

A meeting of the **CORPORATE GOVERNANCE PANEL** will be held in **THE COUNCIL CHAMBER, PATHFINDER HOUSE, ST MARY'S STREET, HUNTINGDON** on **WEDNESDAY, 13TH DECEMBER 2006** at **6:00 PM** and you are requested to attend for the transaction of the following business:-

**Contact
(01480)**

APOLOGIES

1. MINUTES (Pages 1 - 2)

To approve as a correct record the Minutes of the meeting of the Panel held on 29th November 2006.

**A Roberts
388009**

2. MEMBERS' INTERESTS

To receive from Members declarations as to personal and/or prejudicial interests and the nature of those interests in relation to any Agenda item. Please see Notes 1 and 2 below.

3. CALCULATION OF COUNCIL TAX BASE 2007/2008 (Pages 3 - 6)

To consider a report by the Head of Revenue Services recommending the Council Tax Base for 2007/2008.

**J Barber
388105**

4. DPA, EIR, FOI AND PSI REQUEST PROCEDURE (Pages 7 - 26)

To consider a report by the Heads of Information Management and of Legal and Estates recommending the adoption of a procedure to deal with requests for information.

**D Horrex
388179
W Smalley
388022**

5. RISK REGISTER (Pages 27 - 46)

To receive and note a report by the Internal Audit Manager on the Risk Register.

**S Couper
388103**

6. WHISTLEBLOWING: ANNUAL REVIEW OF THE POLICY AND PROCEDURE (Pages 47 - 48)

To note the outcome of the annual review.

**D Harwood
388115**

7. REVIEW OF THE ANTI-FRAUD AND CORRUPTION STRATEGY (Pages 49 - 50)

To note the outcome of the review of the Anti-Fraud and Corruption Strategy.

**D Harwood
388115**

8. **INTERNAL AUDIT SERVICE INTERIM REPORT 2006/07** (Pages 51 - 58)

To consider a report by the Audit Manager reviewing progress towards the achievement of the 2006/07 Annual Audit Plan and associated management and performance issues.

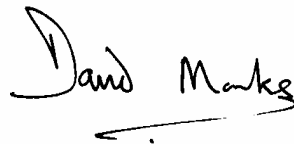
**D Harwood
388115**

9. **ACCOUNTS AND AUDIT (AMENDMENT) REGULATIONS 2006** (Pages 59 - 60)

To consider a report by the Head of Financial Services of the implications of the Accounts and Audit (Amendment) Regulations 2006.

**D Harwood
388115**

Dated this 5th day of December 2006



Chief Executive

Notes

1. *A personal interest exists where a decision on a matter would affect to a greater extent than other people in the District –*
 - (a) *the well-being, financial position, employment or business of the Councillor, a partner, relatives or close friends;*
 - (b) *a body employing those persons, any firm in which they are a partner and any company of which they are directors;*
 - (c) *any corporate body in which those persons have a beneficial interest in a class of securities exceeding the nominal value of £5,000; or*
 - (d) *the Councillor's registerable financial and other interests.*
2. *A personal interest becomes a prejudicial interest where a member of the public (who has knowledge of the circumstances) would reasonably regard the Member's personal interest as being so significant that it is likely to prejudice the Councillor's judgement of the public interest.*

Please contact A Roberts, Democratic Services Officer, Tel No 01480 388009/e-mail: Anthony.Roberts@huntsdc.gov.uk if you have a general query on any Agenda Item, wish to tender your apologies for absence from the meeting, or would like information on any decision taken by the Panel.

Specific enquiries with regard to items on the Agenda should be directed towards the Contact Officer.

Members of the public are welcome to attend this meeting as observers except during

consideration of confidential or exempt items of business.

Agenda and enclosures can be viewed on the District Council's website –
www.huntingdonshire.gov.uk (under *Councils and Democracy*).

If you would like a translation of Agenda/Minutes/Reports or would like a large text version or an audio version please contact the Democratic Services Manager and we will try to accommodate your needs.

Emergency Procedure

In the event of the fire alarm being sounded and on the instruction of the Meeting Administrator, all attendees are requested to vacate the building via the closest emergency exit and to make their way to the base of the flagpole in the car park at the front of Pathfinder House.

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HUNTINGDONSHIRE DISTRICT COUNCIL

MINUTES of the meeting of the CORPORATE GOVERNANCE PANEL held in THE COUNCIL CHAMBER, PATHFINDER HOUSE, ST MARYS STREET, HUNTINGDON on Wednesday, 29th November 2006.

PRESENT: Councillor K J Churchill – Vice-Chairman in the Chair.

Councillors J A Gray, L M Simpson and R J West.

APOLOGIES: Apologies for absence from the meeting were submitted on behalf of Councillors P J Downes, T V Rogers and S J Stephens.

26. MINUTES

Subject to the inclusion of “actions” at the end of the penultimate sentence in paragraph 2 of Minute No. 18, the Minutes of the meeting of the Panel held on 27th September 2006 were approved as a correct record and signed by the Chairman.

27. DECLARATIONS OF INTEREST

No declarations were received.

28. PROPOSED AMENDMENTS TO THE DEVELOPMENT CONTROL PROCESS

Consideration was given to a joint report by the Head of Planning Services and the Overview and Scrutiny Panel (Service Support) (a copy of which is appended in the Minute Book) on the outcome of a review of Member involvement and the procedures for the determination of development control applications. Members were acquainted with the deliberations of the Development Control Panel on the report and discussed each of the recommendations. With regard to public speaking at Development Control Panel meetings, it was noted that the order of speakers and the procedure for applications in multi-member wards would be subject to the discretion of the Chairman and reviewed in due course.

The Panel discussed the determination of applications by full Council. Having been acquainted with the views of the Development Control Panel in this respect, the Panel concluded that a recommendation on the presentation of reports and public speaking at full Council meetings should be endorsed. The intention to clarify the criteria for determining which planning applications were submitted to full Council as part of a forthcoming review of the Constitution was noted.

Having considered further recommendations in relation to training, site visits, consultation with neighbouring authorities, advance

notification of applications and the Scheme of Delegation, it was

RESOLVED

- (1) that the Council be RECOMMENDED to
 - (a) adopt the principle of public speaking at meetings of the Development Control Panel and the procedure and public information leaflet appended to the report now submitted;
 - (b) permit Members representing wards in neighbouring authorities and neighbouring parish councils affected by development proposals to address the District Council's Development Control Panel;
 - (c) permit, in those instances when a planning application is to be determined by full Council, the Council's Head of Planning Services or his representative and other relevant officers to present reports to the Council and apply the public speaking process adopted by the Development Control Panel, subject to the amendments referred to above;
 - (d) review the processes referred to in (a)-(c) above after a twelve months trial period; and
 - (e) extend training on planning matters to all Members of the Council; and
 - (f) make the necessary changes to the Council Procedure Rules contained in the constitution.

Chairman

CALCULATION OF COUNCIL TAX BASE 2007/2008 (Report by the Head of Revenue Services)

1 INTRODUCTION

- 1.1** The Local Government Finance Act 1992 requires a Billing Authority (Huntingdonshire District Council) to calculate and approve a tax base for Council Tax purposes by 31 January in respect of the following financial year. The Local Authorities (Calculation of Tax Base) Regulations 1992 (as amended) contain the rules for making the necessary calculations.
- 1.2** The tax base calculation is designed to convert all existing properties and those due for completion before the end of the period into a Band D Equivalent. This is achieved by applying a prescribed weighting to the properties in each of the respective valuation bands.
- 1.3** The resulting figure, after taking into account relevant allowances, is called the Net Tax Base. Once agreed, this figure is divided into the Council's Net Expenditure due to be raised from Council Tax and the actual Council Tax Charge for a Band D property is then derived.

2 GENERAL PRINCIPLES OF THE CALCULATION

- 2.1** A tax base calculation for the whole of the District Council's area has been undertaken, using information held as at 20 November 2006. Added to this information are details of new properties likely to be completed and banded for Council Tax purposes during the period November 2006 to March 2008. Estimates have been made regarding the possible level of occupation of these new properties and the likely discounts that they may attract, and in particular it assumes that the discount awarded to both "second homes" and "long term empty properties" will be at the minimum level (i.e. 10% and 0% respectively). The resulting calculation shows a Band D equivalent tax base of 57,868 properties.
- 2.2** When undertaking a tax base calculation, the resulting figure has to be reduced by a percentage which, in the District Council's opinion, represents the likely losses on collection during the financial year. A provision of 0.75% is required. When applying this 0.75% reduction to this calculation, a net tax base figure of 57,434 is achieved.
- 2.3** This compares with the current tax base of 56,939 and the growth is therefore 0.87%.
- 2.4** The legislation requires that the actual Tax Base Calculation is undertaken as at the 30 November. A revised calculation will have to be undertaken on that date and, if necessary, an amended report will be tabled at the Meeting.


3 RECOMMENDATIONS

3.1 It is recommended that the Corporate Governance Panel resolves as follows:-

- (a) that the report by the Head of Revenue Services regarding the calculation of the District Council's tax base for the year 2007/2008 be approved; and
- (b) that pursuant to the Head of Revenue Services' report and in accordance with the Local Authorities (Calculation of Tax Base) Regulations 1992 (as amended), the amounts calculated by the Huntingdonshire District Council as their net tax base for the whole District for the year 2007/2008 be 57,434 and shall be as listed below for each Parish of the District.

