

Annual Governance Statement 2019/20

Executive Summary

The Annual Governance Statement (AGS) explains the processes and systems which give assurance for the effectiveness of the County Council's discharge of its responsibilities. It covers the period 1 April 2019 to 31 March 2020.

During this period a report commissioned by the Department for Education was published which raised significant issues for the Council's governance arrangements and broader culture. Action to address them is covered in the Statement. The actions are on-going arising mainly from a significant review of governance started in early 2020 referred to as the 'Good Governance project.

The year closed with the commencement of the continuing national public health emergency and the initial impact of this event on the Council's governance is also addressed. It is for these reasons that the final text of the AGS will be presented for approval later than usual in the administrative year.

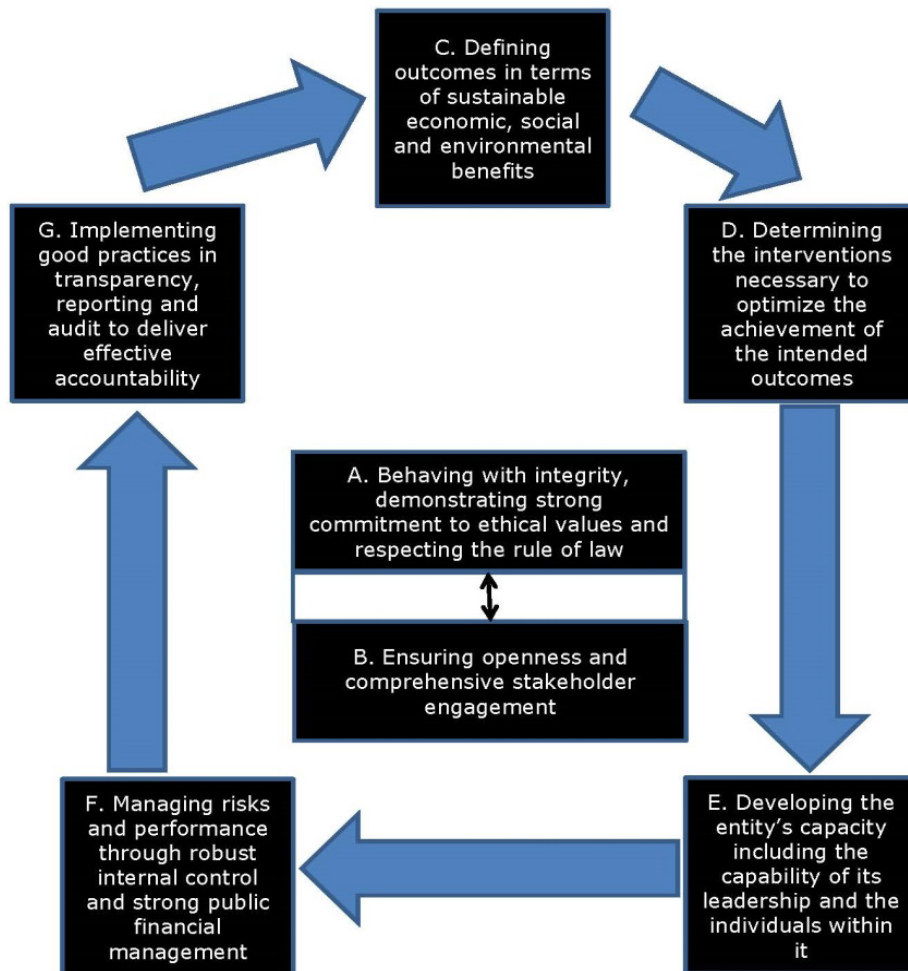
A summary of assurance is given for each of the seven principles on which the Statement is based. At the end of the narrative on each principle are the actions to address the issues identified within the year which will further strengthen the governance arrangements for the County Council.

The Purpose of the Governance Assurance Framework

1. The County Council must ensure it functions in accordance with the law and proper standards and that public money is safeguarded, correctly accounted for and used economically and efficiently. It must show how it can offer assurance as to the proper governance of its affairs (including as pensions administrator), the effective exercise of its responsibilities and the sound management of risk.
2. The Council has adopted a Code of Corporate Governance, consistent with the principles of the Chartered Institute of Public Financing & Accounting (CIPFA) Framework: Delivering Good Governance in Local Government. It meets the requirements of the Accounts and Audit Regulations 2015.
3. The governance framework comprises the rules, procedures, systems and processes by which the Council is managed and controlled. The quality of the framework underpins trust in public services. The Annual Statement shows how the Council uses the framework to give assurance to members, partners, stakeholders and residents and provides an opportunity for the County Council to examine the framework to assure itself that the arrangements for its governance are robust.

The Governance Assurance Framework Principles

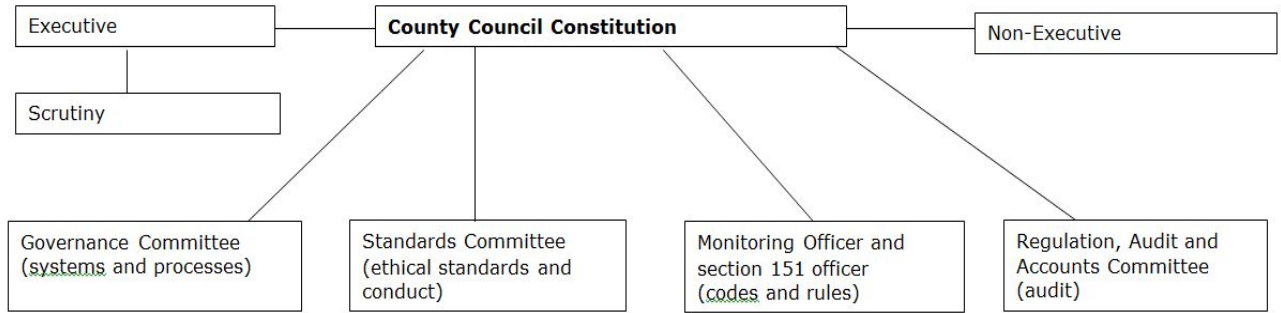
4. There are seven principles and sub-principles of Corporate Governance adopted by the Governance Committee set out below. Assurance for how they are met is provided in the text below each principle in the report. Further work to be done is highlighted and also set out in the appendix.



The County Council's Governance Framework

5. The framework covers the allocation of functions, the rules for how they are carried out and the mechanisms for tracking that this happens correctly. The relationship of responsibilities is shown here:

The Governance Framework at West Sussex County Council



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

Assured (in part)

The County Council has high standards for sound governance as set out in law, government guidance and the courts. It promotes a culture of compliance.

The Council’s codes of conduct set out expectations and requirements for behaving with integrity for both members and officers. Certain elements of these arrangements require further action to provide assurance that they continue to be implemented fully and correctly.

In this and in other sections of the Statement the governance issues raised by the Children’s Commissioner’s report are addressed. Where relevant, actions identified in the Council’s ‘Good Governance’ project are set out.

