Core principles and sub-principles of good governance

ANNUAL GOVERNANCE REVIEW
2017/18

KEY TO OFFICERS

Assurance Owner	Assurance Provider
AD = Alex Dewsnap (Divisional Director - Strategic Commissioning)	DH = David Harrington (Head of Business Intelligence)
	JK = John Kitching (Divisional Director HRD & OD)
TW = Tom Whiting (Corporate Director of Resources)	SD = Susan Dixson (Head of Internal Audit)
	RP = Reena Parmar (Information Architect and Systems Support Officer)
	NM = Nimesh Mehta
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HP = Hugh Peart (Director of Legal & Governance Services)	CE = Caroline Eccles (Assistant Lawyer Governance Services)
DC = Dawn Calvert (Director of Finance/s151)	SDan = Sharon Daniels (Deputy s151)

PA = Partnership Assurance
MA = Management Assurance

Core principles and sub-principles of good governance

Core Principle: Acting in the public interest requires a commitment to and effective arrangements for:

1. Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law. *(2007 Framework Core Principle 3: Promoting values for the authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour.)*

Local government organisations are accountable not only for how much they spend, but also for how they use the resources under their stewardship. This includes accountability for outputs, both positive and negative, and for the outcomes they have achieved. In addition, they have an overarching responsibility to serve the public interest in adhering to the requirements of legislation and government policies. It is essential that, as a whole, they can demonstrate the appropriateness of all their actions across all activities and have mechanisms in place to encourage and enforce adherence to ethical values and to respect the rule of law.

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
	Behaving with integrity					
1.1	Ensuring members and officers behave with integrity and lead a culture where acting in the public interest is visibly and consistently demonstrated thereby protecting the reputation of the organisation	▪ Codes of conduct ▪ Individual sign off with regard to compliance with code ▪ Induction for new members and staff on standard of behaviour expected ▪ Performance appraisals	Codes of conduct for staff and members are in place (GS) Council values launched in March 2016 have been incorporated into the staff induction programme. The refreshed appraisal framework includes an assessment of individual demonstration of the values. The new Council values were developed through workshops with staff and members and endorsed by Cabinet in February 2016. They are integrated into the Corporate Plan (see previous link) A review of the Council's recruitment processes has been completed and a more values based approach was introduced February 2018. A staff awards scheme is in place and run annually to: • Showcase, recognise and celebrate examples of excellence with the Harrow Ambition and the corporate values • Celebrate, reward and communicate individual and team achievements at both Directorate and organisational levels • To encourage peer to peer and team recognition through a transparent, Directorate led nomination process • Further embed the Harrow Ambition Plan and the corporate values.	AD TW	JK 19/03/18 AB 20/05/18 SD 25/05/18	No Gap

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1.2	Ensuring members take the lead in establishing specific standard operating principles or values for the organisation and its staff and that they are communicated and understood. These should build on the Seven Principles of Public Life (the Nolan Principles)	▪ Communicating shared values with members, staff, the community and partners	Code of conduct for Members (GS) Code of conduct for Employees (GS) On election Members are given induction training and there is an annual training programme devised by the Membership Development Panel. 7 repeat mandatory training sessions were organised between May 2017 and June 2017 of which 6 were cancelled either due to lack of take up by Members or the intervention of 2 bye elections and the general election. Following the local government election in May 18, a welcome evening has been arranged for all elected members on 8 May together with a programme of Member mandatory training in May/June 2018. Whilst the uptake of Member training fell during 2017/18 the uptake since the recent local elections has significantly improved.	HP	LC 07/03/18	No Gap
			All Members have been provided with an induction pack post- election in May 2018. Current workshops with Members to establish behaviours aligned with the Doing it Together values and the Nolan principles . Leadership behaviours have also been included. Staff are briefed on the Code of Conduct (GS) in their informal induction sessions (induction checklist GS) with their line manager. The Staff employee Code of Conduct is accessible to all staff on the intranet. The link is now sent along with the relevant employee handbook to all new starters (GS)	AD	AB 20/05/18	

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	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
1.3	Leading by example and using the above standard operating principles or values as a framework for decision making and other actions	▪ Decision making practices ▪ Declarations of interests made at meetings ▪ Conduct at meetings ▪ Shared values guide decision making ▪ Develop and maintain an effective standards committee	The Governance Audit and Risk Management Committee was amalgamated with the Standards Committee on 12 June 2014. Terms of reference for the Committee are contained in the constitution. (GS) Dates of meetings can be found on the Council website. Members' code of conduct (GS) requires that members have regard to advice given by Monitoring Officer and Chief Finance Officer and that they must not act in a manner which causes the Council to act unlawfully. Templates for committee and cabinet decisions include sections on options, financial implications, risk management and legal implications. (GS) Example of minutes where interests were declared can be found on the Council website. **Agreed action to address minor gap** – HIA to issue detailed guidance to managers on what to include in the risk management section of the Cabinet report template + Director of Finance to review when providing finance clearance and refer to HIA as necessary.	HP	LC 07/03/18	Minor Gap – IA review has identified that risk management section of Cabinet reports not robust

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1.4	Demonstrating, communicating and embedding the standard operating principles or values through appropriate policies and processes which are reviewed on a regular basis to ensure that they are operating effectively	• Up-to-date register of interests (members and staff) • Up-to-date register of gifts and hospitality • Whistleblowing policies are in place and protect individuals raising concerns • Whistleblowing policy has been made available to members of the public, employees, partners and contractors • Members and officers code of conduct refers to a requirement to declare interests • Minutes show declarations of interest were sought and appropriate declarations made Complaints policy and examples of responding to complaints about behaviour • Changes/improvements as a result of complaints received and acted upon • Anti-fraud and corruption policies are working effectively	Members' code of conduct (GS) requires members to declare interests and if it is a Disclosable Pecuniary Interest as defined in legislation to withdraw from the room and not to participate any further in any discussion or vote. Members are required to declare their interests on a register of interests and these are published on the Council's website. 7 repeat mandatory training sessions were organised for Members between May 2017 and June 2017 of which 6 were cancelled either due to lack of take up by Members or the intervention of 2 bye elections and the general election. Member training was conducted on safeguarding children (9 May 2017); Licensing (27 July 2017) and General Data Protection Regulation (29 January 2018) Example of minutes where interests were declared can be found on the Council website. Gifts and Hospitality Protocol (GS) provides guidance to members on acceptance of gifts and hospitality and when and how these must be declared. A register of members' gifts and hospitality is kept up to date. Employee code of conduct (GS) sets out rules on the acceptance of gifts and hospitality. Registers are kept in each department. Whistleblowing policy (GS) is available to staff on the intranet Management assurance exercise has confirmed that register of interests and gifts& hospitality maintained and updated by each Directorate. Corporate Complaints policy in place (GS) and examples of complaints and changes/improvements made as a result provided. The Corporate Anti-Fraud and Corruption Strategy 2016-19 (GS) was reviewed during 2017-18 with no changes made. The original document went before GARMS on 6th December 2016 for consideration and then approved by Council on 23rd February 2017 for inclusion in the Constitution. The strategy will be reviewed annually as part of the Corporate Anti Fraud Team (CAFT) plan. The CAFT Year End Report 2017-18 will specifically detail progress against the Strategy and will be presented to GARMS on 17th July 2018. The Council's Corporate Anti-Fraud Team undertook a self-assessment against the Code of Practice on Managing the Risk of Fraud and Corruption (CIPFA, 2014) during 2017/18 that reviewed progress against the five main principles within the code to improve the Council's arrangements. The result was a compliance level of 75%, an improvement from 54% in 2015/16, indicating that the authority has reached a 'good level' of performance against the code. Further actions have been built into the 2018/19 Corporate Anti-Fraud plan to improve fraud risk resilience and progress against the actions contained within the Fraud Strategy will be reported to the GARMS Committee in July 2018.	HP MA TW TW	LC 07/03/18 SD 29/06/18 JM JP 24/05/18	Minor Gap-Whistleblowing policy not publically available – this will be resolved once Governance structure on website

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	Demonstrating strong commitment to ethical values					
1.5	Seeking to establish, monitor and maintain the organisation's ethical standards and performance	▪ Scrutiny of ethical decision making ▪ Championing ethical compliance at governing body level	Financial regulations (GS) Contract procedure rules(GS) Constitution (GS) The scrutiny function comprises an overview and scrutiny committee, a performance and finance sub- committee, and lead scrutiny councillors for: • Public Health and Wellbeing • Community and Regeneration • Children and Families • Adult Services • Corporate Resources The function is driven by the need to hold the council and our partners to account for their performance and the establishment of the performance and finance sub-committee as the driver of scrutiny is a key component in ensuring that the function is focused on the issues of the greatest importance to the council. The lead members ensure that expertise to tackle particular areas of service delivery is maintained. The structure is subject to regular review and is supported by meetings of the scrutiny leadership group, comprising the leads and the chairs and vice chairs of the committees, which considers agenda and review programmes, provides strategic direction for the function and overall co-ordination between the leads and committees.	HP	LC 07/03/18	No Gap