Abbotsley	189
Abbots Ripton	134
Alconbury	553
Alconbury Weston	279
Alwalton	128
Barham & Woolley	26
Bluntisham	727
Brampton	1809
Brington & Molesworth	114
Broughton	86
Buckden	1138
Buckworth	50
Bury	583
Bythorn & Keyston	147
Catworth	136
Chesterton	59
Colne	325
Conington	73
Covington	41
Denton & Caldecote	24
Diddington	30
Earith	575
Easton	75
Ellington	234
Elton	290
Eynesbury Hardwicke	769
Farcet	570
Fenstanton	1187
Folksworth & Washingley	350
Glatton	134
Godmanchester	2258
Grafham	238
Great & Little Gidding	127
Great Gransden	458
Great Paxton	377
Great Staughton	311
Haddon	20
Hail Weston	238
Hamerton	42

Hemingford Abbots	319
Hemingford Grey	1153
Hilton	439
Holme	241
Holywell-cum-Needingworth	973
Houghton & Wyton	1200
Huntingdon	6709
Kings Ripton	73
Kimbolton & Stonely	585
Leighton Bromswold	80
Little Paxton	1122
Morborne	11
Offord Cluny	197
Offord d'Arcy	295
Old Hurst	96
Old Weston	90
Perry	266
Pidley-cum-Fenton	156
Ramsey	2877
St Ives	5626
St Neots	9096
St Neots Rural	30
Sawtry	1735
Sibson-cum-Stibbington	200
Somersham	1361
Southoe & Midloe	157
Spaldwick	222
Steeple Gidding	10
Stilton	790
Stow Longa	60
Tetworth	18
The Stukeleys	731
Tilbrook	107
Toseland	38
Upton & Coppingford	87
Upwood & The Raveleys	411
Warboys	1350
Waresley	128
Water Newton	43
Winwick	41
Wistow	220
Woodhurst	153
Woodwalton	86
Yaxley	2808
Yelling	<u>140</u>
	<u>57434</u>

Contact Officer: *Julia Barber - Head of Revenue Services*
 01480-388105

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CORPORATE GOVERNANCE PANEL

DPA, EIR, FOI, and PSI REQUEST PROCEDURE (Report by Head of Information Management Division and Head of Legal and Estates)

1. PURPOSE

- 1.1 The purpose of this paper is to seek adoption of the attached procedure to manage requests for information received by the Council. The procedure has been circulated and approved by all FOI Co-ordinators and has been included for information purposes.
- 1.2 The Council has responsibilities under the Environmental Information Regulations (EIR), Freedom of Information Act (FOI), Data Protection Act (DPA) and Re-use of Public Sector Information (PSI) to make information held by the Council available to the general public.


2. OVERVIEW

- 2.1 The purpose of this procedure is to ensure that all requests for information are processed in the correct manner.
- 2.2 Currently all EIR, FOI, PSI requests are processed by IMD and then forwarded to the appropriate FOI Co-ordinator to locate the relevant information. DPA requests are processed by Legal and Estates Division. It is proposed that all requests are logged on a centralised request tracker. The development of a new request tracker (due early 2007) will enable departmental FOI Co-ordinators to manage their requests more effectively, and reduce the effort needed to comply with requests. Assistance will be provided by the FOI Officer / Data Protection Officer in decisions of disclosure.
- 2.3 Based on guidance from the Department of Constitutional Affairs and the Information Commissioner, the Internal Review Procedure (complaints procedure) differs from the Council's Corporate Complaints Procedure. The Internal Review Procedure involves a one stage process before any complaints can be sent to the Information Commissioner. Internal Reviews of FOI, EIR, PSI requests will be conducted by the Head of IMD (or in his absence another nominated Head of Service) and Internal Reviews of DPA requests will be conducted by the Head of Legal and Estates (or in his absence another nominated Head of Service). This is in line with the Persistent and/or Vexatious Complaints Policy agreed by Corporate Governance Panel.


3. RECOMMENDATIONS

- 3.1 It is recommended that the DPA, EIR, FOI, and PSI Procedure is adopted corporately.

Contact Officer: Dan Horrex – Information Manager (FOI Officer)

 **01480 388179**

Wayland Smalley – Solicitor (Data Protection Officer)

 **01480 388022**

NB: FOI Co-ordinators are nominated representatives from each division.

Attached: DPA, EIR, FOI, PSI Procedure

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Data Protection Act (DPA), Environmental
Information Regulations (EIR), Freedom of
Information Act (FOI) and Public Sector
Information (PSI) Procedure

Version: 1
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Glossary

DPA - Data Protection Act 1998
EIR – Environmental Information Regulations 2004
FOI – Freedom of Information Act 2000
HDC – Huntingdonshire District Council
PSI – Public Sector Information Regulations 2005
RFI – Requests for Information
SAR – Subject Access Requests

Introduction

Freedom of Information Act 2000 (FOI)

The Freedom of Information Act 2000 has created significant new rights of access to recorded information held by public authorities in England, Wales and Northern Ireland. The FOI takes a major step forwards in terms of openness and accountability and is part of a wider group of policies. The FOI has been implemented in two parts:

February 2003 – As a public authority, Huntingdonshire District Council (HDC) were required to have a Publication Scheme. The Publication Scheme details all of the information that is regularly published by HDC. The Publication Scheme shows where the information is located, the format of the information is published and whether there is a charge for providing the information.

Details of the [Publication Scheme](#) may be viewed on the website.

January 2005 – Anyone has been granted the right to request information held by the Council as a public authority.

Under this Act, HDC must comply with:

- The right of a person to be told, in writing, whether specified information is held by the public authority.
- The right of a person to receive that information if no exemptions apply and provided that the correct fee (if any) is paid.

Each request must be responded to in full within 20 working days.

Environmental Information Regulations 2004 (EIR)

The Environmental Information Regulations 2004 allow people to request environmental information from public authorities i.e. HDC and those bodies carrying out a public function, i.e. privatised utility companies.

A request can be oral or written including by electronic or hardcopy format.

What is Environmental Information?

Any information in written, visual, aural, electronic or any other material form on -
(a) the state of the elements of the environment, such as air and atmosphere, water, soil, land, landscape and natural sites including wetlands, coastal and marine areas, biological diversity and its components, including genetically modified organisms, and the interaction among these elements;

(b) factors, such as substances, energy, noise, radiation or waste, including radioactive waste, emissions, discharges and other releases into the environment, affecting or likely to affect the elements of the environment referred to in (a);

(c) measures (including administrative measures), such as policies, legislation, plans, programmes, environmental agreements, and activities affecting or likely to affect the elements and factors referred to in (a) and (b) as well as measures or activities designed to protect those elements;

(d) reports on the implementation of environmental legislation;

(e) cost-benefit and other economic analyses and assumptions used within the framework of the measures and activities referred to in (c); and

(f) the state of human health and safety, including the contamination of the food chain, where relevant, conditions of human life, cultural sites and built structures in as much as they are or may be affected by the state of the elements of the environment referred to in (a) or, through those elements, by any of the matters referred to in (b) and (c).

Purpose of the FOI and EIR

Public authorities have a duty to be both open and accountable. Every member of the public has a right to know what HDC has done, what we are currently working on and what we are planning for the future. They already have a right of access to some of the information produced by the Council. Their rights include the right to attend most meetings, to access most of the agendas, reports, minutes and background papers of those meetings, and the forward plan.

Under the EIR we must abide by an [Environmental Information Regulations Code of Practice](#), likewise for the FOI we must abide by a [Freedom of Information Act Code of Practice](#) published by the Information Commissioner.

Re-use of Public Sector Information 2005 (PSI)

One of the most important assets to the Council is the information it holds. However these assets are potentially the most unrealised and could bring the Council additional revenue with little additional staff effort.

When FOI & EIR ends, PSI begins

In July 2005 a European Directive gave rights to people to apply for the re-use of information held by the Council. This directive aims to achieve harmonisation of the rules and administration on the re-use of PSI across the European Union. The European Commission estimates that between 15% and 25% of total data used in e-commerce trading is based on PSI. This information is sometimes being given out free but potentially could be charged for when re-used.

These regulations do not change the Council's duties to provide people access to information under the FOI & EIR. However if they wish to re-use the information for commercial purposes then they should apply to the Council for permission for this re-use and be prepared to pay a charge for such use.

The phrase 're-use' means using the information produced by the Council for a purpose other than that for which it was originally intended e.g. a company requiring contaminated land entries and notices held in a public register to be re-used for a publication which is produced by the company.

For any further advice regarding FOI, EIR or PSI please contact the Information Manager (FOI Officer).

The Data Protection Act 1998 (DPA)

The Data Protection Act 1998 regulates the processing of information particularly data relating to individuals, including the obtaining, holding, use or disclosure of such information.

March 2000 - DPA extends data protection rights given to individuals in previous legislation. It requires Data Controllers (people or organisations including the Council who hold and process information about living individuals) to notify the Information Commissioner that they are doing this, for what purposes and to comply when processing such data with eight data protection principles. These principles govern the use of personal data and give rights to individuals (data subjects) relating to the processing of their personal data. Personal data is information about a living individual from which they can be identified either by it alone or in conjunction with other information already in the possession of the data controller or likely to be so. DPA applies to both electronic and paper information.

The eight data protection principles are as follows:-

- 1 Personal data shall be obtained and processed fairly and lawfully.
- 2 Personal data shall be obtained only for one or more specified and lawful purposes, and shall not be further processed in any manner incompatible with that purpose or those purposes.
- 3 Personal data shall be adequate, relevant and not excessive in relation to the purpose or purposes for which they are processed.
- 4 Personal data shall be accurate and, where necessary, kept up to date.
- 5 Personal data processed for any purpose or purposes shall not be kept for longer than is necessary for that purpose or those purposes.
- 6 Personal data shall be processed in accordance with the rights of data subjects under this Act.
- 7 Appropriate technical and organisational measures shall be taken against unauthorised or unlawful processing of personal data and against accidental loss or destruction of, or damage to, personal data.
- 8 Personal data shall not be transferred to a country or territory outside the European Economic Area unless that country or territory ensures an adequate level of protection for the rights and freedoms of data subjects in relation to the processing of personal data.

Data Processing and Disclosure

Personal data can only be processed (from its collection to final destruction) in accordance with DPA conditions. Therefore it is important that upon collection of such information HDC is clear about the purposes to which it is likely to be put and advises the data subject of these.

For any further advice regarding DPA please contact the Data Protection Officer or refer to the [Data Protection Act Policy](#)

Dealing with Requests For Information under the DPA & EIR & FOI & PSI

The procedure which HDC has adopted is shown in the [FOI/EIR/PSI Procedure Diagram](#) and [DPA Procedure Diagram](#). The staff involved in the process include:

- FOI Administrator (IMD)
- FOI Co-ordinators (for each Division)
- FOI Officer (IMD)
- DPA Officer (Legal and Estates)
- Head of Service/Activity Managers
- Legal Team (Head of Legal Services and/or Solicitor)
- Communications Team

NB: In some sections the Head of Service/Activity Manager will also be the FOI Co-ordinator.

The role of the FOI Administrator is to deal with requests for information by logging the particular Request for Information (RFI) on the request tracker. The FOI Administrator is part of IMD. The FOI Administrator will act as a centralised receiving point for all requests. The FOI Administrator's role will be to acknowledge that the request has been received either by email or standard letter. Once the requested information has been located and a disclosure decision has been made then the FOI Administrator will respond to the requestor.

EIR, FOI & PSI requests

Once logged the FOI Administrator will forward the request to the relevant Departmental FOI Co-ordinator, making it clear under which piece of legislation the RFI is being considered. A FOI Co-ordinator will be located in each division that already deals with requests for information from the general public. They will ideally be "knowledge keepers" for the division and will be experienced in what information is held by their division. The FOI Co-ordinator will firstly assess whether the information requested is already published or is unpublished. If the information is published then the FOI Co-ordinator will advise how the requestor can receive a copy of the information.