6. The **Governance Committee** oversees the democratic arrangements of the County Council and reviews and advises the County Council on the Constitution. The Responsibility for Functions (including the Scheme of Delegation) and Standing Orders require members and officers to ensure that all decisions are compliant with internal policies and procedures as well as with law and regulation. These give authority and certainty to the allocation of responsibilities as set out in the Constitution.
7. Part 5 of the Constitution contains the Code of Conduct for members. A parallel code for officers sits in the suite of Human Resources policies. The Council has also adopted policies relating to responsibilities for ethical behaviour including equality and sustainability. Decision-making is supported by advice from officers and internal guidance that should ensure compliance with these policies.
8. The statutory roles of the Chief Financial Officer (s.151 officer) and the Monitoring Officer are set out in the Constitution and in the scheme of delegation. They provide oversight of propriety and lawfulness. They have a direct reporting line to the Chief Executive and are involved in all major

decision-making as part of the Executive Leadership Team and as well as being signatories to all key and other significant decisions.

9. The **codes of conduct** define the standards of behaviour for members and officers. All members undertake training from the Monitoring Officer on the member code of conduct. Member conduct is monitored by the Standards Committee, which has a remit to deal with complaints of breaches of the member Code of Conduct. All members complete the register of interests and receive quarterly reminders on the subject of personal interest declarations and it is a standing item on all formal meeting agendas for both officers and members.
10. The Council has a **whistleblowing policy** to offer a route for challenges to processes or actions within the Council where complainants need confidentiality. It has been extensively revised during 2019/20. The use and effectiveness of the policy is overseen by the Standards Committee. Its accessibility and visibility for staff are not sufficiently clear and action is being taken to refresh and ensure visibility. This has involved independent assurance and benchmarking for the Council's arrangements. This work has particular significance in light of the more critical issues raised by the Children's Commissioner's report relating to the Council's internal culture. Further work is also required to ensure that officers serving as contact points for referrals are properly skilled in dealing with concerns raised under the policy and their implications.
11. Officer interests, including gifts and hospitality, should be published on the County Council's website annually. This has not happened for some time. Mechanisms for recording officer interests, gifts and hospitality were last reviewed in June 2018 and endorsed by the Standards Committee. A system for recording is in place. It requires regular action by Directors to facilitate publication as currently this is not consistent across the organisation. Action is taken each year as part of the AGS work to reinforce the importance of this process.
12. The Council's Standing Orders on Contracts and Procurement and the Financial Regulations and Procedures provide rules for lawful and sound processes for contract and spending decisions. These are managed by the Monitoring Officer and Chief Financial Officer in consultation with the Regulation Audit and Accounts Committee and supported by a group of officer subject matter experts sitting as the Procurement Board. This provides a single process for procurement planning, compliance with due process and consistency of best practice.
13. The Officer Scheme of Delegation is held under regular review by the Chief Executive and the Monitoring Officer, with any new delegations needing the agreement of the Governance Committee. Of greatest significance for the last period has been the re-establishment of the statutory director of children's services as an executive leadership role, reporting to the Chief Executive and accountable for the full extent of Children's Services. Further work to clarify lines of responsibility and accountability will arise as part of the Good Governance project.

14. Following the appointment of a new chief executive in January 2020 an external review of governance was commissioned starting in February. This 'good governance' work provides an opportunity to review these areas of strategic governance and action which may be needed to address inconsistencies or ineffectiveness in policy or practice and as part of the Council's culture, including its arrangements for ensuring compliance. This will be used to complete the work required to address concerns raised in the Children's Commissioner's report.

Principle A (integrity and compliance)

Action	Owner
i. To complete the refresh of the whistleblowing procedures	Director L&A
ii. To ensure full implementation of officer interests and gifts	Director L&A
iii. To complete the external good governance review and plan the implementation of agreed proposals.	Chief Executive
iv. To review the scheme of delegation as part of the good governance review.	Director L&A

Section B: Ensuring openness and comprehensive stakeholder engagement

Assured (in part)

The County Council exists to serve its residents and is dependent on a wide range of stakeholders for working effectively in partnership. Consultation and engagement mechanisms are in place.

The County Council has clear decision-making processes and rules and procedures to enforce them which emphasise openness and transparency. The means of ensuring compliance requires further attention.

Recent changes to improve the scope and focus of partnership working in specified areas, most significantly in relation to services for children in need and at risk of harm and the responsibilities of the Council as corporate parents for children in its care will continue to be reinforced. These respond to issues raised as part of the Children's Commissioner's report. Additional areas which will benefit from a more coherent partnership approach are set out below.

Decision-making and Scrutiny

15. The **County Council** is the ultimate decision-making body and the principal forum for political debate. All County Council meetings take place in public and are webcast. The County Council sets the strategic aims that form the Policy Framework. It also determines the Council's budget following a well-developed process of member engagement and scrutiny. The form and timing of member engagement in the budget planning process for the 20/21 budget was widely welcomed by members.

16. The **Executive** takes decisions on most matters of Council policy and service delivery. For the Cabinet, a new way of working was established in 2019/20, with most cabinet level decisions being taken collectively rather than individually. The non-executive responsibilities of the council are discharged through its **non-executive committees** as described in the Scheme of Delegation. The County Council appoints members to **scrutiny committees**, by which the Executive is held to account through member overview and scrutiny. From April 2020 a fifth scrutiny committee dedicated to scrutiny of the Fire and Rescue Service, has been established. Scrutiny committees are politically proportionate. Chairmen and vice-chairmen are mainly from the majority group, planned to be appointed by the relevant committee by Autumn 2020. Influential scrutiny is achieved by having significant decisions or proposals previewed. Proposals may also be called in for scrutiny after a decision has been proposed in final form. All Scrutiny meetings take place in public and are webcast. Webcasts are available for up to six months of the County Council meetings and of Cabinet, Scrutiny and Planning Committee meetings. A comprehensive review of scrutiny was carried out in 19/20 informed by two external bodies – one focused specifically on Fire and Rescue in light of the recent HMI Inspection and another on the effectiveness of scrutiny for Children’s Services.
17. **The Forward Plan** describes all significant (key) decisions planned to be taken in the following four months and is published and updated at least monthly. The Forward Plan has been revised to provide a clearer format in line with corporate priorities. The Forward Plan is used by Scrutiny Committees to help plan business. As decisions become more significant in terms of service changes and savings proposals there is a greater need to ensure early awareness by and engagement for all members. Further work will be done to enhance the profile of the Forward Plan so that proposals, timings and recommendations are clearly set out and scrutiny work coordinated to achieve more timely influence on outcomes.
18. Decision-making operates with a presumption of openness. Cabinet and Committees are held in public and individual executive decisions are published on a daily basis on the Council’s website. The Council uses an electronic notification system to automatically notify subscribers to meetings or actions by the Council in which they have expressed an interest. Agendas and reports for Cabinet and committee meetings are published at least five clear working days in advance – exceptions are explained in public documents. The use of powers to exempt information from publication or allow a committee to meet in private is minimised to when necessary and only after senior officer authorisation. The Cabinet now meets on a monthly basis to take collective decisions in public.
19. Decisions and agendas are held on the website for six years. The content management system, Modern.Gov, is the principal method of publishing the Forward Plan, decisions, agendas and minutes. Members and staff now have portable devices which can easily access Modern.gov information. The Constitution also prescribes the rules and constraints around urgent decisions (including those not notified in the Forward Plan) and the form and content of decision reports. This system is not conducive

to openness and transparency and its use is kept to a minimum and reported to the next County Council meeting.