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	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
1.6	Underpinning personal behaviour with ethical values and ensuring they permeate all aspects of the organisation's culture and operation	• Provision of ethical awareness training	Employee code of conduct includes rules about general standards of conduct, personal interests, corruption and political neutrality. This is enforced via the Council's disciplinary policy. A whistleblowing procedure is available on the intranet. On election Members are given induction training and there is an annual training programme devised by the Membership Development Panel. 7 repeat mandatory training sessions were organised between May 2017 and June 2017 of which 6 were cancelled either due to lack of take up by Members or the intervention of 2 bye elections and the general election. Member training was conducted on Safeguarding Children (9 May 2017); Licensing (27 July 2017) and General Data Protection Regulation (29 January 2018) Following the local government election in May 2018, a welcome evening was arranged for all elected members on 8 May together with a programme of Member training in May/June 2018.	HP	LC 07/03/18	Gap – no member training on code of conduct during 2017-18 – gap closed by member training provided since elections

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1.7	Developing and maintaining robust policies and procedures which place emphasis on agreed ethical values	▪ Appraisal processes take account of values and ethical behaviour ▪ Staff appointments policy ▪ Procurement policy	All our policies incorporate ACAS best practice. Specifically Paragraph 1.4 of the Induction checklist (GS) under Knowledge and Understanding staff are asked to become aware of the range of Employment policies including Code of Conduct, Whistle Blowing Policy, Corporate Governance, Financial Regulations and Standards, Health & Safety Polices, Equal Opportunities Policy etc.	AD	JK 19/03/18	No Gap
			The Council has developed a new Equalities Vision and an Action Plan that sets out how we will achieve that vision. Progress is monitored by the Equalities Action Group which is made up of staff representatives from across the council. An annual Equalities in Employment report is presented to the Employee Consultative Forum – *Dec 17 report saved as evidence.* The Corporate Development Programme includes events and activities supporting and promoting the Council's Equality Objectives. Copies of the evaluation sheets for these events are available to review. There is also a mandatory E learning module on an Introduction to Equalities and Diversity on the Council's e-learning portal 'POD'. An Equalities session is also included in the Corporate Induction We have been reviewing our recruitment and selection training – face to face and e-learning – and this has included a refresh of equalities in recruitment. This was implemented in 2017/18.		AB 20/05/18	
			A commercial & Procurement Strategy is in place (GS)	TW	SD 29/06/18	

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1.8	Ensuring that external providers of services on behalf of the organisation are required to act with integrity and in compliance with ethical standards expected by the organisation	▪ Agreed values in partnership working: (i)Statement of business ethics communicates commitment to ethical values to external suppliers (ii)Ethical values feature in contracts with external service providers ▪ Protocols for partnership working	The principles of integrity, compliance and ethical standards which were originally established in the now disbanded Harrow Strategic Partnership are taken forward through 2 principal partnership bodies. Health and Wellbeing Board – see Terms of Ref (GS) Safer Harrow – see ToR DH evidence – put in GS Commercial partnerships and shared services are covered by contracts/Inter Authority Agreements that detail standards required.	AD TW	DH 27/02/18 SD 29/06/18	No Gap
	Respecting the rule of law					
1.9	Ensuring members and staff demonstrate a strong commitment to the rule of the law as well as adhering to relevant laws and regulations	▪ Statutory provisions ▪ Statutory guidance is followed ▪ Constitution	Constitution is kept up to date and compliant with the law. In 2017/18 the whole constitution was revised. GS. Reports recommending a decision to committees/cabinet/Council are cleared by a lawyer . Policies and practices are kept up to date and follow legal requirements. The Monitoring Officer attends the Corporate Board, Cabinet and Council.	HP	LC 07/03/18	No Gap

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1.10	Creating the conditions to ensure that the statutory officers, other key post holders, and members, are able to fulfil their responsibilities in accordance with legislative and regulatory requirements	▪ Job description/specifications ▪ Compliance with CIPFA's *Statement on the Role of the Chief Financial Officer in Local Government* (CIPFA, 2015) ▪ Terms of reference ▪ Committee support	Support from Legal Services and Democratic Services who advise members and officers about any relevant legislative or regulatory requirements. Any specific legislative requirements are set out in the terms of reference for the particular body e.g. Council must approve the appointment of a Head of Paid Service (Chief Executive). Contract procedure rules (GS) Financial regulations (GS) Delegations to officers are set out in part 3B of the constitution. The Monitoring Officer attends the Corporate Board, Cabinet and Council. CIPFA's *Statement on the Role of the Chief Financial Officer in Local Government* (CIPFA, 2016) (GS) was complied with during 2017/18. GS	HP DC	LC 07/03/18 SDan 26/02/18	No Gap
1.11	Striving to optimise the use of the full powers available for the benefit of citizens, communities and other stakeholders	▪ Record of legal advice provided by officers	Legal support is provided for all major Council projects. The Monitoring Officer is a lawyer and attends the Corporate Board. Cabinet decision reports require legal clearance and decision report templates (GS) require legal comments which form the record of legal advice.	HP	LC 07/03/18	No Gap

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	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
1.12	Dealing with breaches of legal and regulatory provisions effectively	▪ Monitoring officer provisions ▪ Record of legal advice provided by officers ▪ Statutory provisions	Reports recommending a decision to committees/cabinet/Council are cleared by a lawyer and the report template (GS) contains a section for legal comments. Members' code of conduct (GS) requires that members have regard to advice given by Monitoring Officer and Chief Finance Officer and that they must not act in a manner which causes the Council to act unlawfully. Whistleblowing procedure (GS) Complaints policy (GS) Disciplinary procedure (GS)	HP	LC 03/07/18	No Gap
1.13	Ensuring corruption and misuse of power are dealt with effectively	▪ Effective anti-fraud and corruption policies and procedures ▪ Local test of assurance (where appropriate)	The Corporate Anti-Fraud and Corruption Strategy 2016-19 (GS) was reviewed during 2017-18 with no changes made. The original document went before GARMS on 6th December 2016 for consideration and then approved by Council on 23rd February 2017 for inclusion in the Constitution. The strategy will be reviewed annually as part of the Corporate Anti Fraud Team (CAFT) plan. The CAFT Year End Report 2017-18 will specifically detail progress against the Strategy and will be presented to GARMS on 17th July 2018. The Council's Corporate Anti-Fraud Team undertook a self-assessment against the Code of Practice on Managing the Risk of Fraud and Corruption (CIPFA, 2014) during 2017/18 that reviewed progress against the five main principles within the code to improve the Council's arrangements. The result was a compliance level of 75%, an improvement from 54% in 2015/16, indicating that the authority has reached a 'good level' of performance against the code. Further actions have been built into the 2018/19 Corporate Anti-Fraud plan to improve fraud risk resilience and progress against the actions contained within the Fraud Strategy will be reported to the GARMS Committee in July 2018.	TW	JP 24/05/18	No Gap

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Further guidance
- Statement on the Role of the Chief Financial Officer in Local Government (CIPFA, 2015)
- Illustrative Text for Local Code of Conduct (DCLG, 2012)
- LGA Template Code of Conduct
- Code of Ethics for Local Public Service Managers – Consultation (Solace, 2015)
- Code of Practice on Managing the Risk of Fraud and Corruption (CIPFA, 2014)
- Code of Practice on Managing the Risk of Fraud and Corruption: Guidance Notes (CIPFA, 2014)
- Ethics in Practice: Promoting Ethical Standards in Public Life (Committee on Standards in Public Life, 2014)
- Standards Matter: A Review of Best Practice in Promoting Good Behaviour in Public Life (Committee on Standards in Public Life, 2013)

Core principles and sub-principles of good governance

Core Principle: Acting in the public interest requires a commitment to and effective arrangements for:

2. Ensuring openness and comprehensive stakeholder engagement . *(2007 Framework Core Principle 6: Engaging with local people and other stakeholders to ensure robust public accountability.)*

Local government is run for the public good, organisations therefore should ensure openness in their activities. Clear, trusted channels of communication and consultation should be used to engage effectively with all groups of stakeholders, such as individual citizens and service users, as well as institutional stakeholders.