A charge may be made where the Council include it in a charging policy at the rate provided in that policy. A small charge may also be made for disbursements such as photocopying. (See Charging Scheme)

Checking Disclosure

If the information requested is unpublished then the FOI Co-ordinator must check with the appropriate Head of Service/Activity Manager whether the information requested could be disclosed. If the information can be disclosed in full or in part, then the request should be processed and the appropriate information disclosed. Where it is considered that disclosure in whole or part of the information should be resisted and redaction is necessary, the FOI Co-ordinator will discuss this with the FOI Officer. If the information cannot be disclosed then the requestor will be informed of the decision and of the particular exemption that has been applied.

NB: It is an offence to redact (edit out or remove) information without lawful excuse.

Estimating Fees

If information is to be disclosed the FOI Co-ordinator then must estimate how much time will be spent on the request (this is covered in the Charging Scheme). **Any fee should be collected before the request is processed further.** The fee will be collected by the FOI Administrator.

When disclosure requests have been checked and fees received, then the FOI Co-ordinator can use all available systems to locate the relevant information. Any searching of emails will be co-ordinated by the Administrator of the email archiving system.

The FOI Administrator will also keep the requestor informed on the progress of the request at different stages; these are:

- Clarifying the request (if needed)
- Informing the requestor of any fees to be paid.
- Informing the requestor of any fees payable for additional work not paid for in the initial fees.
- Supplying the result of disclosure and completion of the request, including the information which can be disclosed.

This will be communicated either via email or by standardised letter, which will be available from the request tracker.

Once all the information that has been requested has been located the FOI Officer will decide upon disclosure. Upon approval from the FOI Officer, the FOI Administrator will **redact** (edit out or remove) any non-disclosable information. It is essential to explain to the requestor on disclosure why (if applicable) any information previously contained in the document has been redacted. If the whole document is non-disclosable then the FOI Administrator should give reasons for non-disclosure and apply the particular exemption. Assistance for this decision may be provided by a relevant Head of Service/Activity, a member of the Legal & Estates section or a relevant specialist (for example Procurement Manager).

FOI Co-ordinators will supervise the administration of the FOI, EIR, DPA and PSI within their division and to decide on the disclosure of information requested. Both absolute and qualified exemptions must be assessed, and the Public Interest Test applied. A short meeting with the FOI Co-ordinator, FOI Officer and if needed Head of Service/Activity Manager will decide on the disclosure of information.

DPA, EIR, FOI and PSI Procedure

The role of the FOI Officer will ensure that the FOI, PSI, EIR procedure is upheld at HDC. The FOI Officer will provide help and guidance around issues of FOI, EIR, PSI in terms of disclosure and assist in overall compliance.

Where DPA applies the role of the DP Officer will ensure that the DPA procedure is upheld at HDC. The DPA Officer will provide help and guidance around issues of DPA in terms of disclosure and assist in overall compliance.

The FOI & DPA Officer, acting in line with the FOI, EIR, DPA and PSI Complaints Procedure, will coordinate the response to any complaint brought under the relevant legislation. The role of the Legal and Estates section is to advise with regard to difficult decisions of disclosure.

Data Protection Act Request – Subject Access Requests (SAR)

People have rights to disclosure of all or part of any of their personal data held by data controllers such as HDC to check it and ensure it is accurate and processed in accordance with the law. To exercise these rights the request must be made in writing clearly identifying the information required and a fee of £10.00 be paid. All such requests called Subject Access Requests (SAR) to HDC should be referred immediately to the Data Protection Officer. Satisfactory evidence will be required to identify the data subject and any person claiming to act on their behalf before the request is processed. In the interval, time for compliance with the request is suspended.

Any disclosure of information arising from a valid SAR to HDC should be made through the Data Protection Officer within 40 days. Heads of Service/Activity Managers should supply all the necessary information to the DPA Officer within sufficient time for DPA Officer to review the information. If there is any question of redacting (editing out or removal) information this should be raised promptly with the Data Protection Officer who will provide advice about it.

Huntingdonshire District Council Charging Scheme**Staff time**

Chargeable time is the time spent to find, sort, edit or redact (edit out or remove) information. It does not cover the time taken to consider whether an exemption applies and to apply the Public Interest Test.

FOI requests

Under 18 hours, the request will be free of charge.

If more than 18 hours (2 days effort) are spent on a request, then the request will be fully chargeable. For each hour spent answering a request the charge will be £25 per hour (this is the standard rate for Officer time)

Charges can be calculated on the FOI Request Tracker and the total time taken for request must be recorded on the request tracker.

The Council cannot charge for any request which costs less than £450. Above £450, the request is charged fully @ £25 per hour + disbursements. [Statutory Instrument for fees](#)

EIR requests

Reasonable costs may be charged for EIR requests.

Disbursements

The full cost of printing, photocopying and posting can be charged to the requestor, however if the requestor asks for information in an electronic form and it is sent by email then this will carry no disbursement charge.

Charges

Photocopying and Printing Charge.

Photocopying	Black & White	A3	15p per sheet
Photocopying	Black & White	A4	10p per sheet
Photocopying	Colour	A3	20p per sheet
Photocopying	Colour	A4	15p per sheet
Printing	Black & White	A3	15p per sheet
Printing	Black & White	A4	10p per sheet
Printing	Colour	A3	20p per sheet
Printing	Colour	A4	15p per sheet
CDs	Electronic Data	N/A	£2 per CD
Microfiche/Microfilm	N/A	N/A	10p per frame
Converting to electronic format	N/A	N/A	Incurred costs – varies
Converting to microfiche or microfilm	N/A	N/A	Incurred costs - varies

Posting Charge - Optional charge depending on weight and size. [Royal Mail Charges](#)

DPA for Subject Access Requests

There is a flat fee of £10. This is not dependent on the amount of staff time spent on answering the request.

Timescale

Under **FOI** all requests must be answered within 20 working days, **EIR** requests should be answered within 20 working days, however for voluminous requests an additional 20 working days can be requested. The 20 day working day clock starts the day following the date of receipt. **PSI** requests have the same timescale as **FOI** and **EIR** requests.

Stopping the clock

There are several reasons for halting the 20 working day time clock these can be:

- Payment of fee (i.e. cheques having cleared)
- Clarification of request
- Consideration of the public interest test (FOI - this must be a reasonable length of time and we must be able to justify the length of time to consider the public interest, EIR – this must not take longer than additional 20 working days)

When this has been received the 20 working days will start again from the point it was last interrupted.

Under **DPA** requests must be answered within 40 days from receipt of a valid request and £10 fee.

An important aspect of this procedure is to keep the requestor informed as to the progress of the request. If a request takes longer than 20 working days, then the FOI Administrator must inform the requestor of estimated completion date and reason for delay

If the information has yet to be published, then the request comes under an exemption 22; the information will be provided when it has been published. This only applies to information it was already planned to publish and the requestor will be provided with the information when it is published. If a Request for Information (RFI) has been made but fees are outstanding and clarification is needed but has not been provided, the Council must hold the RFI open until three months have elapsed.

FOI Exemptions

The FOI Act creates a general presumption of right of access to information held by public authorities such as HDC.

However, there are exemptions to this general right of access listed below.

Absolute Exemptions

These apply to information where there is **no discretion** to disclose information to the general public.

- **Information accessible to applicant by other means** (Section 21).
- **Security** – any information which if disclosed would endanger national security or the security of employees of HDC. (Section 24)
- **Court Records & Disclosure would be illegal or in contempt of court.** – includes information in documents served for the purposes of legal proceedings filed with a court, or held by a person conducting an inquiry or arbitration. (Section 32)
- **Documents protected by Parliamentary Privilege** – Parliamentary privilege is to ensure that Parliament can carry out its duties without hindrance, certain rights and immunities apply collectively to each House and its staff, and individually to each Member. (Section 34)
- **Personal Information / Data** – the disclosure of any personal data held by HDC is prohibited by the **Data Protection Act 1998**. (Section 40)
- **Information provided in confidence** – by which is meant, a) information obtained by the public authority from any other person or Authority, or b) information disclosure of which to the public (other than under the Act) by the Authority holding it would constitute a breach of confidence actionable by the person concerned or by any other person. (Section 41)

Qualified Exemptions

These apply to where there is a **discretion** to disclose to the general public. Release of this sort of information is based on whether disclosure would be in the public's interest (Public Interest Test).

- **Information intended for future publication** - where the authority plans to publish the information in the future, and it is reasonable, at the time of the request, not to disclose it until then. (Section 22)
- **National Security** (Section 24), **Defence** (Section 26), **International Relations** (Section 27), **Relations between government within the UK** (Section 28), **Economy** (Section 29).
- **Information which may prejudice the UK economy** (Section 29)
- **Investigations and proceedings conducted by public authorities** - covers information relevant to criminal investigations and proceedings, and information obtained for criminal or civil proceedings. (Section 30)
- **Law Enforcement** - applies to a wide range of investigations and conduct; for example, information that will prejudice the prevention or detection of crime. (Section 31)
- **Auditing** - applies if the public authority audits the accounts for another public authority (Section 33).
- **Development of Government Policy** - Information held by a government department or the National Assembly of Wales, relating to the formulation of Government Policy (Section 35).
- **Communications, etc, with Her Majesty, etc., and honours** (Section 37).
- **Health and safety** - information that would, or would be likely to, endanger the physical or mental health, or safety, of any individual. (Section 38)
- **Environmental Information** - operates as a gateway to revised Environmental Information Regulations that will be introduced to implement the provisions of the Aarhus Convention. (Section 39)
- **Personal Information** - requests for personal information about someone else will be dealt with under the Data Protection Act. (Section 40)
- **Legal Professional Privilege** - where a claim to legal professional privilege could be maintained in legal proceedings. (Section 42)
- **Commercial Sensitive Information** - applies to trade secrets and information, whose disclosure (or, alternatively, "the disclosure of which") would, or would be likely to, prejudice the commercial interests of any person. (Section 43). The procurement process will involve commercial sensitive information, for further guidance on [FOI/Procurement issues](#).

When considering non-disclosure via Qualified Exemptions, it is important to consider whether disclosure would be in the public's interest.

