

Chief Executive's Corporate Assurance Statement 2009/10

Directorates: Adults & Housing, Chief Executive's Dept., Children's Services, Community & Environment, Corporate Finance, Legal & Governance Services, Place Shaping

Chief Executive: Michael Lockwood

	AREA OF ASSURANCE	Working well across the Directorate	Working towards/gap identified	DETAILS	Satisfactory action plan & responsible officer in place/being developed	2008/09 results - working well across the Directorate	2008/09 results - working towards/gap identified
1.	Statutory Obligations and Organisational Objectives						
1.1	Relevant organisational and service specific legislation is complied with and mechanisms are in place to review procedures in light of legislative change. (AGS 1.1)	100%	0%	Confirmed by Corporate Directors Assurance Statements		97%	3%
1.2	The division has a delivery plan that covers all relevant service areas and clearly reflects the Council's strategic objectives and legal obligations. These are consistent with professional standards and the resources available, and reflect the management of the major service and budget risks. (OR1 & AGS 1.8)	100%	0%	Confirmed by Corporate Directors Assurance Statements		89%	11%

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1.3	The division's objectives are clearly communicated to staff and stakeholders. (AGS 1.9)	97%	3%	Corporate Finance (1/5 departments) working toward/gap identified.	√	97%	3%
1.4	Adequate plans/procedures are in place for managing and collecting data for inspections, e.g. CAA.	100%	0%	Confirmed by Corporate Directors Assurance Statements		92%	8%
2.	Corporate Governance Arrangements						
2.1	All workers (f/t, p/t, temporary, agency staff and consultants) have received a copy of the Code of Conduct. (AGS 3.5 & 11.2)	94%	6%	Corporate Finance (1/5 departments) working toward/gap identified.	√	94%	6%
2.2	A Register of Interests/Gifts and Hospitality is maintained for the Directorate and declarations made are passed to management for them to assess the impact and agree action as necessary. (AGS 3.6)	100%	0%	Confirmed by Corporate Directors Assurance Statements		100%	0%
2.3	Workers are reminded regularly of the requirement to make declarations of interest.	97%	3%	Chief Executive's Dept. (1/3 departments) working toward/gap identified.	√	94%	6%
2.4	Staff are aware of the Whistleblowing and Dignity at Work policy.	94%	6%	Corporate Finance (1/5 departments), Chief Executive's Dept. (1/3 departments) working toward/gap identified.	√	New area of assurance	

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2.5	In addition to the corporate Scheme of Delegation there is a written directorate/service specific scheme of delegation in place, e.g. to cover HR responsibilities.	47%	53%	Corporate Finance (2/5 departments), Chief Executive's Dept. (2/3 departments), Schools & Children's Development, Adults & Housing (2/3 departments) working toward/gap identified.	√	94%	6%
2.6	Governance arrangements are adequate for dealing with Freedom of Information (FOI) and Data Protection (DP) requests.	100%	0%	Confirmed by Corporate Directors Assurance Statements		81%	19%
3.	Performance Management Arrangements						
3.1	Performance against the service improvement plans, delivery plans, Flagship Actions, major projects and improvement programmes is monitored through relevant performance measures (e.g. KPIs) and customer and stakeholder feedback, and appropriate action is taken to address any performance issues. (OR1, 3 & AGS 1.15)	100%	0%	Confirmed by Corporate Directors Assurance Statements		97%	3%

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3.2	The number and subject content of customer complaints and feedback received by the service is monitored and regularly reviewed by DMT and appropriate responsive action made and recorded. (SR7 & AGS 3.14, 9.6, 12.5)	97%	3%	Chief Executive's Dept. (1/3 departments) working toward/gap identified.	√	72%	28%
3.3	All data complies with the data quality policy. (SR5)	89%	11%	Corporate Finance (1/5 departments), Chief Executive's Dept. (1/3 departments), Adults & Housing (1/3 departments) working toward/gap identified.	√	67%	33%
3.4	All data collected is verified and is appropriate for a specific use. (SR5)	89%	11%	Corporate Finance (1/5 departments), Chief Executive's Dept. (1/3 departments), Adults & Housing (1/3 departments) working toward/gap identified.	√	92%	8%
4.	Management of Strategic and Operational Risk						
4.1	Risk management is embedded within the division for: <ul style="list-style-type: none"> • Strategic planning • Financial planning • Policy making • Performance management • Delivery Planning 	67%	33%	Children's Services, Community & Environment (1/2 departments) working toward/gap identified.	√	Revised area of assurance	