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
	Openness					
2.1	Ensuring an open culture through demonstrating, documenting and communicating the organisation's commitment to openness	▪ Annual report ▪ Freedom of Information Act publication scheme ▪ Online council tax information ▪ Authority's goals and values ▪ Authority website	The local authority website is a main channel for communication and includes information on Freedom of Information and a publication scheme (disclosure log) (GS) Harrow's Ambition Plan (Corporate Plan) demonstrates the organisation's commitment to openness. It is refreshed each year with a review of achievements, and plans for what will be delivered. 2017 refresh included in evidence. GS Openness is also maintained through regular publication of 'Harrow People' a free magazine for all residents published quarterly, which covers the local community issues alongside information on Council services Council tax information is made available via the web and a booklet explaining the make-up and use of Council Tax goes to all CT payers annually.	AD	DH 27/02/18	No Gap

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				Owner	Evidence provider + date	Gap
2.2	Making decisions that are open about actions, plans, resource use, forecasts, outputs and outcomes. The presumption is for openness. If that is not the case, a justification for the reasoning for keeping a decision confidential should be provided	▪ Record of decision making and supporting materials (Cabinet & other committee reports)	Templates for committee and cabinet decisions include sections on options, financial implications, risk management and legal implications (GS). Minutes record the reasons for a decision. Reports are published on the website and meetings are held in public unless there is a good reason for not doing so under the legislative rules and these are specified. The practice is that important discussions take place in public even if confidential papers are circulated to members. Access to Information rules are in the constitution (GS).	HP	LC 07/03/18	No Gap
	Sub-principles	**Examples of Evidence**	**Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18**	**Owner**	**Evidence provider + date**	**Gap**
2.3	Providing clear reasoning and evidence for decisions in both public records and explanations to stakeholders and being explicit about the criteria, rationale and considerations used. In due course, ensuring that the impact and consequences of those decisions are clear	▪ Decision making protocols ▪ Report pro-formas ▪ Record of professional advice in reaching decisions ▪ Meeting reports show details of advice given ▪ Discussion between members and officers on the information needs of members to support decision making ▪ Agreement on the information that will be provided and timescales ▪ Calendar of dates for submitting, publishing and distributing timely reports is adhered to	Templates for committee and cabinet decisions include sections on options, financial implications, risk management, equalities and legal implications (GS) that record professional advice. Minutes record the reasons for a decision. Agendas are published in accordance with the statutory requirements. A calendar of dates is produced for officers to ensure that reports are submitted, published and distributed in accordance with the statutory timescales.	HP	LC 07/03/18	Minor Gap – as per 1.3

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2.4	Using formal and informal consultation and engagement to determine the most appropriate and effective interventions/ courses of action	• Community strategy • Use of consultation feedback • Citizen survey	A range of formal and informal consultations with a wide range of stakeholders informs Harrow's plan's, priorities and targets. Harrow's current consultations can be found listed on the website. A full set of open and previous consultation is now found on the Consultation Portal https://consult.harrow.gov.uk/consult.ti/system/listConsultations?type=all The Consultation Portal is used for consultations and surveys of service users and residents. In addition, an annual Residents Survey is carried out independently by telephone to track residents views on the Council and key local issues.	AD	DH 27/02/18	No Gap
	Engaging comprehensively with institutional stakeholders[1]					
2.5	Effectively engaging with institutional stakeholders to ensure that the purpose, objectives and intended outcomes for each stakeholder relationship are clear so that outcomes are achieved successfully and sustainably	• Communication strategy	Draft communications plan in place but not finalised for 2017/18. However two major campaigns, which were signed off by CSB and relevant portfolio holders over the period of Dec 16 – April 18 drove the external activity of the Communications team and evidence effective engagement with stakeholders (in evidence folder): • Campaign plans – Making Harrow Clean Again and Building a Better Harrow • Campaign report MHCA Communications Team also managed the Regeneration Projects specific consultations and engagement during 2017/18.	AD	DH 16/03/18 AD 25/05/18	Minor Gap 17/18 as no agreed communications plan in place from when team came back in-house April 18

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[1] Institutional stakeholders are the other organisations that local government needs to work with to improve services and outcomes (such as commercial partners and suppliers as well as other public or third sector organisations) or organisations to which they are accountable.

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	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
2.6	Developing formal and informal partnerships to allow for resources to be used more efficiently and outcomes achieved more effectively	▪ Database of stakeholders with whom the authority should engage and for what purpose and a record of an assessment of the effectiveness of any changes	Voluntary Action Harrow maintains a list of voluntary sector partners. Community Engagement Team has stakeholders lists – e.g. park users, community champions. Other lists of stakeholders and user groups are maintained in other services around the Council e.g. Children Looked After representatives, Adult Social Care service users groups.	AD	DH 28/02/18	No Gap
2.7	Ensuring that partnerships are based on: • Trust; • a shared commitment to change; • a culture that promotes and accepts challenge among partners; and that the added value of partnership working is explicit	▪ Partnership framework ▪ Partnership protocols	The framework of effective working with partners and stakeholders is established in the values and priorities of the Harrow Ambition Plan (GS). Establishment of shared commitment, trust and a culture of openness and challenge is exemplified in the terms of reference and constitution of the two principle partnership bodies, Safer Harrow and the Health and Wellbeing Board Partnership arrangements reviewed in 2017/18 (assisted self-assessment) for HBPL, Smart Lettings, Procurement (and Project Infinity) demonstrated that these partnerships are based on trust a shared commitment to change; a culture that promotes and accepts challenge among partners; and that the added value of partnership working is explicit	AD Assisted self-assessments	DH 28/02/18 SD 29/06/18	No Gap
	Engaging with individual citizens and service users effectively					

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2.8	Establishing a clear policy on the type of issues that the organisation will meaningfully consult with or involve communities, individual citizens, service users and other stakeholders to ensure that service (or other) provision is contributing towards the achievement of intended outcomes	▪ Record of public consultations ▪ Partnership framework	Consultation Standards were adopted by Cabinet in July 2015 – see item 23 p803-816. See file Consultation Standards 2015 or link below http://www.harrow.gov.uk/www2/documents/g62717/Public%20reports%20pack%20Tuesday%2014-Jul-2015%2018.30%20Cabinet.pdf?T=10 (cut and paste into browser, but relevant pages extracted and saved in evidence folder) GS This sets out the way in which the Council will consult with residents and local organisations and business to ensure the right contributions to decision making. A record of public consultations both currently open and closed is held on the Consultation Portal https://consult.harrow.gov.uk/consult.ti/system/listConsultations?type=O (this is a link to the front page of the consultation portal rather than document)_	AD	DH 28/02/18	No Gap
2.9	Ensuring that communication methods are effective and that members and officers are clear about their roles with regard to community engagement	▪ Communications strategy	Draft communications plan in place but not finalised for 2017/18. Weekly Portfolio Holder meetings with Communications Team, Leader and Corporate Directors plus meetings on individual campaigns with key officers to monitor progress against the key campaigns and other major work e.g. Harrow People, etc..	AD	AD 25/05/18	Minor Gap 17/18 as per 2.5

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	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap

2.10	Encouraging, collecting and evaluating the views and experiences of communities, citizens, service users and organisations of different backgrounds including reference to future needs	▪ Communications strategy
		▪ Joint strategic needs assessment
			Communications Strategy see 2.5/2.9
			
			Harrow's Joint Strategic Needs Assessment aims to provide analysis of a wide range of analysis of health and wellbeing of the local population and can be found via this link
			http://www.harrow.gov.uk/info/100010/health_and_social_care/130/harrow_s_joint_strategic_needs_assessment/2
			Related documents
			  • Harrow Vitality Profiles
			http://www.harrow.gov.uk/info/200088/statistics_and_census_information/966/vitality_profiles
			  • Child Poverty Strategy – available from Andrea Lagos
			  • Economic Impacts Dashboard – attached
			  • School Place Planning / Demography Report – available from Kuljit Kaur Bisal
			GS
			A Problem Profile, which looks at Violence, Vulnerability and Exploitation and which provides analysis and views from a wide range of stakeholders is currently under development (draft document sent by DH) and sits alongside the VVE strategy.
			
			The Reputation Tracker tests impacts of campaigns. Value modes is used to evidence how campaigns are constructed and delivered.
			Genie research around Fly Tipping for Making Harrow Clean Campaign
				AD	DH 28/03/18
					
					AD 25/05/18
						No Gap

2.11	Implementing effective feedback mechanisms in order to demonstrate how views have been taken into account	▪ Communications strategy	Communications Strategy see 2.5/2.9 See also consultation protocols adopted in 2015. http://www.harrow.gov.uk/www2/documents/g62717/Public%20reports%20pack%20Tuesday%2014-Jul-2015%2018.30%20Cabinet.pdf?T=10	AD	DH 28/02/18	No Gap