Public Interest Test

The public interest test in the FOI Act is specifically defined; the public authority must release the information unless '*in all the circumstances of the case, the public interest in maintaining the exemption outweighs the public interest in disclosing the information*'. This requires a public authority like HDC to make a judgement about the public interest. Their decision is subject to rights of appeal to the regulatory bodies (Information Commissioner and the Information Tribunal) and the courts

Where the balance between disclosure and withholding the information is seen as equal, the information must be released. The Information Commissioner favours disclosure and requires evidence of reasons for non-disclosure and so the reasons must be documented in the process of disclosure. The Public Interest form on the Request Tracker must be filled in when the Public Interest Test has been used. If an internal review of the request is actioned, the evidence of the Public Interest Test will be crucial.

EIR Exceptions

The EIR exceptions work in the same way as FOI exemptions but all the EIR exceptions are qualified exemptions, they are all subject to the public interest test.

The EIR exceptions are:

- ◆ **Information is not held when request is received.**
- ◆ **The request is unreasonable.**
- ◆ **The request is too general.**
- ◆ **Information intended for future publication.**
- ◆ **Request involves the disclosure of internal communications.**
- ◆ **Disclosure would affect the course of justice.**
- ◆ **Intellectual Property Rights.**
- ◆ **Confidentiality of Proceedings.**
- ◆ **Commercial or industrial confidentiality**
- ◆ **The Interests of the Council**
- ◆ **Environmental Protection.**
- ◆ **Personal Data.**

Role of the Publication Scheme

The Publication Scheme is a catalogue of all publications produced at HDC. It shows where the information can be located, in what form it is published, and whether there is a charge for it. The [Publication Scheme](#) is available on the HDC website, and also in paper format. The FOI Administrator will hold copies of the publication scheme which can be requested; no charge will be applied to this request. Requests for published information will be fulfilled either by the FOI Co-ordinator or by their delegate within the Divisions. Heads of Service/Activity Managers must advise the FOI Administrator of any changes to the Publication Scheme.

Internal Review Procedure

This complaints procedure is meant to deal with only for complaints regarding FOI, DPA, EIR and PSI requests. Complaints regarding any other matter shall be dealt with via the Council's complaint procedure.

If the member of the general public who has requested information under FOI, EIR, DPA or PSI is not satisfied with the way we have handled their request, with the fee charged, or with the reasons we have given for refusing rather than disclosing information, then they have the right to appeal. The review of the appeal will be subject to a two-stage process, this is based on guidance from the Department of Constitutional Affairs and the Information Commissioner:

- I. If the complainant is not satisfied with the response from the Council, he/she will be able to seek an internal review. Internal Reviews of FOI, EIR, PSI requests will be conducted by the Head of IMD and Internal Reviews of DPA requests will be conducted by the Head of Legal and Estates. In the absence of Head of IMD and Head of Legal and Estates a nominated Head of Service will conduct the internal reviews. For any complaints regarding FOI/EIR/PSI requests, the FOI Officer will

arrange the internal review and likewise for any complaints regarding DPA requests, the DPA Officer will arrange the internal review.

Complaints regarding FOI/EIR/PSI should in the first instance be sent to:

FOI Requests
Huntingdonshire District Council
Pathfinder House
St Mary's Street
Huntingdon
PE29 3TN

Complaints regarding DPA should in the first instance be sent to:

DPA Requests
Huntingdonshire District Council
Pathfinder House
St Mary's Street
Huntingdon
PE29 3TN

- II. Following the internal review, if the requestor remains dissatisfied, he or she may seek an independent review from the Information Commissioner. Requests for such a review should be made in writing directly to:

Information Commissioner's Office
Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF

The results of the Internal Review will be communicated back to the complainant.

N.B. Complaints via the FOI, EIR, PSI and DPA are expected to follow this two stage process; any complaints sent to the Information Commissioner's Office will not be acted on until the first stage has taken place.

Re-use of Public Sector Information

Intention of the regulations

The key objectives of the regulations:

- Identification of public sector documents that are available for re-use
- Availability of many public sector documents for re-use at marginal cost
- Clarity of any charges to be made for re-use
- Processing of applications for re-use in a timely, open and transparent manner
- Application of Information Fair Trading Scheme

Copyright

The supply of documents to a member of the public or applicant by the Council (e.g. under the FOI) does not grant them the right to re-use this information in a way that would infringe any copyright on those documents. For example, an applicant would not be permitted to make copies, to publish, or issue copies to any other person/s. Brief extracts of any of the material may be reproduced without the Council's permission, under the fair dealing provisions of the [Copyright, Designs and Patents Act 1988 \(sections 29 & 30\)](#) for the purposes of:

- research for non-commercial purposes
- private study
- criticism
- review
- news reporting

This is subject to an acknowledgement of the Council as the copyright owner. The Council have the option to permit re-use of information for a charge or for no charge. Where re-use under licence is allowed this will be subject to conditions on the re-use of the information to ensure it is not used in a manner inconsistent with the Council's copyright and a charge for re-use fee.

The Council have a legal authority to authorise the re-use of the information which they have produced under the UK copyright legislation. All information which is produced via the Council should indicate that copyright is held by the Council.

Ability of a document to be re-used

These regulations apply to all the information/documents held by the Council, if a document is available via FOI/EIR then it can be licensed for re-use as part of PSI. If the information is prohibited then the information cannot be relicensed. Disclosure of documents which contain intellectual property rights from a third party can be relicensed by the Council.

The directive requires the Council to define and list information assets suitable for re-use, grant licences and levy fees for the re-use of information which can be released under the FOI/EIR legislation. From the FOI/EIR requests which have been received by the Council, some of the information requested is going to be re-used, this information should be licensed for its re-use. The Council also have a publication scheme which defines the publications which are available to the general public and whether they carry a charge.

The information assets which are likely to be of interest are of a value added or commercial nature. As part of the Corporate Records & Information Management Project (CRIMP) information assets have been identified which are held in different departments. The project will verify the publication scheme and identify information assets which could be subject to potential sale.

Charges

Regulations state that when allowing re-use of information, public authorities can make a 'reasonable return on investment.' In calculating a licence fee the Council will take into account the following:

- The Council's intellectual property, e.g. information that has a commercial value. A charge for this would be determined on a case by case basis.
- Charges for staff time
A fee of £25.00 per hour will be charged in respect of staff time for making the requested information available to the applicant for re-use. This may vary depending on the seniority of the member of staff who is required to manage the request.
- Charges for materials – see charging scheme

Process of dealing with requests under the Re-use of Public Information legislation

When requesting the re-use of information the requestor must state what documents they want to re-use and for what purpose.

Requests for re-use of public information will be handled in the same way as FOI/EIR Requests. The initial request will be logged and passed to the relevant department. They will estimate the time to be spent on locating the information. This estimate of time will be converted into an invoice by the FOI Administrator and sent to the requestor. As with any charges under the FOI and EIR, payment will be needed before the information is provided. We will either provide or not provide the information required. A licence to re-use the requested information will be provided.

Processing requests

There is no obligation for the public sector bodies under these regulations to:

- Create or adapt a document to comply with a request for re-use, emphasis is on the re-use of existing documents.
- Provide extracts of documents where this would entail disproportionate effort.
- Continue producing a document purely for re-use by others.

Notification of refusal

Regulation 9 explains what the process should be when a public sector body refuses a request for re-use of a document:

- Reasons for refusals should be given in writing;
- Why there has been a refusal to allow re-use.

Non-discrimination

Regulation 13 prohibits discrimination by public sector bodies in the conditions applied between applicants who re-use documents for similar purposes.

Prohibition of exclusive arrangements

Regulation 14 prohibits exclusive arrangements because it prevents others from re-using the document and inhibits competition.

Documents available for re-use

The PSI Regulations require the Council to have a published asset list which includes information which is available for re-use. This asset list forms part of the Council's FOI publication scheme.

Information Fair Trader Scheme (IFTS)

In allowing re-use of documents public sector bodies are required under the regulations to be transparent, fair, open and non-discriminatory. The Information Fair Trader Scheme is designed so that re-users can be confident that public sector information providers will treat them reasonably, consistently and fairly.

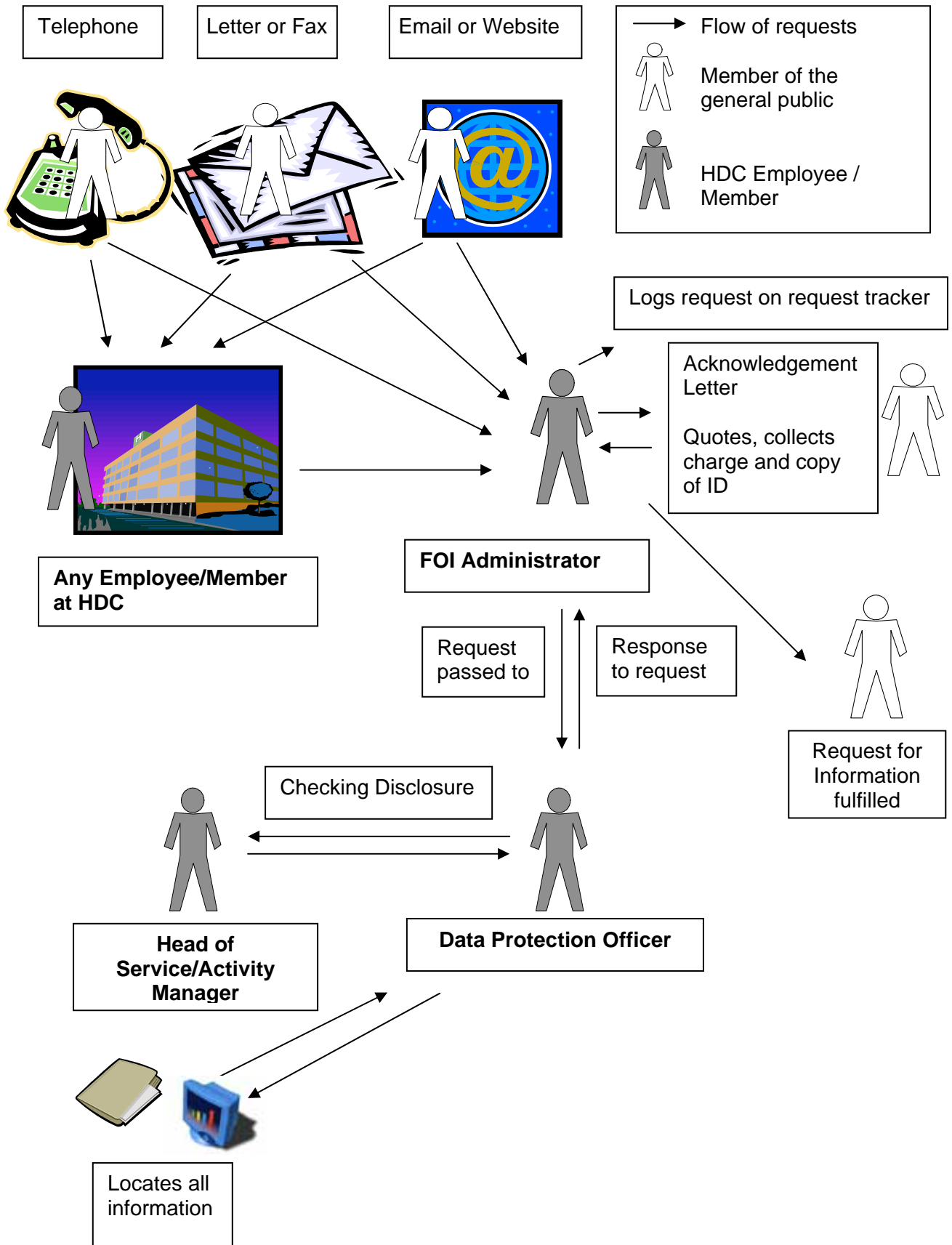
Complaints Procedure and Appeals

The internal complaints procedure is the same as the internal review procedure, a review will be arranged to discuss the decision regarding re-use.

