ANNUAL GOVERNANCE REVIEW

2018/19 Evidence Table

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 systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	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 for staff and members are in place 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. 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.	Code of Conduct (GS) Corporate Plan (GS)	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
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)	Code of conduct for Members in place as well as a Code of conduct for Employees. On election Members are given induction training and there is an annual training programme devised by the Membership Development Panel. Following the local government election in May 18, a welcome evening was held for all elected members on 8 May to cover Council values, conduct and member interests plus a Members marketplace was held on 15th May to explain key council services and there was a programme of Member mandatory training in May/June 2018. 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. Code of Conduct training took place on 17 May 2018 (43 attendees out of 63 members- 68%) and again on 16 January 2019 (6 attendees – of the 20 that did not attend the training on 17 May – a further 10%). Staff are briefed on the Code of Conduct in their informal induction sessions with their line manager. The Staff employee Code of Conduct is accessible to all staff on the Hub. The link is now sent along with the relevant employee handbook to all new starters.	Code of conduct for Members (GS) Code of conduct for Employees (GS) Induction Checklist (GS)	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
1.3	Leading by example and using the above standard operating principles or values as a framework for decision making and other actions	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. Dates of meetings can be found on the Council website. Members' code of conduct 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. Code of Conduct training took place on 17 May 2018 (43 attendees out of 63 members) and again on 16 January 2019 (6 attendees – of the 20 that did not attend the training on 17 May). Templates for committee and cabinet decisions include sections on options, financial implications, risk management and legal implications. Example of minutes where interests were declared can be found on the Council website. A minor gap was identified in 2017/18 regarding the risk management section of Cabinet reports. It was agreed that when reviewing reports in their name Corporate Directors would ensure that all potential key risks relating to the proposals in the reports had been identified along with the current controls in place, underway or planned to mitigate the risks within the risk management section of the report in accordance with corporate guidance. It was agreed that a sign –off process would be introduced and evidence on the committee reports for Corporate Directors to sit alongside the statutory officer sign-offs. A new template has been produced and will be used from April 2019. Additional guidance on Corporate Director sin-off to be included from July 2019. .	Terms of Reference (GS) Members code of conduct (GS) Template for committee and cabinet decisions (GS)	Minor Gap 17/18 IA review identified that risk management section of Cabinet reports not robust, this continued to be a gap during 2018/19 however new Corporate Director sign-off process introduced in April 2019 with specific responsibility for ensuring risk section robust will close this gap for 2019/20.

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
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	Members' code of conduct 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.

Example of minutes where interests were declared can be found on the Council website.

The Gifts and Hospitality Protocol 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 sets out rules on the acceptance of gifts and hospitality. Registers are kept in each department.

Whistleblowing policy is available to staff on the intranet and available to the public on the governance pages of the website.

2018/19 Management Assurance exercise has confirmed that register of interests and gifts& hospitality maintained and updated by each Directorate.

A Corporate Complaints policy in place.

The Corporate Anti-Fraud and Corruption Strategy 2016-19 was reviewed during 2018-19 but no changes were made due to an expected update to the Local Government Fighting Fraud & Corruption Locally Strategy in 2019-20. 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 2018/19 that reviewed progress against the five main principles within the code to improve the Council's arrangements. The result was a compliance level of 78%, an improvement from 75% in 2017/18, indicating that the authority has reached a 'good level' of performance against the code. Further actions have been built into the 2019/20 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 2019. | Members code of conduct (GS)

Gifts and Hospitality Protocol (GS)

Employee code of conduct (GS)

Whistleblowing policy (GS)

Corporate complaints policy (GS)

Corporate Anti-Fraud and Corruption Strategy 2016-19 (GS) | 2018/19 No Gap (2017/18 minor Gap closed as Whistleblowing Policy now available on Council web-site) |

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
	Demonstrating strong commitment to ethical values			
1.5	Seeking to establish, monitor and maintain the organisation's ethical standards and performance	Financial regulations Contract procedure rules Constitution 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.	Financial Regulations (GS) Contract Procedure Rules (GS) Constitution (GS)	No Gap
1.6	Underpinning personal behaviour with ethical values and ensuring they permeate all aspects of the organisation's culture and operation	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. Following the local government election in May 18, a welcome evening was held for all elected members on 8 May and there was a programme of Member mandatory training in May/June 2018. Code of Conduct training took place on 17 May 2018 (43 attendees out of 63 members) and again on 16 January 2019 (6 attendees – of the 20 that did not attend the training on 17 May.	Employee Code of Conduct Councils Disciplinary Procedure Whistleblowing Procedure Member mandatory training	18/19 No Gap (17/18 gap no member training on code of conduct during 2017-18 – gap closed by member training provided early 18/19)