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4.2	Risk registers are in place for: <ul style="list-style-type: none"> Projects Partnerships 	56%	44%	Chief Executive's Dept. (1/3 departments), Schools & Children's Development, Adults & Housing (1/3 departments), Community & Environment (1/2 departments), Place Shaping working towards/gap identified.	√	Revised area of assurance	
4.3	A Health & Safety Plan is in place which covers significant hazards and is reviewed at appropriate regular intervals (at least once within the last 12 months). (AGS 3.13)	89%	11%	Corporate Finance (1/5 departments), Adults & Housing (1/3 departments), Place Shaping working towards/gap identified.	√	75%	25%
4.4	All new starters and new managers have attended the Health & Safety for staff/Managers induction within 3 months of their start date. (AGS 3.13)	83%	17%	Corporate Finance (2/5 departments), Chief Executive's Dept. (1/3 departments), Adults & Housing (1/3 departments), Place Shaping working towards/gap identified.	√	64%	36%
4.5	All staff assigned to manage premises, including the work of contractors, have been trained to manage safely.	92%	6%	Adults & Housing (1/2 departments) working towards/gap identified.	√	78%	22%
4.6	Premises Managers in your division have made staff aware of any relevant Asbestos Management Plan for the building in which they reside.	53%	47%	Children's Services, Adults & Housing (3/3 departments) working toward/gap identified.	√	78%	22%
4.7	All staff in your Division know how to access the Employees Assistance Programme.	97%	3%	Corporate Finance (1/5 departments) working toward/gap identified.	√	69%	31%

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4.8	Your division has a Business Continuity Plan and Emergency Contact List that is reviewed on an annual basis. (OR6 & AGS 3.9)	100%	0%	Confirmed by Corporate Directors Assurance Statements		94%	6%
4.9*	Information handling and data security comply with the Council's suite of Information Management and Data Security Policies.	92%	8%	Corporate Finance (1/5 departments), Chief Executive's Dept. (1/3 departments), Legal & Governance Services working toward/gap identified.	√	New area of assurance	
4.10*	Service Managers operationally own the information contained in their systems, i.e. they understand what information is held, how it is used and transferred, and who has access to it and why.	61%	39%	Chief Executive's Dept. (2/3 departments), Adults & Housing (2/3 departments), Community & Environment (1/2 departments) working toward/gap identified.	√	New area of assurance	
4.11*	An annual risk assessment is undertaken by your Information Asset Owner (Divisional Directors) for all 'owned' information assets in accordance with Information Governance guidance and report to the SIRO (Senior Information Risk Owner), ensuring that information risks are identified, documented and addressed.	33%	67%	Corporate Finance (2/5 departments), Chief Executive's Dept. (3/3 departments), Children's Services, Adults & Housing (2/3 departments), Community & Environment (1/2 departments), Legal & Governance Services working toward/gap identified.	√	New area of assurance	
5.	System of Internal Control in Place to Mitigate Principal Risks						
5.1	Staff are aware of and have access to the Council's Financial Regulations, which are being complied with. (AGS 3.1)	100%	0%	Confirmed by Corporate Directors Assurance Statements		81%	19%

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5.2	All frauds and Suspected Financial Irregularities identified have been referred to Internal Audit and the Corporate Anti-fraud Team. (OR2)	100%	0%	Confirmed by Corporate Directors Assurance Statements		92%	8%
5.3	Recommendations made in Internal Audit, External Audit or Inspection Reports are implemented in a timely manner. (AGS 4.1)	92%	8%	Corporate Finance (1/5 departments), Adults & Housing (1/3 departments) working toward/gap identified.	√	89%	11%
5.4	Staff are aware of and have access to the Council's Contract Procedure Rules/Procurement policy, which are being complied with. (AGS 3.2)	100%	0%	Confirmed by Corporate Directors Assurance Statements		97%	3%
5.5	Where contracts are due to expire in the coming 12 months there is a plan in place to: <ul style="list-style-type: none"> a) review service arrangements/options e.g. potential partnerships; and b) undertake a tender exercise where appropriate 	94%	6%	Adults & Housing (1/3 departments) working toward/gap identified.	√	89%	11%
5.6	The policies, strategies, practices and procedures of the service have been mapped and prioritised for Equality Impact Assessments and the Equality Impact Assessments scheduled for the last year have been undertaken and acted upon.	31%	69%	Corporate Finance (3/5 departments), Chief Executive's Dept. (1/3 departments), Children's Services, Adults & Housing (1/3 departments), Community & Environment (2/3 departments), Place Shaping working toward/gap identified.	√	Revised area of assurance	

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5.7*	The Directorate has formed an Equality Task Group (ETG) that meets regularly and who's Chair regularly attends the Corporate Equality Group and relevant officers are aware of their divisional representative and the role of ETG.	86%	14%	Corporate Finance (1/5 departments), Adults & Housing (1/3 departments), Planning Services, Legal & Governance Services working toward/gap identified.	√	New area of assurance	
5.8	All key projects are managed in accordance with corporate guidelines including the development of appropriate risk assessments. (SR4)	75%	25%	Children's Services working toward/gap identified.	√	94%	6%
5.9	Where services are jointly provided/funded/managed, robust partnership/governance arrangements are in place which clearly define the terms of the partnership, specifying whose rules and procedures are to be followed and are regularly reviewed. (SR4 & AGS 10.12, 11.8)	69%	31%	Children's Services, Adults & Housing (1/3 departments) working toward/gap identified.	√	92%	8%
5.10	IPADs have been undertaken for employees in 2009/10 in accordance with laid down procedures. (SR8 & 17)	44%	56%	Corporate Finance (3/5 departments), Children's Services, Adults & Housing (3/3 departments) working toward/gap identified.	√	47%	53%