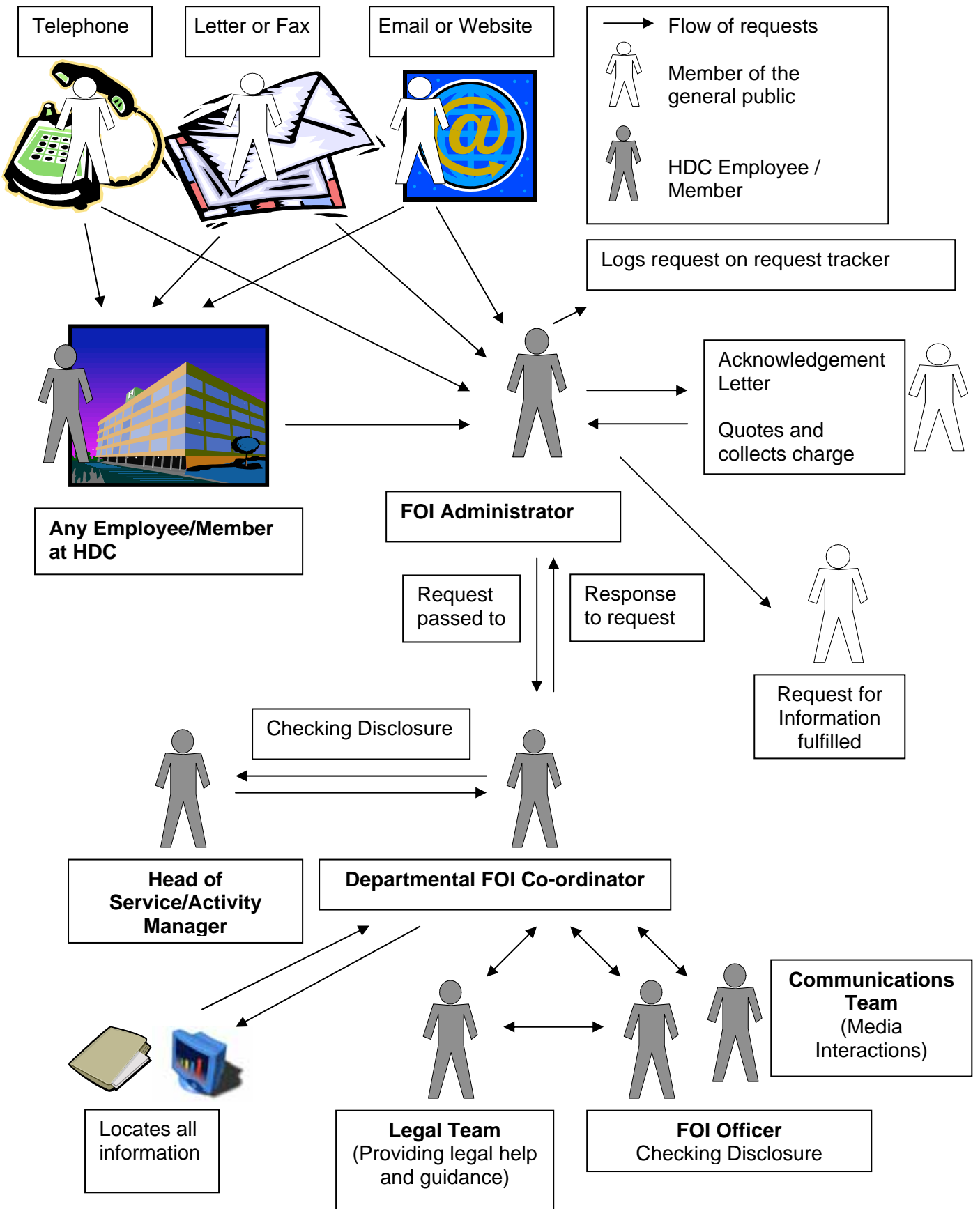
If the applicant is still unsatisfied with the review decision then they have right to appeal to:

Office of Public Sector Information
2-16 Colegate,
Norwich,
Norfolk
NR3 1BQ
Tel: 01603 723001
Fax: 01603723000

DPA Procedure



FOI, EIR & PSI Procedure Diagram



RISK REGISTER (Report by the Head of Financial Services)

1. INTRODUCTION

- 1.1 A copy of the risk register was presented to the September meeting of the Panel. Members will recall that the Risk Management Strategy requires the Panel to receive reports and decide upon the action to be taken for all mitigated risks that, should the risk materialise, would have a disastrous impact on the council, its reputation or business continuity.
- 1.2 This report demonstrates the progress being made with assessing these risks by providing a form for each of the 'red' risks currently on the register (Annex A).
- 1.3 It also proposes a modification to the strategy on how decisions on these risks should be dealt with.

2. RISK TREATMENT OPTION FORMS

- 2.1 Heads of Service with ownership of the 'red' residual risks have considered the options available to further mitigate these risks. Actions proposed are listed in priority order within each option form. Members will note that in a number of cases no further action is currently proposed.
- 2.2 These risk option forms have yet to be considered by the Risk Management Group and in some cases by other Heads of Service also affected by the risk or proposed action. Once this has been undertaken the forms will be updated.

3. CHANGE TO THE PROCESS

- 3.1 The Panel's responsibility in Risk Management is to ensure that a robust system is in place and working effectively. It is therefore good practice for the Panel itself to not be a part of the process that it is itself reviewing. It is therefore proposed that decisions on the degree of further mitigation to be taken on "red" risks be taken by the Cabinet who anyway have the responsibility for service delivery. Annex B shows the resultant changes to the Strategy.

3. RECOMMENDATION

It is recommended that the Panel:

- Note the progress being made on dealing with these risks
- Agree the changes to the Strategy attached at Annex B.

BACKGROUND INFORMATION

Risk Register
Notes of meetings with Senior Managers
Risk Management Group papers

Contact Officer: Steve Couper, Head of Financial Services ☎ 01480 388103

STATUS OF VERY HIGH (RED) RISKS

Risk	Current Position
1 Service recovery and/or business continuity plans are inadequate resulting, over both the short and medium term, in the Council's inability to provide an appropriate service.	<p>Risk treatment option form attached.</p> <p>Bid already included in draft MTP for improving IT resilience. Will reduce risk to "High" if implemented.</p> <p>Form still to be considered by Risk Management Group and any other relevant Heads of Service</p>
2 The Council, as a partner to the Leisure Centre Joint Agreements, does not ensure that agreements are regularly reviewed resulting in additional costs falling on the Council.	<p>Original risk has been reviewed and amended. Risk treatment option form is being developed.</p> <p>Amended Risk : Residual: High The County Council decides it does not wish to renegotiate a Leisure Centre agreement at the end of its term resulting in financial cost and/or reduction in service provision.</p>
3 A major civil emergency occurs and the Council is not prepared for it (Rest Centres)	<p>Original risk has been reviewed and requires amendment.</p>
4 Public injury, illness or property damage is caused from inadequate maintenance of trees and/or poisonous plants, damaging our reputation and increasing expenditure.	<p>Risk treatment options have been identified in respect of Leisure Services. Work still to be completed to expand the options and assessment Council wide.</p>
5 A incident occurs at a Leisure Centre which requires services to be halter or dramatically reduced.	<p>Original risk has been reviewed and amended. New Risk : Residual: Very High</p> <p>A member of the public is seriously injured or killed whilst visiting or using Leisure Centre facilities due to the Council not providing, a safe environment, or its staff with sufficient and adequate training.</p> <p>Risk treatment option form attached, completed on the basis that no further mitigation is practical</p> <p>Form still to be considered by Risk Management Group and any other relevant Heads of Service</p>
6 Information or data is lost leading to an inability to provide an appropriate service or respond to requests for information.	<p>Risk treatment option form attached.</p> <p>Able to reduce to "High" within additional resources.</p> <p>Form still to be considered by Risk Management Group and any other relevant Heads of Service</p>

Risk	Current Position
7 Users of the Leisure Centres are put at risk due to the employment of staff who are unsuitable to work with vulnerable people.	<p>Risk treatment option form attached, completed on the basis that no further mitigation is practical</p> <p>Form still to be considered by Risk Management Group and any other relevant Heads of Service</p> <p>Original risk has been reviewed and amended.</p>
8 The Council is capped requiring long & short term reductions in services to be made.	<p>The Council is not accurate enough in its assessment of the Government's Council Tax/budget requirement capping level resulting in the Council being capped or setting its Council Tax at a figure significantly below the capping level resulting in the need for additional temporary or permanent service reductions.</p> <p>Risk treatment option form attached, completed on the basis that no further mitigation is practical.</p> <p>Form still to be considered by Risk Management Group and any other relevant Heads of Service.</p> <p>Original risk has been reviewed and amended.</p>
9 Staff are involved in accidents which leads to increases in sickness absence and the inability of the Council to deliver services or meet targets.	<p>Form still to be considered by Risk Management Group and any other relevant Heads of Service.</p> <p>Original risk has been reviewed and amended. Risk treatment options forms are being developed.</p> <p>Amended Risk A : Residual: Medium Sickness and other absence is not sufficiently monitored and controlled resulting in a loss of resource to the Council and a consequent reduction in service provision and/or inability to meet targets.</p> <p>Amended Risk B : Residual: Medium Staff are involved in accidents resulting in a loss of resource to the Council and a consequent reduction in service provision and/or inability to meet targets.</p>
10 ICT Security is breached causing both the loss of data and a loss of trust in the reliability of the data being held.	<p>Risk treatment option form attached. Reduce to "High" if fire suppressant system fitted.</p> <p>Form still to be considered by Risk Management Group and any other relevant Heads of Service.</p>
11 A member of the public or an employee of the Council is seriously injured or killed due to the Council not providing its employees with either a safe working environment or sufficient and adequate training with regard to the tasks that it requires to be carried out.	<p>Risk treatment option form attached, completed on the basis that no further mitigation is practical.</p> <p>Form still to be considered by Risk Management Group and any other relevant Heads of Service.</p>

Risk

- 12 A decision is taken contrary to legislation, statutory guidance or the Council's own policy & procedures that is successfully challenged, resulting in additional financial costs, reputation harm and reductions to service delivery.