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				AD	DH 28/02/18	No Gap
2.12	Balancing feedback from more active stakeholder groups with other stakeholder groups to ensure inclusivity	▪ Processes for dealing with competing demands within the community, for example a consultation	Major consultations during 2017-18 with residents on local Regeneration programme taking into account the views of residents and local organisations and businesses – see Regen Strategy. Services run user groups e.g. adult social care user groups, young people's forums to get a wide range of views and ensure that voices of less active are heard. Review of VCS in 2017-18 focuses on improving relationships in a situation of reducing resources and competing demands – reports included as evidence. All major consultations aim to achieve balance in getting feedback from a wide range to be inclusive. Examples are consultations on Hardship Fund and Info, Advice and Advocacy, which are evidenced in reports to Cabinet in Jan 2017. Council officers worked with a range of stakeholder to include views of marginalised and difficult to reach groups. http://www.harrow.gov.uk/www2/documents/g62841/Public%20reports%20pack%20Thursday%2019-Jan-2017%2018.30%20Cabinet.pdf?T=10	AD	DH 28/02/18	No Gap
2.13	Taking account of the impact of decisions on future generations of tax payers and service users	▪ Reports ▪ Joint strategic needs assessment	Regeneration strategy is a major example of planning for next generation and involving – Regeneration Strategy (GS) Review of local VCS completed during 2017-18 and reported to Cabinet. Report 'Strengthening the VCSE Relationship with the Council' included in evidence. (GS) Needs analysis on voluntary sector also looks to provide sustainable outcomes for future generations See examples in Cabinet Papers January 2017 • VCS Funding Arrangements • Approval of Hardship Policy • Information, Advice and Advocacy Strategy http://www.harrow.gov.uk/www2/documents/g62841/Public%20reports%20pack%20Thursday%2019-Jan-2017%2018.30%20Cabinet.pdf?T=10 Harrow's Joint Strategic Needs Assessment looks at long terms trends and impacts http://www.harrow.gov.uk/info/100010/health_and_social_care/130/harrow_s_joint_strategic_needs_assessment/2	AD	DH 28/02/18	No Gap

Further guidance
▪ Good Governance Principles for Partnership Working (Audit Scotland, 2011)

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- Community Planning Toolkit – Working Together, Community Places through the Support of the Big Lottery Fund (2014)

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Core Principle: Acting in the public interest requires a commitment to and effective arrangements for:

3. Defining outcomes in terms of sustainable economic, social, and environmental benefits *(2007 Framework Core Principle 1: Focusing on the purpose of the authority and on outcomes for the community and creating and implementing a vision for the local area.)*

The long-term nature and impact of many of local government's responsibilities mean that it should define and plan outcomes and that these should be sustainable. Decisions should further the organisation's purpose, contribute to intended benefits and outcomes, and remain within the limits of authority and resources. Input from all groups of stakeholders, including citizens, service users, and institutional stakeholders, is vital to the success of this process and in balancing competing demands when determining priorities for the finite resources available.

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
	Defining outcomes					
3.1	Having a clear vision, which is an agreed formal statement of the organisation's purpose and intended outcomes containing appropriate performance indicators, which provide the basis for the organisation's overall strategy, planning and other decisions	▪ Corporate Plan ▪ Vision used as a basis for corporate and service planning	Harrow's vision is laid out in the Ambition Plan (GS) and is refreshed on an annual basis The Harrow Ambition Plan forms the basis for all corporate and service planning. Management Assurance exercise confirmed that service plan in place for each division within Community and People. All service plans reviewed link to Corporate Priorities. In Resources service plans in place for Strategic Commissioning Division & Customer Services & Business Transformation Division and Procurement Division. An Inter-Authority is in place for HR.	AD MA	DH 28/02/18 SD 29/06/18	Minor Gap: The Finance & Legal Divisions do not have up to date Service Plans
3.2	Specifying the intended impact on, or changes for, stakeholders including citizens and service users. It could be immediately or over the course of a year or longer	▪ Community engagement and involvement ▪ Corporate and service plans in place for 16/17 ▪ Community strategy	Service plans are developed for each Division which reflect the priorities and values in the HAP and detailed impact assessments are carried out for any major changes in service provision, particularly important for those driven by reduction in budget See also • Consultation Standards & Consultation portal – links at 2.8 Management assurance exercise confirmed that service plans in place in Community and People. In Resources service plans in place for Strategic Commissioning Division, Customer Services & Business Transformation Division and Procurement Division and an Inter-Authority Agreement is place for HR.	AD CDs	DH 28/02/18 MA 29/06/18	Minor Gap as above

Core principles and sub-principles of good governance

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
3.3	Delivering defined outcomes on a sustainable basis within the resources that will be available	▪ Regular reports on progress	Progress is tracked through the quarterly cycle: • Improvement Boards • CSB Performance Morning • Strategic Performance Report to Cabinet http://www.harrow.gov.uk/www2/documents/g64138/Public%20reports%20pack%20Thursday%2018-Jan-2018%2018.30%20Cabinet.pdf?T=10 updated and ok if cut and pasted, copy of SPR saved in evidence folder This looks at progress against the Harrow Ambition Plan The Annual Statement of Accounts (GS) provide a summary of achievements for each year.	AD	DH 28/02/18	No Gap
3.4	Identifying and managing risks to the achievement of outcomes	▪ Performance trends are established and reported upon ▪ Risk management protocols	A risk register is maintained for each major service area and is reported quarterly to the Improvement Board. The Corporate Risk Management Strategy was reviewed and updated in 2016/17 (GS) and the Corporate Risk Register was maintained and updated regularly during 2017/18.	AD TW	DH 28/02/18 SD 23/05/18	No Gap
	Sub-principles	**Examples of Evidence**	**Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18**	**Owner**	**Evidence provider + date**	**Gap**
3.5	Managing service users' expectations effectively with regard to determining priorities and making the best use of the resources available	▪ An agreed set of quality standard measures for each service element and included in service plans ▪ Processes for dealing with competing demands within the community	The Harrow Ambition Plan (GS) and the related Corporate Scorecard (GS) which is reported in the Strategic Performance Report, referenced above, provide a clear set of priorities. See Strategic Performance Report Q2 2017-18 (Cabinet 18/01/18) for example of reporting progress against HAP priorities and Corporate Scorecard http://www.harrow.gov.uk/www2/documents/g64138/Public%20reports%20pack%20Thursday%2018-Jan-2018%2018.30%20Cabinet.pdf?T=10 Service plans match the available resources with an aim to provide value for money wherever possible, most often in the environment of reducing resources.	AD	DH 28/02/18	No Gap
	Sustainable economic, social and environmental benefits					

Core principles and sub-principles of good governance

3.6	Considering and balancing the combined economic, social and environmental impact of policies and plans when taking decisions about service provision	▪ Capital investment is structured to achieve appropriate life spans and adaptability for future use or that resources (eg land) are spent on optimising social, economic and environmental wellbeing: ▪ Capital programme ▪ Capital investment strategy	Three year Capital Programme reviewed and updated annually. 2018/19 – 2020/21 draft agreed by December 2017 Cabinet and final agreed at February 2018 Cabinet – (GS) Capital Programme contains elements of a strategy as does the Treasury Management Strategy – new requirement under the Prudential Code for a more detailed Capital Strategy from 2019/20 which is currently being drafted	DC	SDan 26/02/18	No Gap
3.7	Taking a longer-term view with regard to decision making, taking account of risk and acting transparently where there are potential conflicts between the organisation's intended outcomes and short-term factors such as the political cycle or financial constraints	▪ Discussion between members and officers on the information needs of members to support decision making ▪ Record of decision making and supporting materials	Templates for committee and cabinet decisions include sections on options, financial implications, risk management, equalities and legal implications. Minutes record the reasons for a decision.(GS) Article 13 of the constitution sets out the principles of decision-making (GS). Cabinet reports required to have Finance clearance and comment.	HP DC	LC 07/03/18 SDan 26/02/18	No Gap
3.8	Determining the wider public interest associated with balancing conflicting interests between achieving the various economic, social and environmental benefits, through consultation where possible, in order to ensure appropriate trade-offs	▪ Record of decision making and supporting materials ▪ Protocols for consultation	Templates for committee and cabinet decisions include sections on options, financial implications, risk management, equalities and legal implications. Minutes record the reasons for a decision. Article 13 of the constitution sets out the principles of decision-making (GS). See Consultation Standards adopted in 2015 http://www.harrow.gov.uk/www2/documents/g62717/Public%20reports%20pack%20Tuesday%2014-Jul-2015%2018.30%20Cabinet.pdf?T=10 All key decisions are recorded in Committee Documents which are made public, available via link below: http://www.harrow.gov.uk/www2/ieDocHome.aspx?bcr=1	HP AD	LC 07/03/18 DH 28/02/18	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
3.9	Ensuring fair access to services	▪ Protocols ensure fair access and statutory guidance is followed	Service provision is measured in key areas – social care, housing, education, youth offending – to compare provision and outcomes for different groups – by age, ethnicity and other protected characteristics. See equality and diversity section of Harrow Website http://www.harrow.gov.uk/homepage/126/equality_and_diversity?WT.ac=equality_and_diversity 'Our Harrow, Our Story' is a narrative of the services and projects being delivered by the Council which not only support our Corporate Priorities but address inequality, advance equality and foster good relations. 2017 document included in evidence. There is a mandatory e-learning module on an Introduction to Equalities and Diversity on the Council's Learning Hub. The Corporate Development Programme includes events and training supporting and promoting the Council's Equality Objectives, e.g. MH peer training, Mindful Manager. The Council has adopted an Equality in Procurement guide which includes the aspiration that "As a procurer of goods and services, we are committed to ensuring our commissioning processes are fair and equitable and that service providers delivering a service on our behalf share our commitment to equality and diversity." Document included in evidence. Complaints procedure (GS) The Council takes account of any recommendations arising from inspections by external bodies. Data is collected about characteristics of service users.	AD HP	DH 28/02/18 LC 07/03/18	No Gap

Further guidance
▪ Building Partnerships: Insights from the Devolution Summit (CIPFA/Grant Thornton, 2015)

Core principles and sub-principles of good governance

Core Principle: Acting in the public interest requires a commitment to and effective arrangements for:

4. Determining the interventions necessary to optimise the achievement of the intended outcomes *(Not covered in the 2007 Framework)*
Local government achieves its intended outcomes by providing a mixture of legal, regulatory, and practical interventions (courses of action). Determining the right mix of these courses of action is a critically important strategic choice that local government has to make to ensure intended outcomes are achieved. They need robust decision-making mechanisms to ensure that their defined outcomes can be achieved in a way that provides the best trade-off between the various types of resource inputs while still enabling effective and efficient operations. Decisions made need to be reviewed frequently to ensure that achievement of outcomes is optimised.