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
1.7	Developing and maintaining robust policies and procedures which place emphasis on best practice and legislation	All our policies incorporate legislation and employment law best practice. Specifically Paragraph 1.4 of the Induction checklist 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. The Council has developed a new Equalities Vision and an on-going 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. There is also the workforce equalities report that goes to the Employees' Consultative Forum each year. In addition there is also a separate annual report that the Policy Team put together which covers equalities for the whole borough and not just the workforce. The timescales for the reports are different and the Policy Team report for 18/19 (see attached (1.7.5) below) was produced in April 2019 covering 18/19 and the report for 18/19 going to the Consultative Forum will be produced in the autumn of 2019 (so the 17/18 report is the most recent – see also attached below) The annual Equalities in Employment report is presented to the Employee Consultative Forum – *Dec 18 covering 2017/18 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. A commercial & Procurement Strategy is in place.	Induction checklist (GS) Equalities vision Workforce equalities report Policy Team annual report Equalities in Employment report Equalities and Diversity mandatory e-learning Corporate Induction Equalities Session Commercial & Procurement Strategy (GS)	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
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	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** – Terms of Reference **Safer Harrow** – see ToR Commercial partnerships and shared services are covered by contracts/Inter Authority Agreements that detail standards required.	Health & Wellbeing Terms of Reference (GS) Safer Harrow Terms of Reference (GS)	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	Constitution is kept up to date and compliant with the law. 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. Changes made to the constitution during 2018/19: **May 2018:** Part 3A General Index and Terms of Reference (NWLJOSC & Planning ToR, new PH roles) Part 6 Members' Allowances Scheme **Nov 2018:** Article 11 – JOSC Joint arrangements Part 3A General Index and Terms of Reference Part 4B Committee Procedure Rules – Rule 30 Part 5L Anti Money Laundering Policy **Feb 2019:** Article 13 Decision Making – Principles amended for HP Part 3A General Index and Terms of Reference – GARMS ToR Part 4K Financial Regulations Part 6 Members' Allowances Scheme	Constitution (GS)	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
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	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 Financial regulations 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) was complied with during 2018/19.	Contract Procedure Rules (GS) Financial Regulations (GS) Delegations to officers (GS) CIPFA Statement of the Role of the CFO in Local Government (GS)	No Gap
1.11	Striving to optimise the use of the full powers available for the benefit of citizens, communities and other stakeholders	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 require legal comments which form the record of legal advice.	Decision report template (GS)	No Gap
1.12	Dealing with breaches of legal and regulatory provisions effectively	Reports recommending a decision to committees/cabinet/Council are cleared by a lawyer and the report template contains a section for legal comments. Members' code of conduct 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 Complaints policy Disciplinary procedure	Decision report template (GS) Members Code of Conduct (GS) Whistleblowing Procedure (GS) Complaints Policy (GS) Disciplinary Procedure (GS)	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
1.13	Ensuring corruption and misuse of power are dealt with effectively	The Corporate Anti-Fraud and Corruption Strategy 2016-19 (GS) was reviewed during 2018-19 but no changes were made due to an update to the Local Government Fighting Fraud & Corruption Locally Strategy expected in 2019-20. 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 2018/19 that reviewed progress against the five main principles within the code to improve the Council's arrangements. The result was a compliance level of 78%, an improvement from 75% in 2017/18, indicating that the authority has reached a 'good level' of performance against the code. Further actions have been built into the 2019/20 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 2019.	Corporate Anti-Fraud and Corruption Strategy (GS)

Self Assessment against Code of Practice | 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:

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 systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
	Openness			
2.1	Ensuring an open culture through demonstrating, documenting and communicating the organisation's commitment to openness	The local authority website is a main channel for communication and includes information on Freedom of Information and a publication scheme (disclosure log) http://www.harrow.gov.uk/site/custom_scripts/php/FOI/FOISearch.php 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. 2018 refresh covering 2018/19 was agreed at the July 2018 Cabinet meeting and the 2019 refresh covering 2019/20 was agreed at the Council in February 2019. 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.	Harrow Council Website Harrow's Ambition Plan (GS) Harrow People	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	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	Templates for committee and cabinet decisions include sections on options, financial implications, risk management and legal implications. 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.	Cabinet Decision template (GS) Access to Information Rules (GS)	No 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	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. Decision making protocols included in Constitution – agreed to be reviewed as part of Regeneration action plan.	Cabinet Decision template (GS) Agendas of meetings (on Council website) Calendar of dates (GS) Decision making protocols (in Constitution – GS)	Minor Gap 17/18 & 18/19 as per 1.3

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
2.4	Using formal and informal consultation and engagement to determine the most appropriate and effective interventions/ courses of action	A range of formal and informal consultations with a wide range of stakeholders informs Harrow's plans, 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.	Consultation Portal (Council website)	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	Whilst a Communication Strategy/Plan was not in place for 2018/19, the Council's Communications Team worked with all parts of the Council and a wide range of partner organisations and external stakeholders on media relations, marketing, campaigns, consultations, events, publications and social media in order to assist the Council in improving its relationship with its public. This includes keeping residents informed of Council activities, engaging them in dialogue around service delivery and soliciting their views to drive change.		Minor Gap 17/18 & 18/19 as no agreed communications plan in place from when team came back in-house April 18. This gap continues for 2018/19.

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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.

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
2.6	Developing formal and informal partnerships to allow for resources to be used more efficiently and outcomes achieved more effectively	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.	Stakeholders list	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	The framework of effective working with partners and stakeholders is established in the values and priorities of the Harrow Ambition Plan. 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 2018/19 (assisted self-assessment) for HBPL, Smart Lettings, Project Infinity, HR and Sancroft) 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.	Harrow Ambition Plan (GS) Partnership arrangement self-assessment	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
	Engaging with individual citizens and service users effectively			
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	Consultation Standards were adopted by Cabinet in July 2015 – see item 23 p803-816. See file Consultation Standards 2015 or link below. 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	Consultation Standards (GS) Consultation portal (Council website)	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	Communication plan for 2019/20, currently going through CSB approval. 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.	Draft Plan 2019/20	Minor Gap 17/18 & 18/19 as per 2.5

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	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 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 • Economic Impacts Dashboard • School Place Planning / Demography Report A strategic assessment of crime and anti social behaviour is produced for the Safer Harrow Partnership which analyses key local issues. This informs the annual Community Safety and Violence, Vulnerability and Exploitation Strategy. In previous years a Reputation Tracker was used to test impacts of campaigns, this was not used in 2018/19 due to cost however it is being re-introduced for 2019/20. Value modes are used to evidence how campaigns are constructed and delivered. Origins population analysis and 'Cohesion Atlas' has been commissioned across Harrow, Barnet and Brent in early 2019 under the CMF funded 'Engaging Eastern European Communities programme'.	Communications Strategy Harrow's Joint Strategic Needs Assessment Harrow Vitality Profiles Child Poverty Strategy Economic Impacts Dashboard School Place Planning / Demography Report Community Safety and Violence, Vulnerability and Exploitation Strategy Reputation Tracker	Minor Gap 18/19 – No reputation tracker in used (due to cost) however it has been recognised as a gap and is being re-introduced for 2019/20
2.11	Implementing effective feedback mechanisms in order to demonstrate how views have been taken into account	Consultation protocols adopted in 2015 see 2.8.	Consultation Protocols	No Gap
2.12	Balancing feedback from more active stakeholder groups with other stakeholder groups to ensure inclusivity	Consultations carried out with residents and stakeholders during 2018-19 are listed in the Consultation Portal – included annual budget, new square in town centre, libraries changes, cycling and parking https://consult.harrow.gov.uk/consult.ti/system/listConsultations?type=all 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.	Consultation Portal	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
2.13	Taking account of the impact of decisions on future generations of tax payers and service users	Examples of taking account of future impact of decisions can be found in Cabinet Papers. For example Cabinet 12 July 2019: • School Organisation • Dementia Friendly Housing Cabinet 17 Jan 2019: • Climate Change Strategy Harrow's Joint Strategic Needs Assessment looks at long terms trends and impacts and informs planning around health and social care http://www.harrow.gov.uk/info/100010/health_and_social_care/130/harrow_s_joint_strategic_needs_assessment/2	Example Cabinet papers Harrow's Joint Strategic Needs Assessment	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:

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 systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	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	Harrow's vision is laid out in the Ambition Plan 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, Procurement Section and Internal Audit & Corporate Anti-Fraud. An Inter-Authority agreement is in place for HR.	Harrow Ambition Plan (GS) Service Plans Inter-Authority Agreement for HR	Minor Gap: 2017/18 & 2018/19 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	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, Procurement Section and Internal Audit & Corporate Anti-Fraud Division. An Inter-Authority Agreement is place for HR.	Service Plans Consultation Portal Inter-Authority Agreement for HR	Minor Gap as at 3.1

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
3.3	Delivering defined outcomes on a sustainable basis within the resources that will be available	Progress is tracked through the quarterly cycle: • Improvement Boards • CSB Performance Morning • Strategic Performance Report to Cabinet This looks at progress against the Harrow Ambition Plan The Annual Statement of Accounts provide a summary of achievements for each year.	Annual Statement of Accounts (GS)	No Gap
3.4	Identifying and managing risks to the achievement of outcomes	Weekly/monthly/quarterly & annual performance information tracker process & outcome indicators in place identifying trends or deficits and acting upon them. Evidence example: Quarterly Children's Safeguarding Reports A risk register is maintained for each major service area and is reported quarterly to the Improvement Board. The Corporate Risk Management Strategy was last reviewed and updated in 2016/17 and is currently be re-reviewed. The Corporate Risk Register is maintained and updated regularly.	Performance Tracker Quarterly Children's Safeguarding Reports Risk Registers Corporate Risk Management Strategy 2016/17 (GS) Corporate Risk Register	No Gap
3.5	Managing service users' expectations effectively with regard to determining priorities and making the best use of the resources available	The Harrow Ambition Plan and the related Corporate Scorecard which is reported in the Strategic Performance Report, referenced above, provide a clear set of priorities. See Strategic Performance Report Q2 2018-19 (Cabinet Jan 19) for example of reporting progress against HAP priorities and Corporate Scorecard Service plans match the available resources with an aim to provide value for money wherever possible, most often in the environment of reducing resources.	Harrow Ambition Plan (GS) Corporate Scorecard (GS) Strategic Performance Report	No Gap
	Sustainable economic, social and environmental benefits			
3.6	Considering and balancing the combined economic, social and environmental impact of policies and plans when taking decisions about service provision	Two year Capital Programme reviewed and updated annually. 2019/20 – 2020/21 draft agreed by December 2018 Cabinet and final agreed at February 2019 Cabinet. In 2018/19 under the Prudential Code there was a new requirement for a more detailed capital strategy as part of the Treasury Management (TM) strategy and this has been given full effect via the February 2019 Cabinet report.	Capital Programme (GS) Prudential Code Treasury Management Strategy	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	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	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. Cabinet reports required to have Finance clearance and comment. In 2018/19 the Regeneration Strategy was significantly revised to a much lower level of spend (£172M removed from the budget) and so in the Plan's overall ambition and scope. This action is undertaken consistent with Point 3.7	Cabinet Decisions Template (GS) Article 13 in Constitution (GS)	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	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 currently being reviewed by the Monitoring Officer in response to an Internal Audit recommendations made as part of the Regeneration. 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	Cabinet Decisions Template (GS) Article 13 in Constitution (GS) Consultation Standards Committee Documents	Minor gap 2017/18 & 2018/19 as per 1.3

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
3.9	Ensuring fair access to services	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 Community' 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. 2018 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.". Complaints procedure The Council takes account of any recommendations arising from inspections by external bodies. Data is collected about characteristics of service users.	Harrow Council Website – Equality & Diversity Equality & Diversity mandatory e-learning Corporate Development Programme Equality in Procurement Guide Complaints Procedure (GS)	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:

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 systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	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	Templates for committee and cabinet decisions include sections on options, financial implications, risk management, equalities and legal implications. Article 13 of the constitution sets out the principles of decision-making that are currently being reviewed by the Monitoring Officer in response to an Internal Audit recommendations made as part of the Regeneration Review.	Cabinet Decision Template (GS) Article 13 of the Constitution (GS)	Minor Gap 17/18 & 18/19 as per 2.3
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	The Final Revenue Budget 2019/20 and Medium term Financial Strategy 2019/20 – 2020/22 was reported to Cabinet in February 2019 and included a specific appendix (14). Cabinet report covers details of the budget consultation. There was wide public consultation on the whole budget framework above (see budget report section for detail) and incl. the Final Revenue Budget 2019/20 and MTFS in the report 2019/20 – 2020/22.	Final Revenue Budget 2019/20 (GS) MTFS 2019/20 – 2020/22 (GS) Cabinet Report	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
	Planning Interventions			
4.3	Establishing and implementing robust planning and control cycles that cover strategic and operational plans, priorities and targets	Key decision schedule. GS	Key decision schedule (GS)	No Gap
4.4	Engaging with internal and external stakeholders in determining how services and other courses of action should be planned and delivered	See 2.5 above HAP + MTF determine how to deliver. Communications team then support.		No Gap
4.5	Considering and monitoring risks facing each partner when working collaboratively, including shared risks	See examples for partnership protocols and framework above at 1.8. Shared Service reviews (assisted self-assessment) confirmed covered by Inter-Authority Agreements	Self Assessment Shared Services	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
4.6	Ensuring arrangements are flexible and agile so that the mechanisms for delivering goods and services can be adapted to changing circumstances	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 include: Innovative and preventative approaches to 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. Transformation in adult social care – Early Intervention, prevention, improved pathways through care. Income generation across Council under Project Phoenix. It is possible to waive the contract procedure rules in some cases including emergency. 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.	Contract Procedure Rules (GS) Constitution (GS)	No 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	Each service area contributes to a Directorate 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. Management Assurance exercise confirmed KPIs established for each Division within Community, People and Resources and reported via Improvement Boards quarterly.	Scorecard directorate & corporate Strategic Performance Report Management Assurance	No Gap
4.8	Ensuring capacity exists to generate the information required to review service quality regularly	As above – see improvement board papers which are produced quarterly and include a range of performance, finance, HR and risk information.	Improvement board papers	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
4.9	Preparing budgets in accordance with objectives, strategies and the medium term financial plan	Feb 2019 Cabinet report above demonstrates the links between budgets set in-line with council objectives (see Background Section).	Cabinet report Feb 2019	No 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	Corporate Plan and Medium Term Financial Plan as above in pace. There is a corporate plan in place, the Harrow Ambition Plan, which is updated annually. Budget Guidance and protocols covered in Financial Regulations	Corporate Plan (GS) Medium Term Financial Plan (GS) Financial Regulations (GS)	No Gap
	Optimising achievement of intended outcomes			
4.11	Ensuring the medium term financial strategy integrates and balances service priorities, affordability and other resource constraints	Member and Officer financial and budget away days for the 2018/19 budget held in September 2018 with separate away days for capital. Medium term financial strategy links to the Corporate objectives that link to service objectives. Member and senior management review of 2018/19 budget proposals (similar to commissioning panels)	Medium Terms Financial Strategy (GS)	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	Budget guidance and protocols contained in Financial Regulations See 2018/19 budget report (February 2018)	Financial Regulations (GS) Budget Report	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	Medium Term Financial Strategy (GS) in place and sets context – see Cabinet reports Dec 18 and Feb 19.	Financial Regulations (GS) Cabinet reports Dec 18 / Feb 19	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
4.14	Ensuring the achievement of 'social value' through service planning and commissioning	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.	Procurement Strategy (GS) Management Assurance	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 systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
	Developing the entity's capacity			
5.1	Reviewing operations, performance and use of assets on a regular basis to ensure their continuing effectiveness	See quarterly process for accountability and governance • Improvement Boards – available via Sharepoint • CSB Performance Morning • Strategic Performance Report to Cabinet	Improvement Board papers Strategic Performance Report	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	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 2018/19 include: ▪ Adult social care scorecard ▪ Youth Offending scorecard Included in evidence file In Adult Services a review of service delivery and value for money was undertaken during 2018/19 by consultants IMPOWER that has been used to inform the Audit Social Care Transformation Programme. 2018/19 Management assurance exercise has confirmed that benchmarking and other options are used within Community, People and Resources to improve the use of resources.	Improvement Board papers Management Assurance	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
5.3	Recognising the benefits of partnerships and collaborative working where added value can be achieved	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 assessments confirmed IIAs in place for shared services covering effective operation and agreed outcomes.	Health & Wellbeing / Safer Harrow Terms of Reference Shared Service assessments	No Gap
5.4	Developing and maintaining an effective workforce plan to enhance the strategic allocation of resources	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 (OD) plan linked to the Harrow 20/20 vision was agreed for 2016/17. There is no live OD plan in place for 2018/19 (only an out of date document) and this gap continues for a further year in 2018/19. There is similarly no live current workforce strategy in place (which is a sub-set of the OD plan) for 2018/19 and this gap continues in 2018/19. The organisation is still producing ad hoc HR outputs, such as the Corporate Leadership Programme for First Line and Middle Managers funded by the Apprenticeship Levy but nothing that really exists under an overall umbrella HR strategy. Factors relating to this include the Council's withdrawal from the shared services arrangements with Buckinghamshire and also the need to await the appt. of a new CE and related Sen. leadership posts at the Council.		Minor Gap 17/18 & 18/19 - Organisational Development Plan and Corporate Workforce Strategy still in development

