

## 2009/10 AGS Action Plan – Update July 2011

## Appendix 4

AGS Ref	Area of Assurance	Gap Identified	Agreed Action	Responsible Officer	Timescale	Updated June 2011
1.7 c/f 08/09	Objectives are reflected in departmental plans and are clearly matched with associated budgets	<p>Delivery Plans are not developed for all areas of the council's services, so it is not possible to determine whether these reflect corporate objectives and match approved funding.</p> <p>Where Delivery Plans are developed (not all areas) these too contain prior year PI outturn and a section reporting progress with prior year projects.</p> <p>Whilst there is an intention to address this gap, a plan is not yet in evidence.</p>	Internal Audit Delivery Plan review to identify gaps and action to be taken accordingly.	All CLG members/IW/LD	March 2011	<p><b>Not implemented</b></p> <p>This review was not undertaken as higher risks were addressed as part of the annual plan</p> <p><b>GAP 2010/11</b></p>
2.5 c/f 08/09	The authority has well-established and clear arrangements for financing risk.	<p>No specific policy in place for risk financing therefore not regularly reviewed in the light of costs and alternative risk mitigation strategies.</p> <p>Monitoring of incidence of successful and unsuccessful claims is not fed into the policy for risk financing (or risk management)</p>	<p>New Insurance Manager to explore whether a specific risk financing policy is required.</p> <p>To continue to explore if/how incidence of successful and unsuccessful claims can be fed into the policy for risk financing (if it is decided one is needed) or into the risk management system.</p>	DW/KV  DW/KV	<p>March 2011</p> <p>March 2011</p>	<p><b>Implemented</b></p> <p>LEAN review improved claims processes to ensure risk financing is appropriate and prudent.</p>
2.9 c/f 08/09	Managers are accountable for managing their risks.	Control and risk self-assessment (CRSA) questionnaires are not used.	Use of Self Assessments to enhance accountability to be considered by the newly reformed CRSG.	TJ	Dec 2010	<p><b>Implemented</b></p> <p>Paper on CRSA presented to Oct 2010 CRSG meeting and agreed that CRSA not required to provide additional assurance.</p>
3.4						<b>Overall partially</b>

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c/f 08/09	There is a counter fraud and corruption policy in place which has been formally approved, regularly reviewed and widely communicated to all relevant staff.	Policy accessible on internet site but only via search facility on intranet (CAFT have no specific pages).	Consideration to be given as part of the 2009/10 fraud plan to enhancing intranet to enable policy to be more accessible to staff.	JP	March 2011	<b>implemented</b> Not implemented
		No awareness sessions etc. are run.	Corporate fraud awareness e-learning tool given go ahead to purchase, planned implementation for 3 <sup>rd</sup> quarter and phased roll out for 4 <sup>th</sup> quarter 2009/10	JP	March 2011	Not implemented  There is a corporate e-learning tool which will be utilised
		CAFT do not currently formally report identified frauds or results of NFI internally. New GARM Lead Member for CAFT has been established to progress this and CAFT now reporting to Head of A & R	To establish with GARM committee frequency and content of required reports.	JP/DW	Dec 2010	Reporting to GARM at each meeting re performance NFI will be part of this where relevant
		Register of gifts and hospitality is not reviewed from a fraud perspective.	To include in 10/11 plan – considered but not high risk enough to make plan.	JP	March 2011	Not Implemented – not considered high risk  <b>GAP 2010/11</b>
OGF7 c/f	Making sure that an effective risk management system is in operation	Business Continuity/IT Disaster recovery	Head of IT working with Divisional Directors to establish IT availability requirements for disaster recovery.	Mahesh Patel	Oct 2010	<b>Not implemented</b>  Not in place for 2010/11. Will be complete by April 2012.  <b>GAP 2010/11</b>
OGF8 c/f	Making sure that an effective risk management system is in	Health & Safety	Review Health & Safety function - Consultation Pack issued 14/07/09.	DW/Mark Riordon	August 2010	<b>Partially Implemented</b>

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	operation		Considered by cabinet 15/07/10. CAPITA working on full business case proposal.			The Capita review is complete and discounted. A comprehensive review of H&S has been carried out and a new restructure and improvement plan is commencing.  <b>GAP 2010/11</b>
1.45	The Council is narrowing the gap between the current condition of the asset base and an acceptable standard of maintenance, with high levels of backlog maintenance being reduced.	Limited resources available to meet maintenance demands.	To pursue with new Portfolio Holder.	Mike Brown	?Dec 2010	<b>Not implemented</b>  There has been no reduction in backlog maintenance due to minimal capital investment. However, future academy opportunities for high schools, will impact on current demands, reducing high levels of maintenance.  <b>Therefore no longer a GAP</b>
1.46	Significant investment decisions are evaluated using option appraisal and whole life appraisal techniques.	It is recognised that there is not a consistent approach to option/whole life appraisal across the Council.	This is acknowledged but considered reasonable, therefore no action planned.			

