenant subsequently missed the appointment claiming they had not had sufficient notice to make themselves available or rearrange the appointment. The complaint was upheld and working practices amended so that any appointments arranged in writing would give at least 7 days' notice.

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AUDIT COMMITTEE - 9TH MARCH 2016

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 2016/17.

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 2016/17. The approach is broadly similar to previous years but reflects the ongoing development of the plan in terms of coverage and risk identification.
- 3.2 It should be noted that the resources on which the plan is based have remained as the previous year as no savings were required to be made in 2016/17.

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 2016/17.

8. REASONS FOR THE RECOMMENDATIONS

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

Author: R Harris, Internal Audit Services Manager

N Scammell, Acting Director of Corporate Services and Section 151 Officer S Harris, Acting Head of Corporate Finance Consultees:

Appendices: Appendix 1 - Annual Audit Plan 2016/17

CAERPHILLY COUNTY BOROUGH COUNCIL

INTERNAL AUDIT SERVICES

ANNUAL AUDIT PLAN 2016/17

1. Purpose of the Report

The purpose of the report is to outline the intended allocation of audit time for the financial year ending 31st March 2017.

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 2016/17 Annual Plan is broadly based on an on-going assessment of risk which makes use of data gathered from various 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 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 2016/17 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 2016/17 is 8.2 FTE's which continues to be in line with the Welsh average.

4. Plan

4.1 An outline of the 2016/17 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 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 As the service widens its scope of coverage into areas such as assisting on whistleblowing and other investigations and supporting working groups looking at safeguarding and externally funded grant arrangements etc. audit value is gained which contributes to the overall assurance process. Likewise the numerous grants that now require internal audit review are also used to feed the assurance process.
- 4.2.3 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.
- 4.2.4 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.
- 4.2.5 A total of 697 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 2016/17 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 345 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 2016/2017 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 and support of the arrangements in respect of the WHQS works due to the ongoing recognition of the inherent risks to a satisfactory conclusion of the scheme.
- 4.4.3 A total 155 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 continues to be a critical factor 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 113 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 140 days have been allocated to these tasks.

4.8 Overheads

4.8.1 For 2016/17 the allocated overhead is 621 days. The largest element of this figure relates to bank holidays and annual leave which in total stands at 289 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. <u>Summary</u>

- 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.
- 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 2016/17 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.

Richard M Harris, Internal Audit Manager, Internal Audit Services March 2016 This page is intentionally left blank

Caerphilly County Borough Council

Summary of the Audit Plan 2016/2017

Service area	Main Areas covered	Days
Education	Establishment reviews	233
	Central systems	40
Social Services	Establishment visits	48
Coolar Corvices	Central systems	123
Engineers	Central systems & compliance	110
Planning/ Regeneration	Central systems & compliance	39
	Establishment visits	16
Community & Leisure	Establishment visits	48
	Central systems	35
Public protection	Central systems	40
Corporate Services		
	Housing	100
	Legal, governance and members services	15
	Procurement	30
	Human Resources	70
	ICT & Citizen engagement	5
	Performance & Property	75
	Corporate finance / Central systems	110
	Corporate / cross cutting / non audit	313
Contingency	incl. General advice	80
SUBTOTAL	Allocated work	1530
	Overheads	621
TOTAL		2151

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Caerphilly County Borough Council

INTERNAL AUDIT SERVICES

Schedule of planned visits 2016/2017

Primary Schools

MAESYCWMMER PRIMARY CRUMLIN HIGH LEVEL PRIMARY ST GWLADYS PRIMARY TY SIGH PRIMARY ABERCARN PRIMARY CWMCARN PRIMARY YSGOL GYMRAEG CWM GWYDDON YSGOL BRO SANNAN YSGOL GYMRAEG TRELYN UPPER RHYMNEY PRIMARY PONTLOTTYN PRIMARY DERWENDEG PRIMARY TYNEWYDD PRIMARY
RHIW SYR DAFYDD PRIMARY
HENDREDENNY PARK PRIMARY
TYNYWERN PRIMARY
WHITE ROSE PRIMARY
FOCHRIW PRIMARY

PENTWYNMAWR PRIMARY TWYN PRIMARY YSGOL GYNRADD GYMRAEG PANTSIDE INFANTS

GLAN Y NANT LEARNING CENTRE

Comprehensive Schools

YSGOL GYFUN CWM RHYMNI CWMCARN HIGH SCHOOL ST. CENYDD COMPREHENSIVE BLACKWOOD COMPREHENSIVE RISCA COMPREHENSIVE LEWIS SCHOOL PENGAM