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
	Determining interventions					
4.1	Ensuring decision makers receive objective and rigorous analysis of a variety of options indicating how intended outcomes would be achieved and associated risks. Therefore ensuring best value is achieved however services are provided	▪ Discussion between members and officers on the information needs of members to support decision making ▪ Decision making protocols ▪ Option appraisals ▪ Agreement of information that will be provided and timescales	Templates for committee and cabinet decisions (GS) include sections on options, financial implications, risk management, equalities and legal implications. Article 13 of the constitution (GS) sets out the principles of decision-making.	HP	LC 07/03/18	No Gap
4.2	Considering feedback from citizens and service users when making decisions about service improvements or where services are no longer required in order to prioritise competing demands within limited resources available including people, skills, land and assets and bearing in mind future impacts	▪ Financial strategy ▪ Specific budget consultations ▪ Overall and individual	The Final Revenue Budget 2018/19 and Medium term Financial Strategy 2018/19 – 2020/21 (GS) was reported to Cabinet in February 2018 and included a specific appendix (14) (GS). Cabinet report covers details of the budget consultation.	DC	SDan 26/02/18	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
	Planning interventions					
4.3	Establishing and implementing robust planning and control cycles that cover strategic and operational plans, priorities and targets	▪ Calendar of dates for developing and submitting plans and reports that are adhered to	Key decision schedule. GS	HP	LC 07/03/18	No Gap
4.4	Engaging with internal and external stakeholders in determining how services and other courses of action should be planned and delivered	▪ Communication plan	See 2.5 above HAP + MTF determine how to deliver Communications team then support.	AD	DH 28/02/18	No Gap
4.5	Considering and monitoring risks facing each partner when working collaboratively, including shared risks	▪ Partnership framework ▪ Risk management protocol	See examples for partnership protocols and framework above at 1.8. Shared service self-assessment confirmed covered by Inter-Authority Agreements	AD CDs (Shared Services)	DH 28/02/18 SD	No Gap

Core principles and sub-principles of good governance

| 4.6 | Ensuring arrangements are flexible and agile so that the mechanisms for delivering goods and services can be adapted to changing circumstances | ▪ Planning protocols Contracts? Flexible staffing? Business Con Plans? Pinner Wood response? | Council is agile and flexible in responding to the reality of huge funding cuts and minimising impact, plus in generating new income streams.

Recent examples of flexibility in application of council resources in changing circumstances:

Pinner Wood School 2017:
Cross council response to provide and transport 600 children temporary school after site became unsafe, carried out with local schools and partners and minimising disruption to children's education.

Grenfell Fire response 2017 – Harrow staff deployed in Emergency Response, social work, housing, rest centre management and ultimately lead taken on Site Recovery.

Social care: Innovative and preventative approaches to adults and children's services in response to growing demands and reduction in resources, redeploying staff and working with health and other partners e.g. Early Support, Keeping Families Together/Edge of Care, re-ablement, MCeP/Care Manager.

It is possible to waive the contract procedure rules(GS) in some cases including emergency | AD | DH 28/03/18 | No Gap |
| | | | The Constitution contains provisions for urgent decisions to be made where this cannot otherwise be done by the usual process.

Under the scheme of delegation in the constitution the Chief Executive can take any decisions which are delegated to the corporate director.

Arrangements to take on agency staff to deal with peaks or troughs in workload can be made through the Council's contract with Pertemps. | HP | LC 07/03/18 | |

Core principles and sub-principles of good governance

				Owner	Evidence provider + date	Gap
4.7	Establishing appropriate key performance indicators (KPIs) as part of the planning process in order to identify how the performance of services and projects is to be measured	▪ KPIs have been established and approved for each service element and included in the service plan and are reported upon regularly	Each service area has a scorecard of key indicators which is produced quarterly and reported to the Improvement Board. The most important indicators feed into the Corporate Scorecard. Detailed scorecards and related documents are available via Sharepoint. See Strategic Performance report for example of final quarterly report to Cabinet http://www.harrow.gov.uk/www2/documents/g64133/Public%20reports%20pack%20Thursday%2013-Jul-2017%2018.30%20Cabinet.pdf?T=10 Management Assurance exercise confirmed KPIs established for each Division within Community, People and Resources and reported via Improvement Boards quarterly.	AD CDs	DH 28/02/18 MA 29/06/18	No Gap
4.8	Ensuring capacity exists to generate the information required to review service quality regularly	▪ Reports include detailed performance results and highlight areas where corrective action is necessary	As above – see improvement board papers which are produced quarterly and include a range of performance, finance, HR and risk information.	AD	DH 28/02/18	No Gap
4.9	Preparing budgets in accordance with objectives, strategies and the medium term financial plan	▪ Evidence that budgets, plans and objectives are aligned	Feb 2018 Cabinet report demonstrates the links between budgets set in-line with council objectives (see background).	DC	SDan 26/02/18	No Gap
	Sub-principles	**Examples of Evidence**	**Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18**	**Owner**	**Evidence provider + date**	**Gap**
4.10	Informing medium and long term resource planning by drawing up realistic estimates of revenue and capital expenditure aimed at developing a sustainable funding strategy	▪ Budget guidance and protocols ▪ Medium term financial plan ▪ Corporate plans	Corporate Plan (GS) and Medium Term Financial Plan (GS) in place. Budget Guidance and protocols covered in Financial Regulations (GS)	DC	SDan 26/02/18	No Gap
	Optimising achievement of intended outcomes					

Core principles and sub-principles of good governance

4.11	Ensuring the medium term financial strategy integrates and balances service priorities, affordability and other resource constraints	▪ Feedback surveys and exit/ decommissioning strategies ▪ Changes as a result ▪ Commissioning Panels	Deep dives undertaken by officers + members for each Directorate in May 2017 that looked at individual service budgets to create greater understanding of service priorities and any statutory requirements. Medium term financial strategy links to the Corporate objectives that link to service objectives. 06/09/17 member and senior management review of budget proposals (similar to commissioning panels)	DC	SDan 26/02/18	No Gap
4.12	Ensuring the budgeting process is all-inclusive, taking into account the full cost of operations over the medium and longer term	▪ Budgeting guidance and protocols	Budget guidance and protocols contained in Fin Regs	DC	SDan 26/02/18	No Gap
4.13	Ensuring the medium term financial strategy sets the context for ongoing decisions on significant delivery issues or responses to changes in the external environment that may arise during the budgetary period in order for outcomes to be achieved while optimising resource usage	▪ Financial strategy	Medium Term Financial Strategy (GS) in place and sets context – see Cabinet reports Dec 17 and Feb 18.	DC	SDan 26/02/18	No Gap
4.14	Ensuring the achievement of 'social value' through service planning and commissioning	▪ Social Value Policy –Procurement ▪ Service plans demonstrate consideration of 'social value' ▪ Achievement of 'social value' is monitored and reported upon	Procurement Strategy (GS) covers Sustainability – Delivering Local Economy, Social and Community Benefits. Helping the Council achieve social value is part of the procurement vision. Management assurance exercise confirmed that social value is considered as part of service planning process and is monitored and reported upon in Community, People and Resources Directorates.	TW CDs	SD 12/08/17 MA 29/06/18	No Gap

Core principles and sub-principles of good governance

Core Principle: Acting in the public interest requires a commitment to and effective arrangements for:

5. Developing the entity's capacity, including the capability of its leadership and the individuals within it *(2007 Framework core Principle 5: Developing the capacity and capability of members and officers to be effective and Core Principle 2: Members and officers working together to achieve a common purpose with clearly defined functions and roles.)*

Local government needs appropriate structures and leadership, as well as people with the right skills, appropriate qualifications and mindset, to operate efficiently and effectively and achieve intended outcomes within the specified periods. A local government organisation must ensure that it has both the capacity to fulfil its own mandate and to make certain that there are policies in place to guarantee that its management has the operational capacity for the organisation as a whole. Because both individuals and the environment in which an organisation operates will change over time, there will be a continuous need to develop its capacity as well as the skills and experience of individual staff members. Leadership in local government is strengthened by the participation of people with many different types of backgrounds, reflecting the structure and diversity of communities.