20. **Communication to the public** is via the Council's website, in public meetings and through social media. The Council's website was last revised in April 2015 and a drive for 'digital by design' (i.e. online services for residents) is being pursued as part of plans for service transformation and re-design to support residents' needs. Public consultation on proposals is addressed below. The extent of progress in the digitization of customer and resident engagement with the Council will need to be monitored.

Stakeholders and Partnership

21. The County Council works with a range of stakeholders. This includes a range of public bodies, local authorities, the NHS and Sussex Police. Other tiers of local government are important partners in many areas of service delivery, strategic planning and community development. There are both formal and informal forums in place for regular liaison with elected members and senior officers in the district and borough councils, including regular meetings of all of the leaders of the councils (West Sussex Leaders' Board), to discuss issues of common interest and regular meetings of all chief executives (West Sussex Chief Executives Board). A particular council partnership to manage and deliver the retained business rate pool has specific joint governance arrangements for which joint scrutiny will need to be better defined and planned in future.
22. Regular meetings with other partners, most notably the NHS Clinical Commissioning Group, are held at various levels and between Members and officers on operational, commissioning and service planning. For a number of years the Council has operated a joint service commissioning and pooled budget agreement with the NHS to cover a range of social care and NHS services. The terms of reference and membership of the **Health and Wellbeing Board**, the principal forum for health and social care liaison and partnership, have been revised to enhance its role. In addition, a Joint Health and Wellbeing Strategy was developed to set out the Board's vision and this is being promoted and disseminated within the Council and through various corporate and partnership initiatives.
23. In the area of **Children's Services** the partnership arrangements were noted last year as inadequate and the areas of focus for partnership working largely limited to operational practice. As part of the action arising from the Ofsted Report and subsequent Children's Commissioner Report reviews of children's services are receiving a more effective focus on partnership and joint working. Significant work has been identified and plans for improvement implemented are brought to an independent Improvement Board chaired by the Children's Commissioner. A comprehensive improvement plan is in place for delivery. This is now extended to areas of strategic and service planning to support work on improvement for areas of children's services considered inadequate and work is also underway for the establishment of an independent children's

trust to deliver children's services in accordance with the Direction from the Department for Education issued in November 2019.

24. **County Local Committees** are an important forum for local decisions and for elected members to discuss local matters with residents and stakeholders. The eleven CLCs have executive decision-making powers delegated to them – mostly around highways matters and allocation of grant funding. Some minor changes were implemented following a review in the last year. As locally based evening public meetings, meeting three times a year, they are an important forum for community engagement.
25. The County Council has set out its commitment to working in partnership with residents, businesses, communities, the voluntary and community sector and local authority partners through a number of initiatives. It has a set of Partnership principles with the voluntary sector for the commitment to more effective ways of working together, building stronger alliances and empowering joint action.

Consultation and engagement in West Sussex

26. The County Council is committed to working with residents, businesses, communities, service users and partners to help prioritise what it does, to have a say over the approach and to get involved in delivery and change. This requires sound arrangements for engagement and consultation. A regular survey is carried out to inform the County Council of residents' priorities at a relatively high level, more focused engagement being through service led consultation.
27. The Council uses a variety of ways to engage residents and other stakeholders - publications (printed and digital), press releases or social media to keep people informed of plans or decisions. The Council uses various methods to seek people's views: questionnaires, public events, workshops, focus groups, satisfaction surveys, and feedback forms.
28. **Consultation and Engagement Quality Assurance** is a set of processes to ensure services are supported to plan and implement projects which are robust and produce reliable valid data upon which decisions can be made. It includes methodological and ethical requirements and, before projects go live, services must seek advice to ensure they have assurance for consultation and engagement.

Formal consultation

29. Formal consultation will generally only be undertaken where there is a statutory duty or legitimate expectation, and where there is a service or policy need to do so. Consultations are carried out in accordance with current national [Consultation Principles guidance](#), and the Council's [Statement of Community Involvement](#). Individual services are required to maintain open channels of communications with relevant stakeholder groups and representative bodies where relevant to service planning.

30. All formal public consultations are made accessible online using the 'Have Your say' consultation hub software. They are also published on the County Council's News and Press Release webpages. The Council ensures compliance with the public sector equality duty when processing and securing formal key decisions although consistency and appropriateness of use requires further attention to ensure consistent compliance.
31. The information gathered is analysed and considered as part of the decision-making process, the protocol for which can be found in the [Constitution](#). Analysis reports and decisions are made available on the Have Your Say [consultation website](#) as a means of closing the 'feedback loop' and increasing trust in decision-making processes.
32. Action was taken to increase the effectiveness of public engagement and communication including the need to raise awareness of the need to comply with new online accessibility legislation. Work has been started to improve both understanding of, and compliance with, the public sector equality duty. Further work will be undertaken during the coming year.
33. The County Council has a **Petitions Scheme** describing how petitions from residents are dealt with by the County Council. These enable a petitioner to speak with a cabinet member or at a committee, or to the County Council if prescribed thresholds for signatures are reached. A response is made to each petition, explaining what the County Council will or will not do in response.

Governance Review and issues for Assurance

34. In light of the recommendations from the Children's Commissioner's report of November 2019 and subsequent discussions with the Ministry of Housing Communities and Local Government a review of the Council's governance, leadership and culture was undertaken. This has taken stock of a number of areas of concern raised by the Commissioner and which have implications for the County Council's improvement plans in critical areas of service, including those raised in the inspection report from Her Majesty's Inspectorate of Constabularies and Fire and Rescue Services (HMICFRS). The review will also review the recommendations from and action arising from the 2018 Peer Review.
35. Actions on these matters are covered in the relevant sections of this Statement with additional commentary as necessary to explain the detail of the area of improvement required.

Principle B (openness and engagement)

Action	Owner
i. Implement actions arising from the Governance Review	Chief Executive
ii. Implement actions from Improvement Plan for FRS	Chief Fire Officer
iii. Implement actions from the Children First Improvement Plan	Executive Director of Children's Services
iv. Children's Improvement Board to enhance partnership engagement	Executive Director Children (DCS)
v. Identify and implement actions related to planning for a Children's Trust	Chief Executive & DCS

Action	Owner
vi. Complete work on equality impact assessment in decision making	DLA
vii. Complete engagement, promotion and training linked to revised whistleblowing policy.	DLA
viii. Implement final proposals and actions from review of scrutiny and learning from good governance review	DLA

SECTION C: Defining outcomes in terms of sustainable economic, social and environmental benefits

Assured (in part)

The County Council has settled arrangements to define outcomes and monitor performance against agreed measures.

In setting policies and strategies, the County Council takes a long term view of outcomes, taking into account sustainable economic, social and environmental aims and has effective, comprehensive performance monitoring in place.

The West Sussex Plan was prepared and adopted during 2017/18 to the period 2021/22 and reports progress to the Full Council meeting on an annual basis in the form of an Annual Report. The completion of the work for 2020 has been delayed due to the public health emergency from March 2020. This will be renewed as part of the work up to the Autumn of 2020 to re-set the Council's priorities in light of the impact of the emergency.

Renewal of emphasis on environmental targets for sustainability will be required in addition to a review of the content and effective use of the Council's social value policy.