Leisure Centres

PONTLLANFRAITH LEISURE CENTRE
CWMCARN LEISURE CENTRE
St CENYDD LEISURE CENTRE

BEDWAS LEISURE CENTRE RISCA LEISURE CENTRE HEOLDDU LEISURE CENTRE

Other

PARC CWM DARRAN
CWMCARN FOREST DRIVE VISITORS CENTRE

DERI LIBRARY RISCA LIBRARY PENGAM LIBRARY

Social Services

BRONDEG DAY CENTRE BRODAWEL DAY CENTRE

HEOL ANEURIN COMMUNITY HOME

TY CLYD HFE

MIN-Y-MYNYDD RESOURCE CENTRE MARKHAM RESOURCE CENTRE

3 CAERFFILI

Agenda Item 7



AUDIT COMMITTEE - 9TH MARCH 2016

SUBJECT: AUDIT COMMITTEE FORWARD WORK PROGRAMME

REPORT BY: ACTING DIRECTOR OF CORPORATE SERVICES & SECTION 151

OFFICER

- 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 2016. 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	
23/05/16	08/06/16	Forward Work Programme	Nicole Scammel	
		Financial Resilience	WAO	
		Draft Annual Governance Statement	Nicole Scammell	
		Register – Gifts and Hospitality (Information)	Lynne Donovan	
		Regulation of Investigatory Powers Act 2000 (Information)	Gail Williams	
		Outstanding Regulatory Proposals	Ros Roberts	
		External Audit Plan	Grant Thornton	
22/08/16	07/09/16	Forward Work Programme	Nicola Scammel	
		Complaints Report (6 Monthly Basis)	Gail Williams	
		Regulation of Investigatory Powers Act 2000 (Information)	Gail Williams	
		Register – Gifts and Hospitality (Information)	Lynne Donovan	
		Review of Corporate Risk Register	Colin Jones	
		Report by External Audit on Financial Statements for 15/16	Nicole Scammell	
28/11/16	14/12/16	Forward Work Programme	Nicole Scammel	
		Regulation of Investigatory Powers Act 2000 (Information)	Gail Williams	
		Register – Gifts and Hospitality (Information)	Lynne Donovan	

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Agenda Item 8

FOR INFORMATION



AUDIT COMMITTEE – 9TH MARCH 2016

SUBJECT: REGULATION OF INVESTIGATORY POWERS ACT 2000

REPORT BY: INTERIM 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 Members are advised that for the period December to January inclusive, there have been no RIPA operations undertaken.

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



AUDIT COMMITTEE – 9TH MARCH 2016

SUBJECT: OFFICERS DECLARATIONS OF GIFTS AND HOSPITALITY

REPORT BY: ACTING HEAD OF HUMAN RESOURCES 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 2015.

2. SUMMARY

2.1 Attached as Appendix 1, is a list of Gifts and Hospitality received by officers of the Council for the 3 months 1 October to 31 December 2015.

3. LINKS TO STRATEGY

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 Acting Head of Human Resources and Organisational Development for collation and monitoring purposes.
- 4.2 The Acting Head of Human Resources 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 Acting Head of Human Resources and Organisational Development will continue to monitor the declarations to promote best practice and ensure compliance.

8. CONSULTATIONS

8.1 There are no consultations that have not been included in the report. 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 1.

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: Lynne Donovan, Acting Head of Human Resources and Organisational

Development Email: donovl@caerphilly.gov.uk

Consultees: Nicole Scammell, Director of Corporate Services and Section 151 Officer (Acting)

Gail Williams, Interim Head of Legal Services and Monitoring Officer

Colin Jones, Head of Property and Performance Management

Cllr Christine Forehead, Cabinet Member for Human Resources and Governance Alessandra Veronese, Programme Manager Improving Governance Programme

Board

Appendices:

Appendix 1 Declarations of Gifts and Hospitality

Appendix 1
Declarations of Gifts and Hospitality – 1 October to 31 December 2015

	Directorate	Service Area	Post Title of Employee Making the Declaration	Type of Declaration	Details Of Declaration	Post Title of Head of Service, Director or Chief Executive who authorised the Declaration	Outcome
	Communities	Housing	Floating Support Officer	Gift	£50 cash from Council tenant / service user. £25 accepted, £25 donated to Mayors Charity	Chief Housing Officer	Accepted
	Communities	Housing WHQS Project	Tenant Liaison Officer	Gift	2 x baby grows given as a gift to the employee's new born child	Head of Programme	Accepted
D	Communities	Housing WHQS Project	Communications & Tenant Engagement Officer	Gift	Two bottles of wine given in a personal capacity by a Welsh Government Officer. Accepted as under £25 and given as a personal gift, not from WG	Head of Programme	Accepted
2001	Communities	Planning and Regeneration	Events Officer	Gift	Gift of small bouquet of flowers from Ystrad Mynach Partnership Group Members for work carried out at the Ystrad Mynach Market	Head of Regeneration and Planning	Accepted
	Communities	Planning and Regeneration	Senior Property Assistant	Gift	Gift of small box of Ferrero Rocher chocolates and a box of red wine given by contractor. Accepted and shared chocolates with work colleagues and donated wine to Mayor's Charity	Head of Regeneration and Planning	Accepted
	Corporate Services	Human Resources	HR Officer	Gift	Bottle of wine and box of chocolates from Talk Training, approximate value £10. Accepted to avoid giving offence and donated to Mayors Charity	Acting Head of Human Resources and Organisational Development	Accepted

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	Directorate	Service Area	Post Title of Employee Making the Declaration	Type of Declaration	Details Of Declaration	Post Title of Head of Service, Director or Chief Executive who authorised the Declaration	Outcome
Page 92	Corporate Services	Human Resources	HR Officer	Gift	Bottle of wine and box of chocolates from Talk Training, approximate value £10. Accepted to avoid giving offence and donated to Mayors Charity	Acting Head of Human Resources and Organisational Development	Accepted
	Social Services	Public Protection	Menu Development Officer	Gift	Won iPad mini (approx £200) in raffle at LACA Conference. Declined but supplier offered as donation for prize for School Meal Service	Head of Public Protection	Accepted
	Communities	Community and Leisure Services	Area Officer	Hospitality	Invitation to Presentation evening, Caerphilly Town Council. No conflict of interest as the Town Council are a key public sector partner	Head of Community and Leisure Services	Accepted
	Communities	Community and Leisure Services	Chargehand Groundsman	Hospitality	Invitation to Presentation evening, Caerphilly Town Council. No conflict of interest as the Town Council are a key public sector partner	Head of Community and Leisure Services	Accepted