Current Position

The original residual risk scoring has been reviewed and amended, removing the risk from the "Very High" category.

Risk Treatment Option Form : No 1

Risk Treatment – Action Plan					
Description of risk from register:	Risk ID No: 203/03	Current residual risk score: Likelihood x Impact	4	5	20
Service recovery and/or business continuity plans are inadequate resulting, over both the short and medium term, in the Council's inability to provide an appropriate service					
Controls already in place as listed on the risk register: Corporate Service Recovery Plan UPS allows 10 minutes closing down time IT recovery agreement in place Data backed up and stored off site Air conditioning					
Are these controls operating effectively? Yes					
Risk Action Plan (All actions listed in priority order)					
Proposed actions to reduce risk using existing resources			New residual risk score ¹		Extra resources required ²
			L	I	
a. Work with consultants to prioritise software systems in the event of a rebuild of servers being necessary.					
b. Testing of recovery plans					
Actions requiring additional resources					
1. 2 server rooms in new accommodation at HQ & Ops. centre			3	4	12 In MTP
2. 2 telecoms switches in new accommodation at HQ & Ops. centre			3	4	12 In MTP
3.					
Decision					
Agreed Option:		Implementation Date		Risk Owner	
				Head of Administration	
Decision taken by:			on:		

¹ **New Residual Risk Score:** after the action has been introduced

² **Extra Resources:** only complete if extra resources will be required to allow the proposed action to be introduced e.g. financial costs and staff time

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Risk Treatment Option Form : No 5

Risk Treatment – Action Plan							
Description of risk from register:	Risk ID No:	New	Current residual risk score: Likelihood x Impact	<table border="1" style="border-collapse: collapse; width: 100%;"> <tr> <td style="width: 20%; text-align: center;">2</td> <td style="width: 20%; text-align: center;">5</td> <td style="width: 60%; text-align: center; background-color: red; color: white;">10</td> </tr> </table>	2	5	10
2	5	10					
A member of the public is seriously injured or killed whilst visiting or using Leisure Centre facilities due to the Council not providing a safe environment, or its staff with sufficient and adequate training.							
Controls already in place as listed on the risk register:							
Trained, qualified and experienced fitness staff / lifeguards	Customers assessed for skin type (sunbeds) and undergo induction						
Bather capacities not exceeded	Sunbed equipment to British Standards						
Appropriate number of lifeguards on duty	Use of sunbed limited by length of session and number of sessions						
Regular breaks for lifeguards to maintain alertness	Warning signs displayed						
Assessment of customer abilities at joining	Regular monitoring of tanning equipment						
Customers required to undergo induction	Risk is physical injury to customers or at worst death by heart failure caused by overexertion						
Appropriate number of staff on duty	Risk is death by drowning of pool users						
Monitoring by staff of usage by customers	Risk is over exposure by customers causing sunburn or melanomas						
Trained first aiders on site							
Defibrillators on site and staff trained in their use							
Health and Safety Co-ordinator monitors actions taken							
Are these controls operating effectively? <input checked="" type="checkbox"/> Yes							
Risk Action Plan (All actions listed in priority order)							
Proposed actions to reduce risk using existing resources			New residual risk score ¹		Extra resources required ²		
			L	I			
a. No further mitigation is practical							
b.							
Actions requiring additional resources							
1.							
2.							
3.							
4.							
5.							
Decision							
Agreed Option:		Implementation Date		Risk Owner			
				Head of Administration			
Decision taken by:			on:				

¹ **New Residual Risk Score:** after the action has been introduced

² **Extra Resources:** only complete if extra resources will be required to allow the proposed action to be introduced e.g. financial costs and staff time

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Risk Treatment Option Form : No 6

Risk Treatment – Action Plan					
Description of risk from register:	Risk ID No: 241	Current residual risk score: Likelihood x Impact	2	5	10
Information or data is lost leading to an inability to provide an appropriate service or respond to requests for information.					
Controls already in place as listed on the risk register: All software is removed and hard disks wiped clean by IMD before disposal Documents held in metal filing cabinets in most cases All incendiary sources away from cabinets, only destruction of building should cause such loss Many records held electronically and servers not held on the same floors Staff are encouraged to challenge strangers in secure areas All confidential documents stored in a semi-secure environment Staff aware of arrangements for disposal of confidential waste - including use of shredding equipment Office access controls Non - active case files routinely stored The Council operates a no smoking policy in it's buildings Staff training, policies and management processes regarding the need for confidentiality Corporate Policy for Records Management & Document Retention					
Are these controls operating effectively? Yes (as far as is known)					
Risk Action Plan (All actions listed in priority order)					
Proposed actions to reduce risk using existing resources		New residual risk score ¹		Extra resources required ²	
		L	I		
a. Production & implementation of Information Assurance Policy including: <ul style="list-style-type: none"> Survey of users to baseline scope of the risk Raise staff awareness through further training Investigation into encryption of information Appropriate disposal of electronic & paper-based information 		1	5	5	
b. Production & implementation of the Flexible Working Strategy eg defines usage of mobile devices including USB sticks. NB Assumes funding of Flexible Working MTP bid and subsequent funding of implementation of the Flexible Working Strategy .					
Actions requiring additional resources					
1.					
2.					
3.					
4.					
Decision					
Agreed Option:		Implementation Date		Risk Owner	
				Head of IMD	
Decision taken by: _____ on: _____					

¹ **New Residual Risk Score:** after the action has been introduced

² **Extra Resources:** only complete if extra resources will be required to allow the proposed action to be introduced e.g. financial costs and staff time

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Risk Treatment Option Form : No 7

Risk Treatment – Action Plan					
Description of risk from register:	Risk ID No: 277/8	Current residual risk score: Likelihood x Impact	3	5	15
Users of the Leisure Centres are put at risk due to the employment of staff who are unsuitable to work with vulnerable people.					
Controls already in place as listed on the risk register: CRB checks undertaken References undertaken Staff guidance issued Child protection policy					
Are these controls operating effectively? Yes					
Risk Action Plan (All actions listed in priority order)					
Proposed actions to reduce risk using existing resources			New residual risk score ¹		Extra resources required ²
			L	I	
a. No further mitigation is practical					
b.					
Actions requiring additional resources					
1.					
2.					
Decision					
Agreed Option:		Implementation Date		Risk Owner	
				Head of Administration	
Decision taken by:			on:		

¹ **New Residual Risk Score:** after the action has been introduced

² **Extra Resources:** only complete if extra resources will be required to allow the proposed action to be introduced e.g. financial costs and staff time

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Risk Treatment Option Form : No 8

Risk Treatment – Action Plan					
Description of risk from register:	Risk ID No: 149/10	Current residual risk score: Likelihood x Impact	2	5	10
The Council is not accurate enough in its assessment of the Government’s Council Tax/budget requirement capping level resulting in the Council being capped or setting its Council Tax at a figure significantly below the capping level resulting in the need for additional temporary or permanent service reductions.					
Controls already in place as listed on the risk register: When the Council makes its decision on the Council Tax and Budget Requirement Level each February it is provided with all the relevant information that is available including Government comments on capping.					
Are these controls operating effectively? Yes					
Risk Action Plan (All actions listed in priority order)					
Proposed actions to reduce risk using existing resources			New residual risk score ¹		Extra resources required ²
			L	I	
a. No further mitigation is practical because the Government refuses to announce the capping criteria in advance, as a matter of principle, and their final decision is based on the actions of all the local authorities, police and fire authorities in England. Thus, it is impossible to have any real degree of certainty. If too high an increase is agreed, there are additional rebilling costs and potential damage to the Council’s reputation but the ongoing level of service reductions is minimised. If too low a figure is chosen, more service reductions than are necessary will have to be made.					
b.					
Actions requiring additional resources					
1.					
2.					
3.					
4.					
5.					
Decision					
Agreed Option:		Implementation Date		Risk Owner	
				Head of Financial Services	
Decision taken by:			on:		

¹ **New Residual Risk Score:** after the action has been introduced

² **Extra Resources:** only complete if extra resources will be required to allow the proposed action to be introduced e.g. financial costs and staff time

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Risk Treatment Option Form : No 10

Risk Treatment – Action Plan					
Description of risk from register:	Risk ID No:	116	Current residual risk score: Likelihood x Impact	2 5 10	
ICT Security is breached causing both the loss of data and a loss of trust in the reliability of the data being held.					
Controls already in place as listed on the risk register:					
Back up tapes	Locks on notebook computers				
Access controls	Equipment postcoded				
Fire / security protection	Email filtering greatly reducing viruses, trojan software & spam.				
Security marking of assets					
CCTV unit					
Caretaker protocols					
Booking procedures for use of laptops away from the office					
Are these controls operating effectively? Yes (as far as known)					
Risk Action Plan (All actions listed in priority order)					
Proposed actions to reduce risk using existing resources			New residual risk score ¹		Extra resources required ²
			L	I	
a. A number of further mitigating actions are being investigated:					
<ul style="list-style-type: none"> Rationalise population of underused laptops (part of ICT for New Accommodation project) to ensure they are kept up-to-date with security updates Encryption of data held on PCs (requirement also of Flexible Working project) Splitting the server population between 2 physical sites (Operations Centre & new HQ) Use of “data-less” PCs (holding information on central servers & serving the screen changes to the PCs) – Cyrix investigation (trial sponsored as part of Flexible Working project) 					
Following the investigations implementation of all the actions (for which further funding will be required) may further reduce the likelihood & impact of the risk. This will be reassessed after the investigations are completed.					
Actions requiring additional resources					
1. Introduction of fast acting halon gas in Operations Centre sever room(s) to minimise spread of fire. This facility has been removed from the specification of the Operations Centre but remains in the specification for the HQ server room.			2	4	8 c£18k
2.					
Decision					
Agreed Option:		Implementation Date		Risk Owner	
				Head of IMD	
Decision taken by:			on:		