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
	Developing the entity's capacity					
5.1	Reviewing operations, performance and use of assets on a regular basis to ensure their continuing effectiveness	▪ Regular reviews of activities, outputs and planned outcomes	See quarterly process for accountability and governance • Improvement Boards – available via Sharepoint • CSB Performance Morning • Strategic Performance Report to Cabinet http://www.harrow.gov.uk/www2/documents/g64138/Public%20reports%20pack%20Thursday%2018-Jan-2018%2018.30%20Cabinet.pdf?T=10	AD	DH 28/02/18	No Gap
5.2	Improving resource use through appropriate application of techniques such as benchmarking and other options in order to determine how resources are allocated so that defined outcomes are achieved effectively and efficiently	▪ Utilisation of research and benchmarking exercise	Benchmarking is a standard part of reporting on services and nearest neighbour and national comparators are provided as part of Improvement Board reporting. Examples of more detailed benchmarking of services in 2017/18 include: ▪ Adult social care scorecard ▪ Youth Offending scorecard Included in evidence file Management assurance confirmed that benchmarking and other options are used within Community, People and Resources to improve the use of resources.	AD CDs	DH 28/02/18 MA 29/06/18	No Gap

Core principles and sub-principles of good governance

5.3	Recognising the benefits of partnerships and collaborative working where added value can be achieved	▪ Effective operation of partnerships which deliver agreed outcomes	For examples of collaborative working and effective partnership see details of Health and Wellbeing Board and Safer Harrow at 1.8 above.
			
			Further examples are
			    ▪ Harrow Safeguarding Children's Board http://www.harrowlscb.co.uk/
			    ▪ Harrow Youth Offending Board
			Full sets of agenda and papers available on request
			
			Shared Service self-assessment confirmed IIAs in place for shared services covering effective operation and agreed outcomes.
				AD
				
				CDs
					DH 28/02/18	No Gap

	Sub-principles	**Examples of Evidence**	**Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18**	**Owner**	**Evidence provider + date**	**Gap**
5.4	Developing and maintaining an effective workforce plan to enhance the strategic allocation of resources	▪ Workforce plan ▪ Organisational development plan	Workforce data including turnover, use of agency staff, sickness absence etc is reviewed by Improvement Boards quarterly and improvement actions put in place where required. An organisational development plan linked to the Harrow 20/20 vision was agreed for 2016/17. The OD plan for this year is still in discussion and will be finalised once a new CEO and Leadership of the Council and this year's budget is agreed. The Council wide workforce strategy is being developed. Current workforce planning is awaiting an apprenticeship levy strategy to inform workforce priorities	AD	JK 19/03/18 AB 20/05/18	Minor Gap – Corporate Workforce Strategy in development
	Developing the capability of the entity's leadership and other individuals					

Core principles and sub-principles of good governance

5.5	Developing protocols to ensure that elected and appointed leaders negotiate with each other regarding their respective roles early on in the relationship and that a shared understanding of roles and objectives is maintained	▪ Job descriptions ▪ Chief executive and leader pairings have considered how best to establish and maintain effective communication	Member officer protocol (GS) Portfolio Holder roles are defined in the constitution (GS) Areas of responsibility of Chief Executive is set out in Article 12 of the Constitution Constitution sets out the role of the Chief Executive and the Leader (GS) Member/Officer roles and relationships are covered in the Member development training programme. Following the local government election in May 2018, a welcome evening has been arranged for all elected members on 8 May together with a programme of Member mandatory training in May/June 2018.	HP	LC 07/03/18	No Gap
5.6	Publishing a statement that specifies the types of decisions that are delegated and those reserved for the collective decision making of the governing body	▪ Scheme of delegation reviewed at least annually in the light of legal and organisational changes ▪ Standing orders and financial regulations which are reviewed on a regular basis	Constitution (GS) sets out functions reserved to full council or are for Cabinet and those which are delegated to committees or officers. Financial Regulations and Contract Procedure Rules reviewed regularly (last review September 2015) and are currently being reviewed for minor amendment. (GS)	HP	LC 07/03/18	No Gap
5.7	Ensuring the leader and the chief executive have clearly defined and distinctive leadership roles within a structure whereby the chief executive leads in implementing strategy and managing the delivery of services and other outputs set by members and each provides a check and a balance for each other's authority	▪ Clear statement of respective roles and responsibilities and how they will be put into practice	Member officer protocol (GS) Areas of responsibility of Chief Executive is set out in Article 12 of the Constitution Constitution sets out the role of the Chief Executive and the Leader (GS) Regular one to one meetings are held between the Leader and the Chief Executive.	HP	LC 07/03/18	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
5.8	Developing the capabilities of members and senior management to achieve effective leadership and to enable the organisation to respond successfully to changing legal and policy demands as well as economic, political and environmental changes and risks by: • ensuring members and staff have access to appropriate induction tailored to their role and that ongoing training and development matching individual and organisational requirements is available and encouraged • ensuring members and officers have the appropriate skills, knowledge, resources and support to fulfil their roles and responsibilities and ensuring that they are able to update their knowledge on a continuing basis • ensuring personal, organisational and system-wide development through shared learning, including lessons learnt from governance weaknesses both internal and external	▪ Access to update courses/ information briefings on new legislation ▪ Induction programme ▪ Personal development plans for members and officers ▪ For example, for members this may include the ability to: - scrutinise and challenge - recognise when outside expert advice is required - promote trust - work in partnership - lead the organisation - act as a community leader ▪ Efficient systems and technology used for effective support ▪ Arrangements for succession planning	Regular training sessions are held for members. Member training was conducted on safeguarding children (9 May 2017); Licensing (27 July 2017) and General Data Protection Regulation (29 January 2018) Following the local government election in May 2018, a welcome evening has been arranged for all elected members on 8 May together with a programme of Member mandatory training in May/June 2018. A peer review by the Local Government Association took place in 2016. Induction for members following election. Senior manager capabilities are reviewed at appraisal. All managers and staff are required to have a personal development plan related to their performance objectives and appraisal. The Council runs a Corporate Induction sessions every 6 weeks (throughout 2017/18) to ensure all new members of staff are inducted in a timely manner. HR policy has been changed to ensure that new members of staff should not pass probation unless they have attended induction . A staff induction checklist is in place (GS). There is a Corporate Development Programme which is reviewed and aligned to business priorities annually.	HP AD	LC 07/03/18 AB 20/05/18	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
5.9	Ensuring that there are structures in place to encourage public participation	▪ Residents' panels ▪ Stakeholder forum terms of reference ▪ Strategic partnership frameworks	See details on consultation above at 2.8. A further example is the Residents Regeneration Panel which is in place to get views and inputs to the major regen programme in Harrow Specific residents groups are set up where there is value examples are adult social care user groups, tenants and leaseholders groups.	AD	DH 28/02/18	No Gap
5.10	Taking steps to consider the leadership's own effectiveness and ensuring leaders are open to constructive feedback from peer review and inspections	▪ Reviewing individual member performance on a regular basis taking account of their attendance and considering any training or development needs ▪ Peer reviews	Appraisals are carried out at all levels of the organisation including for members and managers and appraises are required to demonstrate alignment with organisational priorities and values https://harrowhub.harrow.gov.uk/info/200283/learning_and_development/1503/new_appraisal_system_20162017 Major Ofsted inspection 2016/17 and has been used to drive service improvement and involved a strong degree of self-assessment and peer input. Outcome of 'good' achieved. 10 recommendations made – all implemented during 2017/18. LGA peer review took place in 2016 and was used as an opportunity to drive learning and improvement.	AD/HP	DH 28/02/18	No Gap
5.11	Holding staff to account through regular performance reviews which take account of training or development needs	▪ Training and development plan ▪ Staff development plans linked to appraisals ▪ Implementing appropriate human resource policies and ensuring that they are working effectively	There is a Corporate Development Programme which is reviewed and aligned to business priorities annually. All managers and staff are required to have a personal development plan related to their performance objectives and appraisal. Corporate appraisal process that is monitored for compliance.	AD AD	AB 20/05/18	No Gap
5.12	Ensuring arrangements are in place to maintain the health and wellbeing of the workforce and support individuals in maintaining their own physical and mental wellbeing	▪ Human resource policies ▪ Health and Wellbeing Strategy	A new HWB Strategy has been drafted and agreed – (copy needed for GS)	AD	AB 20/05/18	No Gap

Core principles and sub-principles of good governance

Further guidance
- Devo Why? Devo How? Guidance (and Some Answers) About Governance Under English Devolution (Centre for Public Scrutiny, 2015)
- Responding to the Challenge: Alternative Delivery Models in Local Government (Grant Thornton, 2014)
- The Excellent Finance Business Partner (CIPFA, 2015)

Core principles and sub-principles of good governance

Core Principle: Acting in the public interest requires a commitment to and effective arrangements for:

6. Managing risks and performance through robust internal control and strong public financial management *(2007 Framework Core Principle 4: Taking informed and transparent decisions which are subject to effective scrutiny and managing risk.)*

Local government needs to ensure that the organisations and governance structures that it oversees have implemented, and can sustain, an effective performance management system that facilitates effective and efficient delivery of planned services. Risk management and internal control are important and integral parts of a performance management system and are crucial to the achievement of outcomes. Risk should be considered and addressed as part of all decision making activities.