36. The West Sussex Plan 2017-2022 outlines the priorities for the County Council and how they are to be assessed in terms of delivery measures. It was confirmed by the County Council in October 2017 and is subject of an Annual Report to full Council in July each year although delayed this year and replaced with an initial scoping framework to re-set priorities. The Plan was developed by the Cabinet with the engagement of elected members and staff at all levels. Measures and targets were developed in liaison with the Performance and Finance Scrutiny Committee and are published on-line.
37. The West Sussex Plan is implemented through the Directorate Business Planning process and arrangements for regular reports to Cabinet Members, scrutiny committees and the Executive Leadership Team. Performance monitoring is undertaken principally through the report called the Total Performance Monitor. West Sussex Plan key performance indicators are published online on a regularly basis.
38. **Total Performance Monitor** - Detail of its use and the data monitoring and analysis undertaken by the Council are shown in section D. Active

monitoring of performance is undertaken through regular reviews of business plans and with all staff through the individual staff appraisal process. The appraisal arrangements link to performance and regular reviews of business plans. Cabinet Members review monthly the Total Performance Monitor and it is scrutinised quarterly by the Performance and Finance Scrutiny Committee in addition to being available for review by the service focused overview and scrutiny committees. (See also paragraphs 46-47). A further refresh of the TPM will be undertaken as an output of the good governance review. Performance management will be an area of critical focus from the good governance review.

39. A review of how well the Council's performance is overseen by members, both executive and scrutiny will be undertaken so as to ensure members have the tools, skills and support to undertake effective performance monitoring and the verification of performance reports and other sources of assurance in the context of agreed priorities.
40. The County Council is committed to championing the economy of the area. One of its priorities is to ensure West Sussex is a prosperous place, and for the county to continue to thrive the Council aims to support businesses. The **Economic Growth Plan**, agreed in June 2018, sets out the County Council's priorities in driving economic growth to support a prosperous place. The Plan covers the period 2018 to 2023 but, in determining which activities and investments to prioritise over the period, a longer-term view of opportunities and challenges is taken. This has become an area of particular focus in relation to the re-setting of priorities in light of the public health emergency and a new **Economic Strategy** is in development in response to the impact assessment of the emergency.
41. Partners and stakeholders contributed to the development of the Economic Growth Plan, including the district and borough councils, the Coast to Capital Local Enterprise Partnership, the South Downs National Park Authority, further and higher education institutions, and business representative organisations. This has been covered in the rapid work undertaken to develop the new strategy. Working with these partners is crucial in the Council's determination to support the business community and ensure growth for the West Sussex economy and requires further attention to the partnership areas of focus referenced in Section B above.
42. The County Council's **Sustainability Strategy** was adopted in December 2015 as the Council's commitment to help achieve sustainable outcomes. The Strategy recognises the value of the environment of West Sussex, and the social and economic benefits that enhancing the environment can bring. It also acknowledges that resources are limited, and that it needs to do all it can to deliver its services in an efficient and effective way to ensure value for money.
43. Following the County Council's Notice of Motion on [climate change](#) adopted in April 2019, the Cabinet Member agreed to work to prepare an environment and **climate change strategy** and core principles were formulated to underpin the delivery of the plan. This is on schedule for member engagement and scrutiny for approval during 2020.

44. The priority of embedding sustainability within the County Council is critical for the achievement of the West Sussex Plan objectives. This was reviewed for effectiveness during 2019 and the emerging strategy and identified principles will continue to deliver on this process.
45. The Council has a **Social Value Policy** which identifies and explains the benefits of ensuring that policies, business plans and service decisions and procurements consider and address their impact upon local communities, the local economy, the lives of residents and the places of the County. The policy was first developed in 2015 but was never fully finalised or adopted into procurement practice or processes. The policy is currently undertaking a refresh which should be completed this year.

Principle C (defining outcomes and benefits)

Action	Owner
i. Review of process for setting or varying West Sussex Plan priorities	Chief Executive
ii. Review of member engagement for performance management arrangements	DLA & Chief Financial Officer
iii. Review of Total Performance Monitor content and processes	Chief Financial Officer
iv. Completion of governance for climate change strategy	Director of Environment & Waste
v. Develop actions from the new Economic Strategy	Executive Director Place

SECTION D: Determining the interventions necessary to optimise the achievement of the intended outcomes

Assured (in part)

Sections D and E should be read together with particular reference to the governance challenges raised by the various reviews and external service inspection reports during 2018/19.

Interventions for improvement in relation to Children’s Services and the Fire and Rescue Service have been a particular focus aligned with the challenge to address capacity and capability in these service areas and in other critical areas of the County Council.

The County Council takes decisions on interventions based on the West Sussex Plan setting outcomes for services and actions and targets for achieving them within budget constraints. In areas identified for improvement systems for governance, oversight and scrutiny of interventions will be given particular focus. These include the Improvement Plan for Children’s Services and also for the Fire and Rescue Service. Proposed interventions are recorded through Directorate Business Plans for timely outcome delivery. These are overseen by the Improvement Boards (for Children’s and Fire and Rescue).

46. All Directorates are expected to prepare and monitor Business Plans which set out the actions required to meet the outcomes set in the West Sussex Plan and the targets measures and milestones used to monitor their delivery. These are reviewed on an annual basis.
47. The public facing **Performance Dashboard** provides details on progress on the key indicators of the West Sussex Plan. This is underpinned by the business assurance framework which, together with the corporate performance dashboard provide assurance that the Council's priorities are implemented in practice. The Cabinet reviews the performance dashboard as part of the Total Performance Monitor on a monthly basis and the TPM is scrutinised by the P&F Scrutiny Committee.
48. The **Total Performance Monitor** provides an overview of performance against the agreed priorities within the West Sussex Plan and tracks financial performance to ensure intended outcomes are kept in focus and expenditure controlled. The TPM focuses on the delivery of:
 - West Sussex Plan and Performance Measures
 - Medium Financial Term Strategy and in-year budget
 - Culture and Workforce
 - Service and Corporate Improvement
 - Corporate Risk Management
49. A review of the levels of member satisfaction with the Monitor will be undertaken at the next opportunity and following a review of the mechanisms and objectives the Monitor covers.
50. Executive (member or officer) **decision reports** provide the public record of all significant decisions to implement service plans and spend. They are required to show the intended outcomes, the rationale for the proposal, implications for Council resources, other options considered, advice received and consultation undertaken and how risks are managed. Work was undertaken in 2019 following the output from the Children's Commissioner's report's comments on corporate governance and to take account of regulations on public web-based accessibility. This should provide a simpler format for authors and readers alike. The good governance review has highlighted the need to provide clarity and improved transparency for the processes involved.
51. The Executive is supported by a number of officer boards chaired by senior officers to ensure oversight of strategic areas of Council business on behalf of the Executive Leadership Team. These boards co-ordinate subject matter expertise as well as overseeing arrangements for the delivery of priorities at an officer level prior to member consideration. They comprise a board to oversee capital programme planning and one for strategic procurement.
52. Additional action will be taken to clarify the governance of these Boards and their fit within the Scheme of Delegation and how they interact so as to provide greater understanding of their purpose and output for both officers and members and to ensure their effectiveness in delivering

corporate aims in a timely and transparent way. This is consequent on the recently commissioned governance review.