¹ **New Residual Risk Score:** after the action has been introduced

² **Extra Resources:** only complete if extra resources will be required to allow the proposed action to be introduced e.g. financial costs and staff time

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Risk Treatment Option Form : No 11

Risk Treatment – Action Plan					
Description of risk from register:	Risk ID No: 166/5	Current residual risk score: Likelihood x Impact	2	5	10
A member of the public or an employee of the Council is seriously injured or killed due to the Council not providing its employees with either a safe working environment or sufficient and adequate training with regard to the tasks that it requires to be carried out.					
Controls already in place as listed on the risk register:					
All staff who drive on Council business self-certify that they have a valid driving licence, appropriate insurance and that their vehicle has an MOT (if required). Driving licence check, initial and annual. Driver training. Quarterly review of all Health and Safety risk assessments and incidents - related action plans are implemented and recorded			Health and Safety issues are discussed annually Activity Managers are all trained in Health and Safety Management Health and Safety inspections Health and Safety Officer and Committee Induction training in Health and Safety Different training courses available, risk assessments		
Are these controls operating effectively?			Probably – the driving licence check only applies to HGV drivers in Operations Division		
Risk Action Plan (All actions listed in priority order)					
Proposed actions to reduce risk using existing resources			New residual risk score ¹		Extra resources required ²
			L	I	
a. No further mitigation is practical					
b.					
Actions requiring additional resources					
1.					
2.					
3.					
4.					
5.					
Decision					
Agreed Option:		Implementation Date		Risk Owner	
				Head of Personnel	
Decision taken by:			on:		

¹ **New Residual Risk Score:** after the action has been introduced

² **Extra Resources:** only complete if extra resources will be required to allow the proposed action to be introduced e.g. financial costs and staff time

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EXTRACT FROM RISK MANAGEMENT STRATEGY***Proposed changes highlighted***

Following the plotting of a risk, a decision shall be taken as to how the risk is to be managed. This can be summarised as follows.

Level of Risk	Very High	High	Medium	Low
Level of Concern	Very concerned	Concerned	Uneasy	Content
Consequences	Disastrous impact	Severe impact	Detrimental impact on the day to day delivery of services	Relatively light impact
Risk Treatment	Prepare option appraisal within 4 weeks of risk identification, considering whether to avoid, reduce or transfer the risk or for acceptance of the risk to be approved by:			None The Council accepts the risk
	Corp Gov Panel Cabinet	COMT	Director	
Action Plans to deal with Risk	Within 4 weeks	Within 8 weeks	Within 12 wks	-----
	of the decision to treat the risk			

Roles and Responsibilities

Everyone in the Council is involved in risk management and should be aware of their responsibilities in identifying and managing risk.

Council, Cabinet, Committees & Panels

- To ensure that risk management implications are considered when making decisions.

Cabinet

- To appoint a risk management champion.
- ***To receive reports and decide upon the action to be taken for all mitigated risks that, would the risk materialise, have a disastrous impact on the Council, its reputation or business continuity.***

Corporate Governance Panel

- To ensure that an effective risk management strategy is in place.
- To determine the Council's risk appetite
- To receive an annual progress report from COMT on the implementation of the risk management strategy.
- To receive regular updates on the risk register.
- ~~To receive reports and decide upon the action to be taken for all mitigated risks that, would the risk materialise, have a disastrous impact on the Council, its reputation or business continuity.~~
- To review the risk assessment model annually to ensure it continues to reflect the requirements of the Council.

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WHISTLEBLOWING: ANNUAL REVIEW OF THE POLICY & PROCEDURE

(Report by the Audit Manager)

1. ANNUAL REVIEW

- 1.1 The whistleblowing policy and guidance are reviewed annually to ensure they continue to be fit for purpose.
- 1.2 This year's review has been completed and no changes are necessary.
- 1.3 12 concerns have been received during the past year. All of the concerns have been investigated and no issues need to be brought to the Panel's attention at this time. No concerns were raised about the conduct or behaviour of staff.

2. RECOMMENDATION

- 2.1 The Panel are **recommended** to note that a review has been undertaken but that no changes are required.

BACKGROUND INFORMATION

Whistleblowing Policy & Procedure

Whistleblowing allegations received

Contact Officer: David Harwood, Audit Manager ☎ 01480 388115

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**REVIEW OF THE ANTI FRAUD & CORRUPTION STRATEGY
(Report by the Audit Manager)**

1. INTRODUCTION

- 1.1 This report details the outcome of the review of the Anti-Fraud and Corruption Strategy.

2. THE STRATEGY

- 2.1 The Strategy was first approved by Cabinet in January 2004. It is best practice for such Strategies to be reviewed annually to ensure they are still appropriate.
- 2.2 In addition to a formal statement about not tolerating any instances of fraud, corruption or theft, the Strategy also details the various policies and procedures that are in place to support it.
- 2.3 The Strategy was amended in December 2005 by including reference to the Money Laundering Avoidance Policy. During the year, short guides have been written explaining how to identify and deal with money laundering and how to check a customer's identity. Training has also been undertaken with key staff.
- 2.4 Having reviewed the Strategy to ensure that it remains appropriate and reflects the Council's attitude and commitment towards the prevention of fraud, corruption and theft it is considered that no amendments are required this time.

3. RECOMMENDATION

- 3.1 It is recommended that no revisions are made to the Anti-Fraud and Corruption Strategy.

BACKGROUND INFORMATION

Current Anti-Fraud and Corruption Strategy – available on the Council's website at

<http://www.huntsdc.gov.uk/Councils+and+Democracy/Council/Performance/Whistleblowing.htm>

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**INTERNAL AUDIT SERVICE
INTERIM REPORT 2006/07**

(Report by the Internal Audit Manager)

1. INTRODUCTION

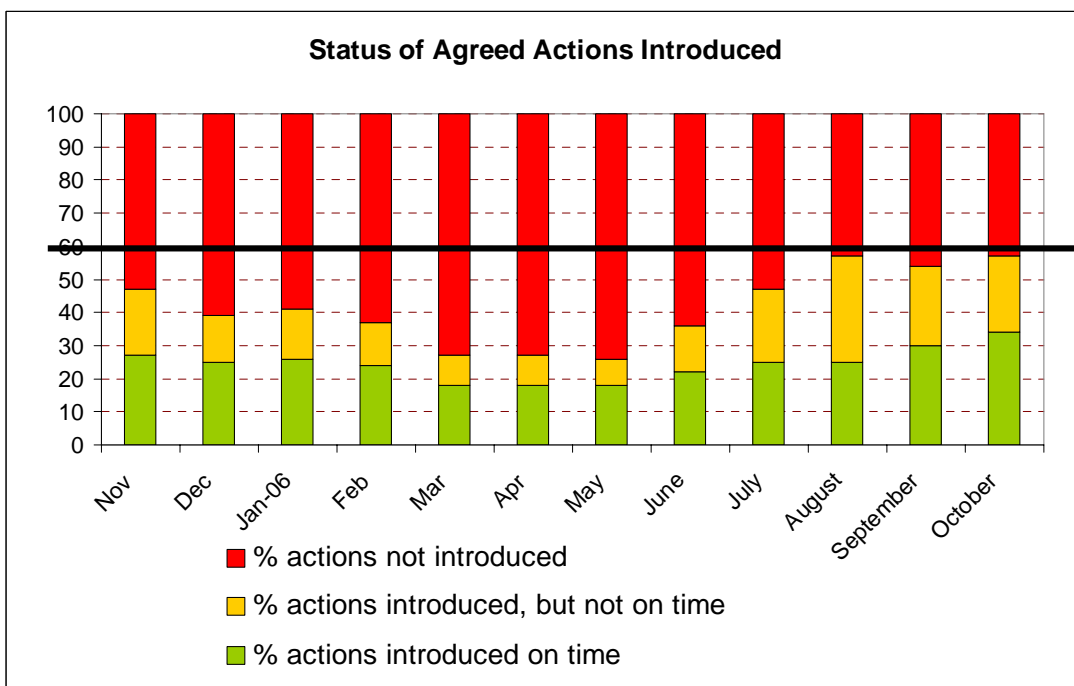
- 1.1 Internal Audit is required by its terms of reference to report twice a year to the Panel. This interim report deals with progress towards the achievement of the 2006/07 annual audit plan and associated performance and management issues.

2. DELIVERY OF THE 2006/07 AUDIT PLAN

- 2.1 As at the 31 October, 15 of the 37 audits planned for 2006/07 had been completed or issued in draft. A further 4 were substantially underway. The level of assurance given for each of the reports completed or issued in draft is shown in the table at Appendix A.
- 2.2 The Panel should note the assurance definitions given. Substantial assurance is not always desirable because it may indicate excessive control where the area is relatively low risk. It should be recognised that in all systems there is a trade-off between efficiency and risk.
- 2.3 Electronic copies of all completed reports are available to Members on the Internal Audit intranet home page, via the 'Search for Audit Reports (Secure)' link.
- 2.4 Based on the work completed to date it is expected that the 2006/07 audit plan will be completed.

3. IMPLEMENTATION OF AGREED ACTIONS

- 3.1 An on-line database has been established which holds details of all agreed actions. Managers responsible for introducing the actions are required to update the database with the action they have taken and the date that the action was introduced. Each Director, Head of Service and Activity Manager is able to access the database and obtain real-time reports that list by date or status, the actions that they have agreed to introduce.
- 3.2 Progress on the implementation of agreed actions was reported to the Panel in September 2006. It showed that at August, 25% of actions had been introduced in time against the target of 60%. The table below, which shows the position by month up to October, shows that an improvement has been made over the last two months, with the current figure standing at 35%.



3.4 It is recognised that there will be occasions where service issues arise after the dates for introducing actions have been agreed, that quite properly take priority over the introduction of the action.

3.5 Whilst the percentage achieved on time is increasing, it is disappointing that, even allowing for those actions introduced late, the scorecard target has not been reached. The table below shows the positions by Directorate.

	Directorate			
@ 31 October 2006	Central Services	Commerce & Technology	Operational Services	TOTAL
No. of Actions	67	87	34	188
Introduced	29	47	31	107
% age introduced	43%	54%	91%	57%
Introduced on time	17	23	26	66
% age on time	25%	26%	76%	35%
	Balanced Scorecard Target:			60%

Of the 188 actions that were required to be introduced in the period, 21 were 'red'. 16 of these actions have been introduced. Appendix B provides brief details of the 5 actions that remain outstanding.