A strong system of financial management is essential for the implementation of policies and the achievement of intended outcomes, as it will enforce financial discipline, strategic allocation of resources, efficient service delivery and accountability.

It is also essential that a culture and structure for scrutiny are in place as a key part of accountable decision making, policy making and review. A positive working culture that accepts, promotes and encourages constructive challenge is critical to successful scrutiny and successful service delivery. Importantly, this culture does not happen automatically, it requires repeated public commitment from those in authority.

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
	Managing risk					
6.1	Recognising that risk management is an integral part of all activities and must be considered in all aspects of decision making	▪ Risk management protocol	A Risk Management Strategy and policy in in place (GS)	TW	SD 24/05/18	No Gap
6.2	Implementing robust and integrated risk management arrangements and ensuring that they are working effectively	▪ Risk management strategy/ policy formally approved and adopted and reviewed and updated on a regular basis	A Risk Management Strategy and policy in in place, reviewed and updated 2017.	TW	SD 24/05/18	No Gap
6.3	Ensuring that responsibilities for managing individual risks are clearly allocated	▪ Risk management protocol	Responsibility for managing individual risks clearly allocated and recorded in agreed format for risk registers.	TW	SD 24/05/18	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
	Managing performance					

6.4	Monitoring service delivery effectively including planning, specification, execution and independent post implementation review	▪ Performance map showing all key activities have performance measures
		▪ Benchmarking information
		▪ Cost performance (using inputs and outputs)
		▪ Calendar of dates for submitting, publishing and distributing timely reports that are adhered to
			Timetable and guidance for quarterly performance https://harrowhub.harrow.gov.uk/info/200237/improvement_boards/39/improvement_boards
			
			Outputs:
			  • Improvement Board reports and backing papers – available via Sharepoint
			  • CSB Performance Morning
			  • Strategic Performance Report to Cabinet
			
			Key decision schedule (GS)
				AD
				
				HP
					DH 28/02/18
					
					LC 07/03/18
						No Gap

6.5	Making decisions based on relevant, clear objective analysis and advice pointing out the implications and risks inherent in the organisation's financial, social and environmental position and outlook	▪ Discussion between members and officers on the information needs of members to support decision making ▪ Publication of agendas and minutes of meetings ▪ Agreement on the information that will be needed and timescales	Templates for committee and cabinet decisions (GS) include sections on options, financial implications, risk management, equalities and legal implications. Article 13 of the constitution (GS) sets out the principles of decision-making. All agenda and minutes of Committee meetings are published on the Council's website.	HP	LC 07/03/18	No Gap

Core principles and sub-principles of good governance

6.6	Ensuring an effective scrutiny or oversight function is in place which provides constructive challenge and debate on policies and objectives before, during and after decisions are made thereby enhancing the organisation's performance and that of any organisation for which it is responsible	▪ The role and responsibility for scrutiny has been established and is clear ▪ Agenda and minutes of scrutiny meetings ▪ Evidence of improvements as a result of scrutiny ▪ Terms of reference ▪ Training for members ▪ Membership	The scrutiny function (terms of reference GS) comprises an overview and scrutiny committee, a performance and finance sub- committee, and lead scrutiny councillors for: • Public Health and Well being • Community and Regeneration • Children and Families • Adult Services • Corporate Resources The function is driven by the need to hold the council and our partners to account for their performance and the establishment of the performance and finance sub-committee as the driver of scrutiny is a key component in ensuring that the function is focused on the issues of the greatest importance to the council. The lead members ensure that expertise to tackle particular areas of service delivery is maintained. The structure is subject to regular review and is supported by meetings of the scrutiny leadership group, comprising the leads and the chairs and vice chairs of the committees, which considers agenda and review programmes, provides strategic direction for the function and overall co-ordination between the leads and committees.	HP	LC 07/03/18	No Gap
			LGA Peer Review in 2016 led to recommendations for review and improvement of scrutiny function. As a result, a review by the Centre for Public Scrutiny was commissioned and led to improvements during 2017. Report in evidence folder Further details of Harrow's scrutiny function are found here http://www.harrow.gov.uk/info/200153/scrutiny http://www.harrow.gov.uk/www2/ieListMeetings.aspx?CId=276&Year=0	AD	DH 28/02/18	
6.7	Providing members and senior management with regular reports on service delivery plans and on progress towards outcome achievement	▪ Calendar of dates for submitting, publishing and distributing timely reports that are adhered to	Timetable and guidance for quarterly performance https://harrowhub.harrow.gov.uk/info/200237/improvement_boards/39/improvement_boards Outputs: • Improvement Board reports and backing papers – available via Sharepoint • CSB Performance Morning • Strategic Performance Report to Cabinet	AD	DH 28/02/18	No Gap

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Core principles and sub-principles of good governance

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
6.8	Ensuring there is consistency between specification stages (such as budgets) and post implementation reporting (eg financial statements)	▪ Financial standards, guidance ▪ Financial regulations and standing orders	Financial Regulations and Contract Procedure rules in place. Budget monitoring undertaken monthly for revenue and quarterly for capital – reported to CSB monthly and Cabinet at least quarterly (P2, Q1,Q2,Q3, outturn).	DC	SDan 26/2/18	No Gap
	Robust internal control					
6.9	Aligning the risk management strategy and policies on internal control with achieving objectives	▪ Risk management strategy ▪ Audit plan ▪ Audit reports	Risk management Strategy in place, Corporate Risk Register, Audit Plan and reports aligned to Corporate and service objectives.	TW	SD 29/7/18	No Gap
6.10	Evaluating and monitoring risk management and internal control on a regular basis	▪ Risk management strategy/ policy has been formally approved and adopted and is reviewed and updated on a regular basis	Updated Risk Management strategy not formally approved. Corporate and Directorate reviewed, updated and reported quarterly.	TW	SD 29/6/18	Minor Gap – RM Strategy be formally approved
6.11	Ensuring effective counter fraud and anti-corruption arrangements are in place	▪ Compliance with the Code of Practice on Managing the Risk of Fraud and Corruption (CIPFA, 2014)	Compliance with Code monitored and action plan in place – 2017/18 self- assessment Green Assurance	TW	SD 29/6/18	No Gap
6.12	Ensuring additional assurance on the overall adequacy and effectiveness of the framework of governance, risk management and control is provided by the internal auditor	▪ Annual governance statement ▪ Effective internal audit service is resourced and maintained	An effective IA service is resourced and maintained – independently reviewed every five years and self-assessed against PSIAS annually. HIA overall statement included in AGS.	TW	SD 29/6/18	No Gap

Core principles and sub-principles of good governance

| 6.13 | Ensuring an audit committee or equivalent group/ function, which is independent of the executive and accountable to the governing body:

• provides a further source of effective assurance regarding arrangements for managing risk and maintaining an effective control environment
• that its recommendations are listened to and acted upon | ▪ Audit committee complies with best practice. See Audit Committees: Practical Guidance for Local Authorities and Police (CIPFA, 2013)
▪ Terms of reference
▪ Membership
▪ Training | Audit Committee in place, ToR in place, cross party and training undertaken.

Whilst the Audit Committee broadly complies with CIPFA best practice it has not been specifically reviewed against CIPFA best practice for several years. | TW | SD 29/6/18 | Minor Gap – Review of AC against CIPFA best practice included in 2018/19 IA Plan. |

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
	Managing data					

Core principles and sub-principles of good governance

| 6.14 | Ensuring effective arrangements are in place for the safe collection, storage, use and sharing of data, including processes to safeguard personal data | ▪ Data management framework and procedures
▪ Designated data protection officer
▪ Data protection policies and procedures | Information Management policies and procedures in place including data protection.

Information Governance Board meets regularly.

GDPR: Last September, we included a communication in the staff newsletter and informed you that in May 2018 the current Data Protection Act 1998 will be replaced by a new Data Protection Act 2018 reflecting the EU General Data Protection Regulation (GDPR).

Progress So Far

Since then, we have provided face to face training for Information Asset Owners (Divisional Directors) and Information Asset Controllers (Heads of Service/Service Managers) and other Senior Professionals. Information Asset Owners and Controllers are now in the process of completing a GDPR action plan for implementation within the Services Area, to ensure compliance with the new law by May 25th 2018.