53. Ofsted carried out an inspection of Children’s Services in early 2019. Its report was issued in May 2019 and gave an inadequate rating to the overall effectiveness of the Service. The Department for Education issued a statutory Direction to the County Council in relation to the service and appointed a Commissioner to report on the County Council’s capacity and capability to improve. The Commissioner’s report was published on 17 December 2019 and expressed concerns both about children’s services and the County Council’s corporate capacity to improve. The County Council has accepted the findings and is striving to improve services in liaison with the Commissioner and the Improvement Board he chairs. Changes were made to political and executive leadership in October 2019 as direct and timely response to these criticisms.
54. The County Council receives an update at each meeting during the implementation of the improvement plan. New chairs of the Children and Young People’s Services Scrutiny Committee and the Corporate Parenting Panel have been appointed, with the latter also undergoing a change of membership and approach to its work to ensure greater partner and stakeholder involvement. Across a range of related Council governance arrangements there will need to be a renewed focus on listening to the voice of the child, engagement with corporate parenting responsibilities and undertaking robust scrutiny and performance management.
55. In November 2018 an inspection of the Council’s Fire and Rescue Service was undertaken by Her Majesty’s Inspector of Constabulary and Fire and Rescue Services. The report was published on 20th June 2019 and rates the service as requiring improvement in areas of service effectiveness and efficiency and as inadequate in relation to supporting its people. An Improvement Board chaired by the Chief Fire Officer has been established and an Improvement Plan and Resource Plan has been approved. An inspection in February 2020 has found that the County Council is making encouraging progress to address the weaknesses identified in the 2018 inspection. Regular member updates and scrutiny on improvement activity are taking place.

Principle D (interventions for outcomes)

Action	Owner
i. Children’s Improvement Plan implementation	DCS
ii. ii Fire and Rescue Improvement Plan implementation	CFO
iii. iii Review of Total Performance Framework form and process	D of F&SS
iv. iv Review of Officer executive Boards	DLA
v. v Review of capital governance arrangements	DLA & Dof F&SS

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

Assured (in part)

There have been actions taken in 2019/20 in areas related to service improvement in Fire and Rescue Service and Children's Services and the overall assurance for corporate capability and capacity to improve. This has included the appointment of a new Chief Executive in a joint arrangement with East Sussex County Council.

Officers and members are expected to have a clear sense of their purpose, roles and responsibilities in line with the Council's vision and the suite of policies and processes which support it. Officers and members have access to information, guidance and training to enable them to discharge their roles.

The Chief Executive and the Executive Leadership Team manage the County Council's workforce, skills and resource planning. All officers are expected to have their performance monitored and their development needs identified and addressed. Specific attention is paid to programmes for leadership development. Recent reviews of the aims and form of delivery have been implemented. Additional work is required to implement requirements to improve the internal culture of the Council and to enable the Council's executive leaders to promote a positive and supportive culture and to provide the means of enhancing or reinforcing good leadership skills.

A system is in place to ensure that all elected members have an understanding of their roles and responsibilities when appointed or elected to particular positions within the Council. Members are expected to be able to fulfil the expectations and demands of their roles as local member and those to which they may be appointed. Members are also expected to meet the expectations for development, knowledge and awareness as set by the Council's Member Development Group. Areas of focus for review are identified. Significant training and support has been given to members to help them to focus on the strategic nature of their roles.

56. Arrangements for the County Council's member appointments to specific roles are open and set out in the Constitution. The Council elects the Leader who decides the composition and responsibilities of the Cabinet. The Council makes appointments to all committees. Changes can be made at each Council meeting. All terms of reference are published. There is a system for reviewing and refreshing all constitutional terms of reference for committees and boards which transact Council business.
57. **Member roles** – Executive and non-executive roles are defined and published within the constitution and as part of the Members' Information Network database (the Mine). The member induction and training programmes cover these. All member development sessions have attendance and feedback recorded.

58. The knowledge and development needs of members are identified and addressed through a cross-party **Member Development Group**. This group reports to the Governance Committee and oversees the delivery of a planned programme of development sessions to meet identified member training needs, taking into account members' views on priorities through surveys and feedback. It reviews the impact of member development work and identifies areas for improvement. Its reports and proposals are published as part of the Governance Committee's business. It has recently reported the strategy for member development to the Committee.
59. A full induction programme was designed and implemented after the May 2017 elections. This covered members' strategic and local community roles, scrutiny skills, as well as specific training on the Code of Conduct, safeguarding and corporate parenting. More tailored induction is provided for members in specialist roles, including new members of the Executive and of Planning Committee, Pensions Panel and the Staff Appeals Panel.
60. Specialist training is given to members according to the roles they carry out. This includes training for Cabinet Members (the executive), scrutiny, members of the Regulation, Audit and Accounts Committee, Planning Committee, Rights of Way Committee and the Pensions Panel and Staff Appeals Panel. Disclosure and Barring Checks were carried out on all members after the May 2017 election. Enhanced DBS checks are carried out for members in adults and children's services related roles. Training on adults and children's safeguarding is being provided for all members, with an online training module also available. Training was also provided to ensure awareness of data protection responsibilities.
61. In 2019/20, support and advice has been provided to members to ensure more measurable impact of service performance oversight and purposeful scrutiny. This has been in light of the work planned to address improvements in Children's Services and in Fire and Rescue Services. The work on addressing the role of elected members as corporate parents for children looked after by the Council has also been an area of particular focus. Further attention to these needs will be given in light of the output from the good governance review expected in the early summer 2020.

Officers

62. Statutory roles include the designation of the Chief Executive as Head of Paid Service, the Director of Law and Assurance as the Monitoring Officer, and the Director of Finance and Support Services as Chief Financial Officer. Other critical statutory and leadership roles and their responsibilities are described in the Council's scheme of delegation. These include the Executive Director of Children, Young People and Learning and the Executive Director of Adults' Services. All Directors and Executive Directors are required formally each year to give assurance as to their compliance and that of their Service with a range of requirements and expectations of them as senior leaders within the Council. These Statements of Assurance are integrated with the operation of this Annual

Governance Statement and incorporate action plans for areas of intervention referred to in this Statement.

63. There have also been changes to post holders in some of the more significant posts during the year (notably the Chief Executive, the Chief Fire Officer, the newly created Executive Director of Children, Young People and Learning, with a permanent postholder starting in April 2020) and changes to the scope of the functions of the Executive Director Adults and Health. The Monitoring Officer and Chief Financial Officer have a place on the Executive Leadership Team, which comprises the three executive directors in addition to the Chief Executive, Director of HR and Organisational Change and the Chief Fire Officer. The Director of Public Health who reports to the Chief Executive regularly attends ELT to ensure public health is embedded across the County Council and its partnerships.
64. All levels of management within the Council have a designated role profile and these profiles are accessible via the Council's intranet (the Point). Officers are given copies of their roles on appointment and are supported through induction training, their personal development review and supervision in understanding and developing their roles. Internally published HR procedures cover all aspects of performance and procedure to support managers.
65. Personal development priorities are agreed through an appraisal process. There is an established programme of induction training for new staff. Training is available increasingly through an online learning system. Leadership training and skill development was last reviewed in 2018 but implementation has been paused pending the output from the Children's Commissioner's Report and the good governance review. A Leadership Programme was delivered to all senior managers about three years ago. Leadership skills and development for senior officers will be examined as part of the work of the good governance review.
66. Issues of capacity and service resilience to ensure service effectiveness are covered through workforce planning as part of directorate business planning. Areas of particular risk are identified. Specific attention has been required over recent years to manage challenges in adults' and children's social care where both recruitment and retention have been problematic with expected adverse impact on service quality and consistency. Action to address these issues has seen improved retention during 2019/20. A broader workforce strategy is now in development after some disruption to the leadership of the HR and Organisational Change service.