3.6 A sample of actions that have been reported as being completed are checked to see that the action introduced sufficiently addresses the risk that has been identified. In respect of those actions introduced up to 30 September 2006, it was found that the majority of the actions taken were appropriate. Occasionally the action taken does not fully deal with the risk identified.

4. OPINION ON THE INTERNAL CONTROL ENVIRONMENT

4.1 The opinion provided as at 31 August 2006 was that the internal control environment and systems of internal control could provide limited assurance over the effective exercise of the Council's functions.

4.2 Improvement in this level of assurance will depend in part on the further improvement in the speed by which agreed actions are implemented and that the audits in the remainder of the year being generally satisfactory.

5. INTERNAL AUDIT'S PERFORMANCE

5.1 Information in respect of the performance of the internal audit service is attached at Appendix C.

6. RECOMMENDATION

It is recommended that:

- the interim report be noted
- Directors and Heads of Service are reminded of the importance of introducing actions within the agreed timescale.

BACKGROUND INFORMATION

Internal audit reports issued during 2006/07

Audit database of actions

Audit plan 2006/07

Contact Officer: David Harwood, Audit Manager 📞 **01480 388115**

Audit Reports issued April – October 2006

Audit Area	Level of Assurance				Agreed Action Status		
	Substantial	Adequate	Limited	Little	Red	Amber	The risk identified has been accepted by the Mgr ¹
Key Financial Systems							
Loans & Investments	✓✓				---	---	
Housing Benefits	✓✓				---	---	
Payroll	✓✓					3	
Other systems reviews							
Mortgages	✓✓				---	---	
Homelessness	✓✓					3	
Licensing		✓				8	
Disposal of electronic & paper information		✓				4	
Insurance		✓				3	
Gifts & Hospitality		✓				3	
Section 106 Agreements		✓				3	
Implementation of Management/Member decisions ²		✓				3	
Leisure Centres – Bars & Catering			x		4	7	
Markets			x		2	5	
Performance Indicators			x		1	1	
Computer Post Implementation Review			x		1	1	
Computer Audit							
Data Consistency <i>audit incl. in the 2005/06 plan</i>				xx	4	5	

¹ There are occasions when a risk identified during an audit is acknowledged and accepted by a Manager and they decide that no further action is agreed. The right hand column of this table records all those instances.

² = draft report issued as at 31 October 2006

Internal Audit Reporting Process

The audit reporting process has the following five stages.

- 1 Audit completed & draft report prepared.
- 2 The draft report may contain suggested actions to mitigate risks. Actions are placed into a 'red' or 'amber' category.

Red *these are actions that must be implemented as the current exposure to risk is unacceptably high, indicating a major control weakness*

Amber *these are actions that managers have agreed to introduce, as the current risk exposure is high. Controls weaknesses have been identified that have the potential to compromise internal control, operational effectiveness or service delivery.*

- 3 Assurance opinion reached based on action categories and the number of suggested actions proposed.

Substantial Assurance	✓✓	<i>There are no weaknesses in the level of internal control for managing the material inherent risks within the system. Testing shows that controls are being applied consistently and system objectives are being achieved efficiently, effectively and economically apart from any excessive controls which are identified in the report.</i>
Adequate Assurance	✓	<i>There are minor weaknesses in the level of control for managing the material inherent risks within the system. Some control failings have been identified from the systems evaluation and testing which need to be corrected. The control failings do not put at risk achievement of the system's objectives.</i>
Limited Assurance	✗	<i>There are weaknesses in the level of internal control for managing the material inherent risks within the system. Too many control failings have been identified from the systems evaluation and testing. These failings show that the system is clearly at risk of not being able to meet its objectives and significant improvements are required to improve the adequacy and effectiveness of control.</i>
Little Assurance	✗✗	<i>There are major, fundamental weaknesses in the level of control for managing the material inherent risks within the system. The weaknesses identified from the systems evaluation and testing are such that the system is open to substantial and significant error or abuse and is not capable of meeting its objectives.</i>

- 4 Final report prepared. Suggested actions changed to agreed actions. Some current risks may be accepted with the agreement of the relevant Director. Report issued.
- 5 Head of Service accepts report. Audit closed. Report issued to Director & S151 Officer.

'Red' Actions Outstanding

Audit	Head of Service	Action Agreed	Agreed Implementation Date	Current Position
Performance Indicators 2006/07	Head of Policy	Written procedure notes documenting how each PI result is produced will be prepared.	31/08/2006	
Disaster Recovery & Business Continuity Planning	Customer First Programme Manager & Head of Information Management Division	IT systems will be prioritised and the disaster recovery arrangements with the contractor, ICM, will be reviewed.	30/09/2006	Prioritising IT systems in order of criticality for their recovery needs to be completed before progress can be made on this action.
Customer First Application Review	Customer First Programme Manager & Head of Information Management Division	The Council will liaise with the County Council regarding disaster recovery and business continuity arrangements for services provided from Speake House.	30/09/2006	Response is awaited from the County Council.
Leisure Centres: Bars & Catering	Head of Administration	Independent checks will be completed monthly on the levels of overs & unders and refunds which have been made on the bar tills.	31/08/2006	
HR & Payroll: Starters & Leavers	Head of Personnel	Mechanisms will be established for the periodic confirmation of the payroll master file.	31/05/2006	Work is still required to complete 'Post to Post' links within ResourceLink to allow reports to be produced.

Internal Audit Performance

1. Introduction

1.1 Internal audit have prepared a set of performance measures that link into the Council's corporate performance management system. The measures which relate to the service's performance are listed below:

- External audit view of internal audit
- % of customers rating service quality as good or better.
- % of agreed actions implemented on time
- % of service delivery targets achieved.

2. External audit view of internal audit

Target: Adequate or better
Achieved: Satisfied

2.1 The external auditor's annual audit and inspection letter of April 2006 contained the following remarks;

"The Audit Commission continued to be satisfied that the quality of the work done by Internal Audit meets the standards set by the CIPFA Code of Practice and obtained assurance from its work whenever possible to complement and limit their own coverage. In particular, the external audit relied on Internal Audit's documentation and review of key controls of the main financial systems. Their work in this area has increased significantly in the current year due to the need to comply with new international auditing standards."

2.2 The external auditor's Audit of Accounts 2005/06 report to those charged with governance contains the following remarks;

"We aim to place reliance on the work of internal audit in accordance with the 'managed' audit approach. In 2005/06 we have been able to place reliance on the work of internal audit in respect of the key accounting systems."

3. Customer Satisfaction

Target: 85% or more of customers rating service quality as good or better.
Achieved: 12 months to October 2006 - 93%

3.1 At the conclusion of all audits, managers are requested to complete an end of audit survey form and give an opinion on the value of the audit. The options available are – excellent, very good, good, fair and poor. Target information is calculated on a rolling twelve month basis rather than by financial year. The figure is based on 30 returns.

3.2 The Head of Financial Services annual customer satisfaction survey conducted with senior managers has also shown an increase for the third year running in the percentage who consider the internal audit service to be good or better

- April 2004 81%
- April 2005 90%
- April 2006 96%






4. Service delivery targets

4.1 There are four elements to this target which all relate to the progress of individual audits and the reporting process:

- Complete audit fieldwork by the date stated on the audit brief
- Issue draft audit reports within 15 working days of completing fieldwork
- Meet with customer and receive response allowing draft report to progress to final within 15 working days of issuing draft report
- Issue final audit report within 5 working days of receiving full response

4.2 Performance indicators are prepared monthly in respect of each target and circulated to internal audit staff. The targets are also reflected in staffs key performance development targets within the annual appraisal process. Achievement of the targets requires internal audit staff to develop and maintain good working partnerships and the customer's co-operation throughout the period of the audit.

4.3 This information was last presented to the Panel in respect of performance to August 2006. The table below shows the targets and the change in performance between August and October 2006. The reasons for the fall in performance are known and relate to one particular audit.

	Target	Performance as at:	
		August 2006	October 2006
Complete audit fieldwork by the date stated on the audit brief	75%	83%	88% 
Issue draft audit reports within 15 working days of completing fieldwork	90%	93%	89% 
Meet with customer and receive response allowing draft report to progress to final within 15 working days of issuing draft report	75%	95%	92% 
Issue final audit report within 5 working days of receiving full response	90%	95%	100% 
Overall	82%	91%	92% 

5. SERVICE IMPROVEMENTS

5.1 Service developments set out in the previous report that have already been completed are:

- A review of the audit reporting process. Changes have been made to the report so that it now includes a brief statement on the overall scope of the review and details of particularly good practice that have been found. The format of the report has also been amended.
- A review of the internal audit training and development scheme. The scheme identifies specialist skills and competencies expected of internal audit staff. It has been fundamentally reviewed to ensure that it reflects the requirements of both risk based auditing and risk management.

**ACCOUNTS & AUDIT (AMENDMENT) REGULATIONS 2006
(Report by the Internal Audit Manager)**

1. INTRODUCTION

- 1.1 The Accounts & Audit Regulations 2003 have been amended by the Accounts and Audit (Amendment) Regulations 2006. They introduce some changes to strengthen governance and accountability which are explained below.

2. STATEMENT OF INTERNAL CONTROL

- 2.1 The statement of internal control is part of the annual Statement of Assurance on Corporate Governance that the Panel approves. The Regulations now require an annual review of the effectiveness of the Council's system of internal control to be conducted and considered by the Panel before approval of a statement on internal control prepared in accordance with proper practices.
- 2.2 The Panel already approves a statement on internal control by approving the Statement of Assurance but does not review the process or findings of the annual review. It is proposed that the next report on the subject should be split into two parts so that the Panel are seen to be considering the review first, before approving a Statement of Assurance.

3. INTERNAL AUDIT

- 3.1 The Regulations now require the Council to, at least once in each year, conduct a review of the effectiveness of its system of internal audit. The findings of the review should be considered as part of review of internal control referred to in paragraph 2 above.
- 3.2 Consideration is being given to the most effective way of undertaking this review. Options include self-assessment, a peer review, an opinion from the Council's external auditors or some combination of the three over a period of years. The views of the Council's external auditors will be sought before a decision is made.

4. STATEMENT OF ACCOUNTS AND APPROVAL

- 4.1 The Regulations require the statement of accounts to be prepared in accordance with proper practices and that they be considered and approved by 30 June. If this date is not met then Council has to approve the accounts or publish a statement explaining the reasons why they cannot be approved.

5. RECOMMENDATION

It is recommended that the Panel note this report.

BACKGROUND INFORMATION

The Accounts & Audit Regulations 2003 and Guidance thereon
The Accounts & Audit (Amendment) Regulations 2006

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