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5.11*	Completed IPADs have been signed off by a 'grandparent'.	47%	53%	Corporate Finance (4/5 departments), Chief Executive's Dept (1/3 departments), Adults & Housing (3/3 departments), Community & Environment (1/2 departments) working toward/gap identified.	√	New area of assurance	
5.12*	Budget spend on Learning & Development is known and the value obtained from the spend is analysed.	42%	58%	Corporate Finance (4/5 departments), Children's Services, Adults & Housing (1/3 departments), Community & Environment (1/2 departments) working toward/gap identified.	√	New area of assurance	
5.13*	Learning Logs are maintained for all staff.	28%	72%	Corporate Finance (2/3 departments), Children's Services, Adults & Housing (3/3 departments), Community & Environment (1/2 departments), Place Shaping working toward/gap identified.	√	New area of assurance	
6.	Budget Management & VFM						
6.1	All budget managers prepare a SAP monthly forecast and undertake monthly budget monitoring to minimise the risk of the budget exceeding planned provision. (SR2)	83%	17%	Adults & Housing (2/3 departments) working toward/gap identified.	√	97%	3%
6.2	The division explicitly monitors progress against planned savings, including NI 179, on a monthly basis and reports the position to the quarterly improvement board.	100%	0%	Confirmed by Corporate Directors Assurance Statements		81%	19%

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6.3	Services are benchmarked to ensure VFM is achieved. (AGS 9.7)	92%	8%	Corporate Finance (1/5 departments), Adults & Housing (1/3 departments) working toward/gap identified.	√	97%	3%
6.4	The divisional budget is on target. (SR2)	75%	25%	Children's Services working toward/gap identified.	√	100%	0%
7.	Corporate Strategies/Plans/Frameworks						
7.1	Officers are aware of relevant strategies/plans/frameworks and are implementing them.	100%	0%	Confirmed by Corporate Directors Assurance Statements		100%	0%
7.2	A Directorate Workforce Strategy is in place. (SR8)	72%	28%	Corporate Finance (1/5 departments), Children's Services working toward/gap identified.	√	69%	31%
8.	Decision Making						
8.1	Staff understand the process and adhere to timescales for the preparation and clearance of reports to CSB and Committee. (OR5)	100%	0%	Confirmed by Corporate Directors Assurance Statements		100%	0%

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8.2	Resources, costs and risks, staffing/workforce issues, environment, performance, consultation, equalities impact, legal issues and community safety issues are taken into account when officers make decisions or recommend decisions to CSB or Committee. (OR5)	100%	0%	Confirmed by Corporate Directors Assurance Statements		100%	0%
8.3	Appropriate planning and co-ordination for formal or informal consultation is carried out and the results of the consultation are explicitly referenced and taken into account when officers make decisions or recommend decisions to CSB or Committee. (OR5)	100%	0%	Confirmed by Corporate Directors Assurance Statements		100%	0%

I confirm that the above is a fair reflection of the internal control, risk management and governance arrangements in place for the Department during the financial year 2009/10:

Signature:

Title:

Date:

Reality checking

For all areas of assurance, documentation provided/requested was reality checked for reasonableness. ** Areas where specific reality checking was undertaken at the request of CGG

Colour Coding (Area of Assurance)

08/09	Change in 09/10	Colour
(Assurance level 75%)	(Assurance level 80%)	
Good assurance level (75% & above)	No change	Green
Good assurance level	Improved	Green
Good assurance level	Decrease but still above 80%	Amber
Good assurance level	Decrease below 80%	Red
Medium assurance level	No change	Amber
Medium assurance level	Improved & above 80%	Green
Medium assurance level	Still 80%	Amber
	Decrease but still 50%-79%	Amber
	Decrease 49% and below	Red
Poor assurance level	No change	Red
Poor assurance level	Improved & above 80%	Green
Poor assurance level	Improved & above 50%	Amber
Poor assurance level	Still less than 50%	Red

Colour Coding (% controls operating well/working towards 09/10)

Good/acceptable assurance level (80% and over) = **Green**
 Medium/below acceptable level (50%-79%) = **Amber**
 Poor/unacceptable level (49% and below) = **Red**

Colour Coding (New Areas of Assurance - % controls operating well/working towards 09/10)

Good/acceptable assurance level (50% and over) = **Green**
 Medium/below acceptable level (25-49%) = **Amber**
 Poor assurance level (25% and below) = **Red**