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
	Developing the capability of the entity's leadership and other individuals			
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	Member officer protocol Portfolio Holder roles are defined in the constitution 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 Member/Officer roles and relationships are covered in the Member development training programme. Following the local government election in May 2018, a welcome evening was held for all elected members on 8 May together with a programme of Member mandatory training in May/June 2018.	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 (GS) Constitution sets out the role of the Chief Executive and the Leader (GS)	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	Constitution sets out functions reserved to full council or are for Cabinet and those which are delegated to committees or officers. Financial Regulations (reviewed during 2018/19) and Contract Procedure Rules reviewed regularly.	Constitution (GS) Financial Regulations and Contract Procedure Rules (GS)	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	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	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.	Member officer protocol (GS)	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	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	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 was held 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. 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 2018/19) 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.	Member mandatory training Appraisals Corporate Induction Staff Induction Checklist	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
5.9	Ensuring that there are structures in place to encourage public participation	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.	Consultation Portal Residents Regeneration Panel Resident Groups	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	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 2017 (outcome 'Good') followed by focused visit around front door and Early Intervention during 2018. Have been used to drive service improvement and involved a strong degree of self- assessment and peer input. PeopleToo consultancy reviews of Children's Social Care and SEND. ImPower review of adult social care – to assess value for money and recommend systems and processes for driving improvement.	Appraisals External Reviews	No Gap
5.11	Holding staff to account through regular performance reviews which take account of training or development needs	There is a Corporate Development Programme which is reviewed and aligned to business priorities annually. Aligning the corporate development programme to business priorities was started by HR as part of the shared arrangements but it subsequently proved difficult to do this because of the nature of the P1 and P3 objectives and the focus then changed during 18/19 to alignment with business and organisational requirements as this was more feasible. For 19/20 the new corporate priorities (P1-P5) will be reviewed to see if it is more practical and feasible for the corporate development programme to be aligned to them as business priorities. 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.	Corporate Development Programme	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, and documentation demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	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	A range of HR policies/services are in place to support the health and wellbeing of staff including: • Occupational Health Services; • Employee Assistance Programme; • A Career Support Portal (covering mental wellbeing) • Mental Health Awareness for Managers Workshops • Mental Health Awareness E-Learning for staff • Mental Health First Aiders in place – coordinated by Public Health	HR Policies and Services	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:

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 systems, processes, documentation and other evidence demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	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	Covered by the Risk Management Strategy and Policy	Risk Management Strategy and Policy (GS)	No Gap
6.2	Implementing robust and integrated risk management arrangements and ensuring that they are working effectively	A Risk Management Strategy and Policy is in place, (currently being reviewed and updated) that outlines the robust and integrated risk management arrangement required. The Corporate and Directorate risk registers are reviewed and updated regularly.	Risk Management Strategy and Policy (GS) Quarterly Corporate risk Management reports to CSB/GARMS	No Gap
6.3	Ensuring that responsibilities for managing individual risks are clearly allocated	Responsibility for managing individual risks are clearly allocated and recorded in agreed format for risk registers.	Corporate/Directorate risk registers.	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
Managing performance				
6.4	Monitoring service delivery effectively including planning, specification, execution and independent post implementation review	Timetable and guidance for quarterly performance in place Outputs: • Improvement Board reports and backing papers • CSB Performance Morning • Strategic Performance Report to Cabinet Key decision schedule in place	Timetable on Harrow Hub Improvement Board reports on SharePoint CSB papers on SharePoint Strategic Performance Reports to Cabinet on Council website Key decision Schedule (GS)	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	Templates for committee and cabinet decisions include sections on options, financial implications, risk management, equalities and legal implications. Article 13 of the constitution sets out the principles of decision-making. All agenda and minutes of Committee meetings are published on the Council's website.	Templates for committee and cabinet decisions (GS) Article 13 of the constitution (GS) Committee agenda and minutes on Council website	Minor Gap 17/18 & 18/19 as per 1.3

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
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 scrutiny function 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.	Scrutiny ToR (GS) Details of Harrow's scrutiny function can be found on the Council's website	No Gap
6.7	Providing members and senior management with regular reports on service delivery plans and on progress towards outcome achievement	Timetable and guidance for quarterly performance in place. Outputs: • Improvement Board reports and backing papers – available via Sharepoint • CSB Performance Morning • Strategic Performance Report to Cabinet	Timetable and guidance for quarterly performance on Harrow Hub See evidence for 6.4	No Gap
6.8	Ensuring there is consistency between specification stages (such as budgets) and post implementation reporting (eg financial statements)	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).	Financial Regulations (GS) Contract Procedure Rules (GS) CSB reports on SharePoint Cabinet reports on Council's website	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
Robust internal Control				
6.9	Aligning the risk management strategy and policies on internal control with achieving objectives	Risk Management Strategy in place, Corporate Risk Register, Internal Audit Plan and reports aligned to Corporate and service objectives.	RM Strategy (GS) Corporate Risk Register reports to CSB + GARMS Internal Audit Plan report to GARMS (GS)	No Gap
6.10	Evaluating and monitoring risk management and internal control on a regular basis	Risk Management strategy/policy in place and currently being reviewed and updated.		Minor Gap – Risk Management Strategy be formally approved once updated
6.11	Ensuring effective counter fraud and anti-corruption arrangements are in place	Compliance with Code monitored and action plan in place – 2018/19 self- assessment Green Assurance – 78% compliance (see 1.13)	2018/19 Self- Assessment	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	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.	Peer review 2017/18 2018/19 self-assessment	No Gap
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 in place, ToR in place (updated 2018/19), cross party membership and training undertaken. Internal Audit assisted self-assessment of the Audit Committee against CIPFA Guidance undertaken in 2018/19. An Amber/Green assurance was given to the performance of the Audit Committee (GARMS) against the good practice principles outlined in the CIPFA Guidance indicating that the committee is soundly based and has in place a knowledgeable membership. Overall 71% of the good practice was found to be in place and operating or substantially operating effectively. 11 recommendations were made to address the areas identified as only partially or not operating, 8 are rated as medium risk and 3 are rated as low risk. All recommendations were agreed by the Committee and are in the process of being implemented.	AC ToR in Constitution (GS) AC Membership on Council's website Final AC report presented to GARMS Committee April 2019	No Gap (Minor Gap 2017/18 – closed by review of AC against CIPFA best practice undertaken in 2018/19.)