Principle E (capacity and leadership)

Action	Owner
i. leadership skill development	D of HR & OC
ii. workforce strategy	D of HR & OC
iii. member skills development following good governance review and scrutiny review	DLA
iv. Plans for member skills and knowledge in preparation for post May 2021 election	DLA

SECTION F: Managing risks and performance through robust internal control and strong public financial management

Assured (in part)

Risk management is robust overall but specific actions are required to better align risk management with business planning and the corporate challenges facing the County Council.

The County Council has robust internal financial controls in place, displays strong public financial management and operates systems to manage risks and performance in the most effective manner.

Health and Safety is the focus of a recent and ongoing review to ensure improved systems and compliance.

67. The Constitution sets out the rules to ensure robust internal control over the Council's finances. The system and arrangements for performance management and budget monitoring demonstrate sound internal monitoring and control and have formal and well published arrangements for member and officer oversight and transparency.
68. The system of internal financial control is based upon a framework of comprehensive financial regulations and procedures which comply with the CIPFA "Good Practice Guide for Financial Regulations in a modern English Council". Control is maintained through regular management information, supervision, and a structure of delegation and accountability. External audit of the Council's accounts is robust and unqualified assurance was given in 2018/19. An opinion on 2019/20 has not yet been given, but a qualification on a value for money conclusion is likely on an 'except for' basis, relating to arrangements for informed decision-making. This relates in part to the governance matters referred to in paragraphs 53-55 above. The Council's financial management arrangements conform to the governance requirements of the CIPFA 'Statement on the Role of the Chief Financial Officer in Local Government 2010.' A continuous review is maintained. A full review of Financial Regulations and Procedures was undertaken in 2018 and a new version of Financial Regulations was approved by the Regulation Audit and Accounts Committee in July 2018.
69. Each Director is required to conduct a full review of internal governance systems for their area of responsibility, through an assurance mapping process. The statements made, based on the assurance mapping, are checked to identify Council-wide governance issues. Evidence of assurance given is supplemented in the Annual Assurance Statement for each directorate. These include actions for improvement. From both sources, significant governance implications are included in the Statement's action plan (this document).
70. The officer scheme of delegation is critical for the effectiveness of controls of spending and performance. It is kept under review by the Director of Law and Assurance. Directors are required to ensure and confirm the

effectiveness of the scheme of officer onward delegation and have worked with the Director of Law and Assurance to ensure that there is shared understanding of the operation of delegations and the need to continually review them. Areas of action for greater clarity and assurance in relation to officer delegations are identified elsewhere in this report.

71. The County Council annually reviews the effectiveness of its governance framework including the system of internal control. The review is informed by the Head of Internal Audit's annual report 2019/20, by the external auditor and other agencies and inspectorates. These findings are brought together within this document and are reported annually to the Regulation, Audit and Accounts Committee. The Director of Law and Assurance is responsible for ensuring the effectiveness of the internal assurance arrangements and the implementation of actions identified by those arrangements. The Regulation, Audit and Accounts Committee undertakes the functions of an audit committee. This includes review of the work and findings of Internal Audit. The audit arrangements which support and reinforce financial controls and assurance are fully addressed in section G below.
72. The **Risk Management Strategy** is set out in the Constitution (Part 4 section 2) and describes the allocation of responsibilities between officers and elected members. It also summarises the system the Council has for identifying, managing and categorising corporate risk. The operation of the scheme and concerns arising are reported quarterly to the Regulation, Audit and Accounts Committee as part of the system for reporting on the effectiveness of risk management arrangements. That Committee is responsible for reviewing the effectiveness of the Council's risk management arrangements. This also forms part of the Total Performance Monitor reported to Cabinet and the Executive Leadership Team and scrutinised by the P&F Scrutiny Committee.
73. There is a separate requirement for material risks connected with proposals, policies and spending decisions to be formally identified with actions taken to manage such risks in all recorded and published decision reports (see paragraph 49 above).
74. Risk management is undertaken through robust directorate systems including the business planning process. The s.151 Officer who carries the operational officer responsibility for risk management. The Chief Executive is accountable to the Council for the effectiveness of the risk strategy.
75. The area of Health and Safety management and the corporate assurance arrangements for good Health and Safety policy and practice has been the subject of a significant review in the context of sound risk management.

Principle F (risk and performance)

Action	Owner
i. Finalise review and plans for corporate risk register oversight and monitoring	D of F&SS
ii. Refresh compliance and consistency in scheme of onward delegation from Directors	DLA

Action	Owner
iii. Finalise internal governance and arrangements for assurance in relation to Health and Safety	D of HR & OD

SECTION G: Implementing good practices in transparency, reporting and audit, to deliver effective accountability

Assured

The County Council has transparent processes in place through publication of the Forward Plan of key decisions, of agendas and reports of its meetings and those of its committees and of its key decision reports on the website and the prominence given to reporting and enforcing of audit recommendations through the Regulation, Audit and Accounts Committee which meets in public.

The County Council has effective open data reporting arrangements to ensure the accessibility of significant spend, contractual and other data relevant to financial performance. Enhanced internal governance reinforces tasks to address any issues relating to transparency and compliance within the improvement plans for Children's Services and the Fire and Rescue Service.

76. All meetings of the Council and of the committees which discharge executive, non-executive or scrutiny functions take place in public and have their reports and minutes published on the Council's website. Cabinet, Cabinet Member and Committee decisions, agendas and reports are published on the website and are available to the press and public. This is driven by the publication of the Forward Plan of key decisions. A limited number of reports are considered in private session only when the subject meets the prescribed criteria. A summary of these is published and the rationale for non-disclosure made available.
77. The County Council has several separate bodies of which it is a part, which in 2019/20 included the LEP Joint Committee, the Local Government Pension Scheme ACCESS Joint Committee and the Sussex Police and Crime Panel. Each of these bodies abide by the Nolan principles and publish their agendas and minutes in an accessible place, which are linked from the County Council's website. This will also be ensured with any new Joint Committees, such as the recently established Waste Management Joint Committee with Mid Sussex District Council.

Review and Audit

78. The Regulation, Audit and Accounts Committee undertakes the functions of an audit committee. This includes review of the findings of Internal Audit. The Committee meets regularly and in public and holds officers to account for the timely implementation of audit recommendations.
79. Internal Audit provides an annual assurance opinion based on their delivery of a risk based internal audit plan. This includes adherence to

established policies, procedures, laws and regulations. These are reported to the Regulation, Audit and Accounts Committee.