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3.3	There is a Whistleblowing policy in place that is regularly reviewed and evidence of the effectiveness of the policy e.g. reports on incidence of usage.	Policy not reviewed since 2007 + no evidence of effectiveness being measured.	Policy to be updated and consideration to be given to how its effectiveness can be measured.	Jon Turner		<p><b>Implemented</b></p> <p>Policy has been reviewed with no significant changes. All complaints are reported to and recorded by the Monitoring Officer, who is able to monitor effectiveness. – reports to GARM</p>
3.34	Arrangements for validating information from third parties.	This is the responsibility of the contract owner (manager responsible) and there is no consistent approach.	Paper to CSB to be produced to address gap.	Alex Dewsnap		<p><b>Not implemented</b></p> <p>November/December 2011 new timescale</p> <p><b>GAP 2010/11</b></p>
3.42	The council engages with its staff and gains their commitment to, and ownership of, the council's approach to reducing its impact on the environment	Although a well publicised Energy Saving Campaign was run in 2008/09 it is recognised that a more pro-active engagement with staff is needed.	To devise a pro-active engagement programme on the council's approach to reducing its impact on the environment.	Andrew Baker		<p><b>Not implemented</b></p> <p>Reduced staffing levels and a freeze on recruitment during 2010/11 have meant that it has not been possible to devise a programme. We anticipate recruiting and initiating a programme in the Autumn</p>

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						<b>GAP 2010/11</b>
11.4	Develop and maintain an effective standards committee with a suitable profile and publicise its role and objectives and relevant outcomes to members of the public, all staff, stakeholders and Members.	A Standards Committee has been developed however this does not currently have a suitable profile and its role and objectives and relevant outcomes are not publicised to the public, staff, stakeholders and members.	<p>Report to be presented to the Standards Committee to address this gap during 2010.</p> <p>Raising the profile of the Committee will involve a series of actions. A report was presented to the last meeting in June 2010 where this issue was raised. The Committee in response adopted a Mission Statement and Objective to address a number of areas including raising its profile.</p>	Hugh Peart		<p><b>Implemented.</b></p> <p>Under the Localism Bill, the Council will no longer be required to have a standards committee. The effective date is likely to be around April 2012. A working group has been set up to decide: 1) if we need a standards committee; 2) code of conduct; and 3) what to do about breaches of the code if it is decided to retain one. Under the Localism Bill we still have to uphold high standards but the Bill does not provide for a mechanism for breaches except in the very serious cases where it will be a criminal offence not to declare an interest.</p>
13.11	Joint workforce planning.	Although there is an integrated Children’s Workforce Strategy and	This has been identified in the Strategy for People			

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		joint induction arrangements for those working with children across local partners this does not exist to any significant extent in other Directorates	2010-2012 as an action for 2011 therefore no further action is needed here.			

KEY	
CLG	Corporate Leaders Group
CGG	Corporate Governance Group
CGWG	Corporate Governance Working Group
MB	Myfanwy Barrett – Corporate Director Finance
DW	David Ward – Divisional Director Audit & Risk
TW	Tom Whiting – Assistant Chief Executive
HP	Hugh Peart – Director of Legal & Governance
JT	Jon Turner – Divisional Director HR & Development
CC	Carol Cutler – Director of Business Transformation and Customer Service
SD	Susan Dixson – Service Manager, Internal Audit
IW	Ingrid Waloff – Senior Professional Corporate Planning
GC	George Curren – Interim Head of Legal Practice
LC	Leslie Clarke –HRD Strategy Manager
TJ	Tanya Jacobs – Interim Risk Management Manager
KG	Kan Grover – Senior Professional, Business Continuity & Emergency Planning
MG	Mark Gillett – Divisional Director Commissioning and Partnership
JP	Justin Phillips – Corporate Anti-fraud Service Manager
VD	Varsha Dadlani – Service Manager Procurement
LD	Liz Defries – Service manager Performance and Data Services
SK	Stephen Kelly – Divisional Director Planning
OGF	Old governance Framework