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
Managing data				
6.14	Ensuring effective arrangements are in place for the safe collection, storage, use and sharing of data, including processes to safeguard personal data	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. In August 2018 a Data Protection Officer was appointed in compliance with the new legislation. A range of Information Management policies and procedures are in place including data protection. During 2018/19 the Acceptable Use Policy was refreshed and a Special Category Data Policy was introduced. An Information Governance Board is in place and meet regularly throughout 2018/19. During 2018/19 a gap analysis of the Council's information asset registers was undertaken and the new DPO met with the Information Asset Owners (Divisional Directors) and Information Asset Controllers (Heads of Service/Service Managers) of the areas where gaps were identified to update the relevant registers. A gap analysis of privacy notices in place was also undertaken and gaps rectified. Briefing sessions for Members on GDPR were held in May 2018. Mandatory online training for all staff on information governance, cyber security and the new Data Protection legislation was developed and introduced across the Council in October 2018.	Data Protection Officer Role Profile (GS) Information Governance policies (GS) Acceptable Use Policy (GS) Information Governance Board Terms of Reference (GS) Gap Analysis Notes of Members Briefing sessions Online training on training portal	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
6.15	Ensuring effective arrangements are in place and operating effectively when sharing data with other bodies	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/	Data sharing agreements Information Asset register Mandatory Training	No Gap
6.16	Reviewing and auditing regularly the quality and accuracy of data used in decision making and performance monitoring	A Data quality Policy is in place and kept 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	Data quality policy (GS)	No Gap
	Strong public financial management			
6.17	Ensuring financial management supports both long term achievement of outcomes and short-term financial and operational performance	Finance Business Partner model in operation. Finance input to all Cabinet decision reports.	Cabinet reports (Council website)	No Gap
6.18	Ensuring well-developed financial management is integrated at all levels of planning and control, including management of financial risks and controls	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	Budget report to Cabinet Corporate Risk Register	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:

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 systems, processes, documentation and other evidence demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	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	Web Team Templates and guidance for committee and cabinet decision reports include sections on options, financial implications, risk management, equalities and legal implications. Article 13 of the constitution sets out the principles of decision-making	Cabinet Decision report and committee report templates (GS) Article 13 of the Constitution (GS)	Minor Gap 17/18 & 18/19 as per 1.3

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
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 include sections on options, financial implications, risk management, equalities and legal implications.	Cabinet Decision report and committee report templates (GS)	No Gap
Implementing good practices in reporting				
7.3	Reporting at least annually on performance, value for money and stewardship of resources to stakeholders in a timely and understandable way	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. The Annual Financial Statements also provide a summary of achievements for each year.	Harrow Ambition Plan (GS) Annual Financial Statements	No Gap
7.4	Ensuring members and senior management own the results reported	As 7.3 above – regular reporting goes to the Corporate Strategic Board (CSB – senior management), Portfolio Holders and the Leader of the Council via quarterly reporting cycle.	CSB Minutes	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	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)	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.	Annual Review of Governance (Council website)	No Gap
7.6	Ensuring that this Framework is applied to jointly managed or shared service organisations as appropriate	Shared Service/Partnership self-assessment undertaken to feed into the annual governance review and the AGS.	Shared Service Self Assessment	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	CIPFA best practice followed, checked by External Auditors, statutory timescales met. Statement a public document allowing for comparison with other similar organisations.	Financial Statement (Council website)	No Gap
	Assurance and effective accountability			
7.8	Ensuring that recommendations for corrective action made by external audit are acted upon	Recommendations implemented wherever possible and progress reported annually to GARMS and reviewed annually by External Auditor. Evidence report to GARMS.	External Audit Letter (GARMS reports on Council Website)	No 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	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 2018/19. 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.	Internal Audit Plan 2019/20 (GS) Mid & Year End Reports (GARMS reports) PSIAS Self Assessment	No Gap

Core principles and sub-principles of good governance

	Sub-principles	Examples of systems, processes, documentation and other evidence demonstrating compliance in 2018/19	Evidence GS = contained in Governance Structure	Gap
7.10	Welcoming peer challenge, reviews and inspections from regulatory bodies and implementing recommendations	LGA peer review took place in 2016 and was used as an opportunity to drive learning and improvement Annual self assessment is produced in Children's Services – in evidence folder. This is used as basis for peer scrutiny under Sector Led Improvement, plus the 'annual conversation' with Ofsted. 2 LGA Safe guarding adults peer reviews (2016 and 2017) 1 LGA Finance and resources of adults Peer review in August 2017. Review of scrutiny function carried out in 2017 – recommendations implemented.	LGA Peer review Annual Self Assessment	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	Covered in Annual governance Statement Partnership/Shared Service reviews (assisted self- assessment) confirmed IIAs/contracts cover risks associated with delivering services and that risk register/risk reviews in place.	Annual Governance Statement Shared Service Self Assessments	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	See examples of key partnerships with accountability structures at 1.8 Partnership/Shared Service reviews (assisted self- assessment) confirmed that IIAs/contracts clearly cover accountability.	Shared Service Self Assessments	No Gap