80. The Head of Internal Audit reports to the Director of Finance and Support Services. He also has direct access to the Chief Executive, Executive Directors and other directors and has well-established reporting lines to members through the Regulation, Audit and Accounts Committee and quarterly to the Executive Leadership Team. Internal Audit is provided through an arrangement with Hampshire County Council, giving greater independence, resilience and capacity for this function.
81. Specific issues of performance or effectiveness in particular areas of critical service delivery or council governance have been raised during the year's internal audit work and have been summarised in the annual audit report being completed alongside this Governance Statement. This includes areas where limited or no assurance has been given. To the extent that the findings and recommendations are relevant to matters not otherwise covered in this Statement they are set out here and captured as part of the action plan to ensure alignment with the actions addressing issues of governance and internal process.
82. The Internal Audit annual report highlights specifically those areas where a limited assurance review has been issued, which link to areas identified in this Statement. (Those for 2019/20 will be finalised and added to the final version):
83. Any commonality with internal audit findings will be added to the final version. An overall 'limited' opinion was issued by Internal Audit in 2019/20.

Principle G (transparency audit and accountability)

Action	Owner
i. Internal audit recommendations for governance	Director of Law and Assurance

Main Governance Issues for action or to note

84. In formulating this year's AGS a number of forms of evidence have been reviewed. Several of these are reported and monitored through the Regulation, Audit and Accounts Committee. Of particular note for the report are the various actions identified to address governance issues related to the findings of the Ofsted report on Children's Services and the HMI report into the Fire and Rescue Service. The Children's Commissioner's report of November 2019 contains comments critical of aspects of the Council's governance which have been noted and relevant actions described in this report. To avoid duplication the findings of these reports are not noted in this statement except where their implications could affect the overall effectiveness of the authority's governance procedures. The main governance issues identified are summarised at the end of each section as set out above.

85. An action plan is attached at part of the Appendix (final column), which sets out how the Council will address governance issues in the year ahead. We are satisfied that these actions will deliver the improvements necessary and we will continue to monitor, evaluate and report on progress as part of our next annual review.

Public Health Emergency

86. In March 2020, a national public health emergency was declared by the Government in response to the global coronavirus pandemic. The County Council was prepared through its Resilience and Emergencies planning. Services were quickly refocused to prioritise preserving life and essential services and the implementation of additional service and interventions in response to the national priorities. This response was led through a resilience command chain with the Executive Leadership Team and external partners providing strong strategic oversight at Gold level, with directors managing tactical planning at silver level and Bronze level service continuity and delivery groups. The incident is ongoing into 2020/21 and the County Council will continue to prioritise its emergency response whilst it works on recovery and plans for service continuity. This disruption to normal corporate business and the service, resource, staffing and financial consequences will be assessed as part of corporate planning and will influence the commitments made in this Statement, which will be kept under review.
87. Assurance for use of resources has been provided through staff working remotely through the County Council's secure IT network and use of virtual meetings through an end to end encrypted network. Guidance has been issued to managers on working with remote teams so that regular communication is in place. The Employee Support Programme has been advertised regularly to staff via a variety of channels to help to promote good staff welfare during this period of remote working.

Paul Marshall Leader of the Council July 2020

Becky Shaw Chief Executive July 2020

Annexe - Sources of Assurance and Actions

Key:

CIPFA = The Chartered Institute of Public Financing & Accounting

FSS = Finance and Support Services

HR&OC = Human Resources & Organisational Change

L&A = Law and Assurance

MDG = Member Development Group

RAAC = Regulation, Audit and Accounts Committee

SOLACE = Society of Local Authority Chief Executives

Table of assurance for Principle A: Integrity and Compliance

Source of assurance	Where found	Who is responsible	Role	last review/ action planned*
Constitution	Web and Intranet	Governance Committee and Director L&A	A single source for rules and procedure for lawful sound business and meeting management.	Complete revision to simplify in 2018 approved. No action. Review within Good Governance
Codes of Conduct	Constitution	Standards Committee & Director L&A	Defines standards of behaviour and how to enforce	Part of the Constitution review agreed in July 2018. No action. Review within Good Governance
Whistleblowing Policy	Constitution	Standards Committee & Director L&A	Defines process to report breaches of rules or standards confidentially	Fully revised for approval by Governance Committee June 2020. Action to promote and monitor.
Anti-fraud and corruption strategy	Constitution	RAAC & Director F&SS	Statutory obligations recorded and enforced	November 2015. Reviewed every 3 to 5 years. Need to identify time and plan for next review.*
Anti-bribery policy	Constitution	Director L&A	Statutory obligations recorded and enforced	November 2015. Reviewed every 3 to 5 years. Need to identify time and plan for next review.*
Register of Member Interests	Website	Director L&A	Statutory list of interests.	Entries updated on an on-going basis. Quarterly reminders to members to review. No action.
Register of Officer Interests	Website	Director L&A	Record of financial and conflicting business interests	New system from March 2017. Publication arrangements to be further reviewed in 2020* to ensure compliance.
Corporate Complaints Policy	Website	Chief Executive & Standards Committee	Describes mechanism for handling all complaints.	Complete system review completed 2017/18. A new annual report on complaints for Standards Committee in Summer 2020*
Staff Discipline policy	Intranet	Director HR&OC	Defines rules of conduct and procedures to manage	New HR policies to achieve single framework established in 2019. Action to reinforce due.*
Data Protection Policy	Intranet	Director L&A	Defines rules and procedures to protect data.	Revised for the new law 2018. Review of practice and training to mitigate risk ongoing*.
Freedom of Information policy	Intranet	Director L&A Director of Communities	Defines rules and procedures	January 2018. No action planned

Source of assurance	Where found	Who is responsible	Role	last review/ action planned*
Data Security & Accepted Use Policy	Intranet	Director F&SS	Defines rules and procedures	September 2014 Mandatory refresher training 2019. No action planned
Standing Orders on Procurement and Contracts	Constitution	Director L&A and RAAC	To prescribe the rules for all contracts and procurement activity	Full revision in 2018 approved. No action planned
Procurement Board (officers)	Intranet	Director F&SS	To manage and plan strategic procurement	Procurement Pipeline in place. Contract management capacity for review and action*. Action to clarify internal governance between officer boards within Good Governance *.

Table of Assurance for Principle B: Openness and Stakeholders

Source of assurance	Where found	Who is responsible	Role	last reviewed/ action planned*
Scheme of Delegation	Constitution	Governance Committee & Director L&A	To fully define who takes what decisions and how and how recorded.	December 2019. Action required to clarify officer onward delegations and in context of senior officer boards within Good Governance*.
Forward Plan	Web site	Director L&A	Describes planned key decisions for next 4 months	Revised format 2019 to for clarity.
Protocol on decision making	Constitution	Director L&A	Describes arrangements for sound decisions.	Reviewed with Constitution July 2018. No action planned
Scrutiny Committee business planning	Scrutiny Committee reports	Performance and Finance Scrutiny Committee, Scrutiny Manager	Records planned scrutiny work.	Continuous with annual work programme published. Revised 2019 Further review in Good Governance*.
Openness and access to meetings/ decisions.	Constitution and Website	Director L&A	Describes rules and process for ensuring transparency of business.	Constitution revised 2018. Web casting of meetings extended increased 2019. Public cabinet meetings from December 2019.
Connections, consultations & community liaison forums	Intranet, Website & Press releases	Head of Communications & Engagement	Communication to public	Connections under review. No action planned
Consultation Q&A system	Intranet	Chief Executive	Provide system and guidance for service consultation	Review in 2015. Review of Statement of Community Involvement in 2018. No action planned
Partnership meetings, briefings and liaison	Held by relevant directorate	Relevant Director	Communication to partners	Continuous review and proposal to track external engagement plans better. Partner engagement review within Good Governance*.
Equality Policy	Website And decision making protocol	Chief Executive. Relevant Director (for decisions) Director of HR (for staff)	Source of guidance for ensuring compliance with public sector equality duty	Policy partly reviewed 2018. Further and fuller review required*. Action required to ensure consistency in application of equality impact assessments*

Source of assurance	Where found	Who is responsible	Role	last reviewed/ action planned*
Health and Wellbeing Board arrangements	Constitution	Director of PH	Forum for strategic joint business and service oversight	Complete review of Board 2018 – 19 & new H&W strategy from April 2019.
West Sussex Compact and Partnership Principles	Website	Director of Communities	Communication to partners	Partnership principles refreshed in 2018. Established partnership working with district and borough councils. No action planned.