Briefing sessions for Members were held earlier this week.

Online training for all staff will be available soon, but in the meantime you can find out more about the changes and new requirements in this GDPR Introduction and Awareness Presentation.

The General Data Protection Regulation is an evolution of data protection law rather than revolution and many of the GDPR's concepts and principles are the same as under the DPA; however, there are new elements and significant enhancements of individual rights that we must take into account. The GDPR places greater emphasis on the documentation that we must keep to demonstrate accountability, compliance and transparency around what personal data we collect, how we use it, who we share it with, how long we keep it for and how we protect it. | TW | SD 24/05/18

Taken from Harrow web-site | No Gap |

Core principles and sub-principles of good governance

6.15	Ensuring effective arrangements are in place and operating effectively when sharing data with other bodies	• Data sharing agreement • Data sharing register • Data processing agreements	Data sharing agreements are put in place according to need e.g. agreement with Met and other partners to share information to reduce gang activity. An Information Asset register which includes details of privacy notices and data sharing is maintained by Corporate IT. Information Governance Training is mandatory for all staff. Guidance and further information is available via the link https://harrowhub.harrow.gov.uk/info/200145/	AD	DH 28/02/18	No Gap
6.16	Reviewing and auditing regularly the quality and accuracy of data used in decision making and performance monitoring	• Data quality procedures and reports • Data validation procedures	Data quality policy is currently under review Ongoing data quality work includes: • 'Data days' in social care, youth offending, housing where practitioners bring records up to date and work through exception reports produced by analysts • Regular management information to service with information on missing data e.g. ethnicity, gender, school etc • Reconciliation of datasets to ensure completeness and high quality e.g. UPRN matching	AD	DH 28/02/18	Minor gap – data Quality policy review overdue – to be reviewed 2018/19
	Strong public financial management					
6.17	Ensuring financial management supports both long term achievement of outcomes and short-term financial and operational performance	• Financial management supports the delivery of services and transformational change as well as securing good stewardship	Finance Business Partner model in operation. Finance input to all Cabinet decision reports.	DC	SDan 26/02/18	No Gap

Core principles and sub-principles of good governance

| 6.18 | Ensuring well-developed financial management is integrated at all levels of planning and control, including management of financial risks and controls | ▪ Budget monitoring reports | As above re budget monitoring

Risks covered in Budget report to Cabinet

Strategic Financial risks covered in Corporate Risk register reported to CSB and GARMS | DC | SDan 26/02/18 | No Gap |

Further guidance
- From Bolt-on to Built-in: Managing Risk as an Integral Part of Managing an Organization (IFAC, 2015)
- Code of Practice on Managing the Risk of Fraud and Corruption (CIPFA, 2014)
- Code of Practice on Managing the Risk of Fraud and Corruption: Guidance Notes (CIPFA, 2015)
- Whole System Approach to Public Financial Management (CIPFA, 2012)
- Audit Committees: Practical Guidance for Local Authorities and Police (CIPFA, 2013)

Core principles and sub-principles of good governance

Core Principle: Acting in the public interest requires a commitment to and effective arrangements for:

7. Implementing good practices in transparency, reporting, and audit to deliver effective accountability *(Not covered in the 2007 Framework.)*

Accountability is about ensuring that those making decisions and delivering services are answerable for them. Effective accountability is concerned not only with reporting on actions completed, but also ensuring that stakeholders are able to understand and respond as the organisation plans and carries out its activities in a transparent manner. Both external and internal audit contribute to effective accountability

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
	Implementing good practice in transparency					
7.1	Writing and communicating reports for the public and other stakeholders in a fair, balanced and understandable style appropriate to the intended audience and ensuring that they are easy to access and interrogate	▪ Website ▪ Annual report	Web Team Templates and guidance for committee and cabinet decision reports (GS) include sections on options, financial implications, risk management, equalities and legal implications. Article 13 of the constitution (GS) sets out the principles of decision-making	TW HP	CC/RStJ LC 07/03/18	Minor Gap – as per 1.3
7.2	Striking a balance between providing the right amount of information to satisfy transparency demands and enhance public scrutiny while not being too onerous to provide and for users to understand		Templates and guidance for committee and cabinet decision reports (GS) include sections on options, financial implications, risk management, equalities and legal implications.	HP	LC 07/03/18	No Gap
	Implementing good practices in reporting					

Core principles and sub-principles of good governance

7.3	Reporting at least annually on performance, value for money and stewardship of resources to stakeholders in a timely and understandable way	▪ Formal annual report which includes key points raised by external scrutineers and service users' feedback on service delivery ▪ Annual financial statements	Progress is tracked through the quarterly cycle: • Improvement Boards • CSB Performance Morning • Strategic Performance Report to Cabinet As above This looks at progress against the Harrow Ambition Plan. An annual refresh of the HAP also tracks progress and is a public document (GS). The Annual Financial Statements (GS) also provide a summary of achievements for each year.	AD DC	DH 28/02/18 SDan 26/02/18	No Gap
	Sub-principles	**Examples of Evidence**	**Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18**	**Owner**	**Evidence provider + date**	**Gap**
7.4	Ensuring members and senior management own the results reported	▪ Appropriate approvals	As 7.3 above – regular reporting goes to Portfolio Holders and Leader of the Council via quarterly reporting cycle.	AD	DH 28/02/18	No Gap
7.5	Ensuring robust arrangements for assessing the extent to which the principles contained in this Framework have been applied and publishing the results on this assessment, including an action plan for improvement and evidence to demonstrate good governance (the annual governance statement)	▪ Annual governance statement ▪ Annual review of governance	Evidence based annual review of governance undertaken that assesses the extent to which the principles contain in the Framework have been applied. The results are published in the AGS and an action plan developed where significant gaps identified.	TW	SD 23/05/18	No Gap

Core principles and sub-principles of good governance

7.6	Ensuring that this Framework is applied to jointly managed or shared service organisations as appropriate	▪ Annual governance statement ▪ Annual review of governance	Shared Service self-assessment undertaken to feed into the annual governance review and the AGS.	TW	SD 29/06/18	No Gap
7.7	Ensuring the performance information that accompanies the financial statements is prepared on a consistent and timely basis and the statements allow for comparison with other, similar organisations	▪ Format follows best practice	CIPFA best practice followed, checked by External Auditors, statutory timescales met. Statement a public document allowing for comparison with other similar organisations.	DC	SDan 26/02/18	No Gap
	Assurance and effective accountability					
7.8	Ensuring that recommendations for corrective action made by external audit are acted upon	▪ Recommendations have informed positive improvement	Recommendations implemented wherever possible and progress reported annually to GARMS and reviewed annually by External Auditor. Evidence report to GARMS. All 4 recommendations made in 2016/17 have been implemented.	DC	SDan 26/02/18	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of Evidence	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2017/18	Owner	Evidence provider + date	Gap
7.9	Ensuring an effective internal audit service with direct access to members is in place, providing assurance with regard to governance arrangements and that recommendations are acted upon	▪ Compliance with CIPFA's Statement on the Role of the Head of Internal Audit (2010) ▪ Compliance with Public Sector Internal Audit Standards	Effective IA service in place with direct access to members. Assurance on governance provided annually via IA Plan, annual governance review and HIA Opinion. Level of implementation of IA recommendations monitored and reported twice a year to GARMS Committee –target exceeded 2017/18. CIPFA Statement on Role of HIA complied with and compliance with PSIAS self assessed annually and independently every five years – 2017 (generally conforms). Agreed actions implemented.	TW	SD 23/05/18	No Gap
7.10	Welcoming peer challenge, reviews and inspections from regulatory bodies and implementing recommendations	▪ Recommendations have informed positive improvement	LGA peer review took place in 2016 and was used as an opportunity to drive learning and improvement Major Ofsted inspection 2017 and has been used to drive service improvement and involved a strong degree of self- assessment and peer input. Outcome of 'good' achieved. 10 recommendations made – all implemented during 2017/18. Review of scrutiny function carried out in 2017 – recommendations implemented.	AD	DH 28/02/18	No Gap
7.11	Gaining assurance on risks associated with delivering services through third parties and that this is evidenced in the annual governance statement	▪ Annual governance statement	Covered in Annual governance Statement Shared Service self- assessment confirmed IIAs cover risks associated with delivering services	TW CDs	SD 23/05/18 SD 29/06/18	No Gap
7.12	Ensuring that when working in partnership, arrangements for accountability are clear and the need for wider public accountability has been recognised and met	▪ Community strategy	See examples of key partnerships with accountability structures at 1.8 Shared Service self- assessment confirmed that IIAs clearly cover accountability.	AD CDs	DH 28/02/18 SD 29/06/18	No Gap

Further guidance

▪ Audit Committees: Practical Guidance for Local Authorities and Police (CIPFA, 2013)
▪ Get in on the Act: The Local Audit and Accountability Act 2014 (LGA, 2014)
▪ Governance Mark of Excellence (CIPFA)