Table of Assurance for Principle C: Sustainability

Source of assurance	Where found	Who is responsible	Role	last reviewed/ action planned*
West Sussex Plan	Council website	Cabinet & Chief Executive	Describes the measure and targets for key corporate & service aims	The County Council agreed current Plan in October 2017. Annual Reports to Council.
Social Value Policy	Website	Director of F&SS	Sets aims for social economic and community benefits of council business	Full review in procurement activity completed 2019.
Sustainability Strategy	Council website	Director of E&PP	Sets Council's commitment to Sustainability	The Strategy approved 2015. The Action Plan reviewed annually. Climate Change strategy due for adoption July 2020*

Sources of Assurance for Principle D: Optimising Interventions

Source of assurance	Where found	Who is responsible	Role	last reviewed/ action planned*
Total Performance Monitor	P&FSC agenda website	Chief Executive & Cabinet an Director F&SS	Reviews financial and operational performance	A Task and Finish Group reviewed 2018. No action planned
Executive Decisions process	Website	Director of L&A	To record rationale, legality and financial compliance of decisions.	Format revised 2018. New publication system by Modern.gov 2018. Review within Good Governance.
Business Plans	Share Point	All Directors	Record of actions and objectives for delivery of West Sussex Plan	Annual. Action planned to achieve better coordination of plans between Directorates*. Review within Good Governance as performance management
Executive Officer Boards	Intranet	Executive Leadership Team	Manage strategic business delegated to officers	Action planned to clarify scope of officer delegations and ensure more transparency*
Capital Programme Governance	Constitution	Executive Director Place and Director F&SS	Provide sound systems for capital programme	Revision February 2019. Further review on planned programme re-set 2020*.
Service Improvement plans governance and assurance	Records of decisions and Improvement Board agendas.	Executive Director CS & CFO	Provide plan and assurance for delivery of improvements from external inspection.	Arrangements for monitoring and scrutinising effectiveness of plans ongoing

Sources of Assurance for Principle E: Leadership Capability

Source of assurance	Where found	Who is responsible	Role	last reviewed/action planned
Scheme of delegation	Constitution	Governance Committee Chief Executive Director L&A	Formal allocation of key roles and functions, including Statutory and senior officers	April 2019 with minor revisions in December 2019. Actions identified above for clarity for officer boards*. Good Governance to review scheme clarity*.
Budget, including medium term financial strategy	Council agenda	County Council Executive Director Resource Services & Director F&SS	To agree a sound budget and financial strategy.	February 2020 Review of arrangement for Member engagement for next budget planning process* in 2020.
Member Development Programme	Held by Director L&A Member Information Database	Governance Committee & Director L&A & MDG	Plan and record all member training.	Continually by MDG (sub-group of Governance). Reports regularly and uses member feedback. No action planned
Human Resources policies	Intranet	Director HR&OC	Describe all officer duties, rules and requirements.	Review planned within Good Governance as culture and leadership areas.
Workforce Planning arrangements	HR policies and Directorate plans	Relevant Director	Provides rationale and scheme for ensuring resilience and capacity.	Particular focus on service improvement plans. Wider strategy un development*.
Staff role profiles	Intranet	Heads of Service	Describe all officer roles	Updated as roles change.
Member Induction Programme	Intranet	Member Development Group Director L&A	To determine the content of the programme	Plans in 2020, for induction programme for post May 2021.
Specialist Member training	Committee business programme	Director L&A	Non-executive committees and appeals panel	Completed after 2017 election Focus on new development strategy by MDG.
Officer Appraisal System	Intranet	Director HR&OC & all Directors for delivery	To manage performance and development	Review undertaken 2015. Review within Good Governance.
Performance Management Policy	Intranet	Director HR&OC	clear system for addressing poor performance	As above*.

Sources of Assurance for Principle F: Risk and Performance

Source of assurance	Where found	Who is responsible	Role	last reviewed/action planned
Governance Statement	RAAC agenda	RAAC Director L&A	Captures all sources of governance assurance	Annual (this document)
Assurance mapping	N/A	Director L&A Director F&SS	Internal checklist for service governance	New checklist 2016/17. Refreshed for 2017/18
Local Code of Corporate Governance	Governance agenda	Governance Committee Director L&A	To confirm the corporate governance principles in place	Aim as output from Good Governance.
Risk Management Strategy	Constitution	Chief Executive	Strategic aims and objectives for corporate risk management	Approved by RAAC 2018. No action planned

Source of assurance	Where found	Who is responsible	Role	last reviewed/action planned
Risk Management systems	RAAC agenda	Director F&SS	Operational systems for meeting RM strategy aims	Last review 2018. Action since for systems for risk management to be more consistent.
Health and Safety Policy	Intranet	Director of HR &OC	Provides rules, procedures and systems for assurance in relation to health and safety at work and in relation to property risk.	Internal review 2018 has led to revised governance. Needs testing for effectiveness*.
Audit Function	Constitution	RAAC Director F&SS	To manage and ensure the effectiveness of Audit.	Annual internal quality review. External review is required every five years. Internal Audit service re-procured 2018
Total Performance Monitor	P&FSC papers on website	Chief Executive & Director F&SS	Reviews financial and operational performance	A Task and Finish Group reviewed 2018. No action planned
Treasury Management Strategy	Council agenda	Director F&SS	For sound strategy to limit risks to borrowings and investments.	December 2017. No action planned
Financial Regulations and Procedures	Constitution	Director of F&SS RAAC	To prescribe the rules for all financial transactions	New version agreed by RAAC July 2018. No action planned
Resilience and Emergency arrangements	Intranet	Chief Fire Officer	To provide safe systems and procedures to manage local and civil emergencies	Action plan implemented. Will review post Covid.

Sources of Assurance for Principle G: Audit and Transparency

Source of assurance	Where found	Who is responsible	Role	last reviewed/action planned*
Audit Function	Constitution	RAAC Director F&SS	To manage and ensure the effectiveness of Audit.	Annual internal quality review (due 2019*) External review is required every five years (due March 2020)
External Audit of Accounts	Audit Report	RAAC and Director of F&SS	To give external assurance to the quality of the Council's accounts and accounting practice	Full assurance given to 18/19 accounts.