

A meeting of the **CORPORATE GOVERNANCE PANEL** will be held in the **CIVIC SUITE, PATHFINDER HOUSE, ST MARY'S STREET, HUNTINGDON, PE29 3TN** on **WEDNESDAY, 27 NOVEMBER 2013** at **6:30 PM** and you are requested to attend for the transaction of the following business:-

PRIOR TO THE MEETING THERE WILL BE A PRESENTATION FOR PANEL MEMBERS, ON THE NATIONAL FRAUD INITIATIVE, IN THE CIVIC SUITE COMMENCING AT 6.00PM.

**Contact
(01480)**

1. MINUTES (Pages 1 - 6)

To approve as a correct record the Minutes of the meeting of the Panel held on 26th September 2013.

**Mrs H J Taylor
388008**

2. MEMBERS' INTERESTS

To receive from Members declarations as to disclosable pecuniary, non-disclosable pecuniary or non-pecuniary interests in relation to any Agenda item. See Notes below.

3. CORPORATE GOVERNANCE PANEL - PROGRESS REPORT (Pages 7 - 10)

To receive a report by the Head of Legal and Democratic Services.

**Mrs H J Taylor
388008**

4. EXTERNAL AUDITORS: ANNUAL AUDIT LETTER 2012/13 (Pages 11 - 26)

To receive a report from the Assistant Director, Finance and Resources on the Annual Audit and Inspection Letter 2012/13.

**C Mason
388157**

5. ANNUAL REPORT OF THE FREEDOM OF INFORMATION ACT, ENVIRONMENTAL INFORMATION REGULATIONS AND DATA PROTECTION ACT (Pages 27 - 34)

To receive a joint report from the IMD Service Manager and the Head of Legal and Democratic Services on the Freedom of Information Act, Environmental Information Regulations and Data Protection Act.

**J Taylor
388119**

6. CORPORATE BUSINESS CONTINUITY PLANNING (Pages 35 - 50)

To receive a report from the Corporate Business Continuity Co-ordinator providing an update on progress made in planning for Corporate Business Continuity.

**J Taylor
388119**

7. **ANNUAL REVIEW OF WHISTLEBLOWING POLICY AND PROCEDURE** (Pages 51 - 60)
- To receive a report by the Internal Audit Manager on the outcome of the annual review on whistleblowing. **D Harwood
388115**
8. **OVERVIEW AND SCRUTINY PANELS CO-OPTED MEMBERS** (Pages 61 - 64)
- To receive a report from the Head of Legal and Democratic Services on the outcome of a review of the Overview and Scrutiny Panel's Procedure Rules. **A Roberts
388015**
9. **OFFICER GOVERNANCE WORKING GROUPS** (Pages 65 - 68)
- To receive a report by the Assistant Director, Finance and Resources. **S Couper
388103**
10. **WORK AND TRAINING PROGRAMME** (Pages 69 - 72)
- To consider a report by the Internal Audit Manager. **D Harwood
388115**
11. **EXCLUSION OF THE PRESS**
- To resolve that the public be excluded from the meeting because the business to be transacted contains information relating to consultations or negotiations in connection with labour relation matters between the Council and its employees.
12. **INTERNAL AUDIT - PAY REVIEW** (Pages 73 - 80)
- To consider a report by the Internal Audit Manager on the findings of a review into the job evaluation and pay review process. **D Harwood
388115**

Dated this 19 day of November 2013



Head of Paid Service

Notes

1. Disclosable Pecuniary Interests

- (1) *Members are required to declare any disclosable pecuniary interests and unless you have obtained dispensation, cannot discuss or vote on the matter at the meeting and must also leave the room whilst the matter is being debated or voted on.*
- (2) *A Member has a disclosable pecuniary interest if it -*
- (a) *relates to you, or*
 (b) *is an interest of -*
- (i) *your spouse or civil partner; or*
 (ii) *a person with whom you are living as husband and wife; or*
 (iii) *a person with whom you are living as if you were civil partners*

and you are aware that the other person has the interest.

- (3) *Disclosable pecuniary interests includes -*
- (a) *any employment or profession carried out for profit or gain;*
 - (b) *any financial benefit received by the Member in respect of expenses incurred carrying out his or her duties as a Member (except from the Council);*
 - (c) *any current contracts with the Council;*
 - (d) *any beneficial interest in land/property within the Council's area;*
 - (e) *any licence for a month or longer to occupy land in the Council's area;*
 - (f) *any tenancy where the Council is landlord and the Member (or person in (2)(b) above) has a beneficial interest; or*
 - (g) *a beneficial interest (above the specified level) in the shares of any body which has a place of business or land in the Council's area.*

Other Interests

- (4) *If a Member has a non-disclosable pecuniary interest or a non-pecuniary interest then you are required to declare that interest, but may remain to discuss and vote.*
- (5) *A Member has a non-disclosable pecuniary interest or a non-pecuniary interest where -*
- (a) *a decision in relation to the business being considered might reasonably be regarded as affecting the well-being or financial standing of you or a member of your family or a person with whom you have a close association to a greater extent than it would affect the majority of the council tax payers, rate payers or inhabitants of the ward or electoral area for which you have been elected or otherwise of the authority's administrative area, or*
 - (b) *it relates to or is likely to affect any of the descriptions referred to above, but in respect of a member of your family (other than specified in (2)(b) above) or a person with whom you have a close association*

and that interest is not a disclosable pecuniary interest.

2. Filming, Photography and Recording at Council Meetings

The District Council supports the principles of openness and transparency in its decision making and permits filming, recording and the taking of photographs at its meetings that are open to the public. It also welcomes the use of social networking and micro-blogging websites (such as Twitter and Facebook) to communicate with people about what is happening at meetings. Arrangements for these activities should operate in accordance with guidelines agreed by the Council and available via the following link - [filming, photography-and-recording-at-council-meetings.pdf](#) or on request from the Democratic Services Team. The Council understands that some members of the public attending its meetings may not wish to be filmed. The Chairman of the meeting will facilitate this preference by ensuring that any such request not to be recorded is respected.

Please contact Mrs H Taylor, Senior Democratic Services Officer, Tel No: 01480 388008 / e-mail: Helen.Taylor@huntingdonshire.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 Committee/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.

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.

HUNTINGDONSHIRE DISTRICT COUNCIL

MINUTES of the meeting of the CORPORATE GOVERNANCE PANEL held in Civic Suite, Pathfinder House, St Mary's Street, Huntingdon, PE29 3TN on Thursday, 26 September 2013.

PRESENT: Councillor E R Butler – Chairman.
Councillors M G Baker, K J Churchill,
G J Harlock, R Harrison, P Kadewere,
P G Mitchell and R J West.

IN ATTENDANCE: Councillor J A Gray

25. MINUTES

The Minutes of the meeting held on 24th July 2013 were approved as a correct record and signed by the Chairman.

26. MEMBERS' INTERESTS

No declarations were received.

27. CORPORATE GOVERNANCE PANEL - PROGRESS REPORT

In monitoring progress/achievement of specific actions previously reported to the Panel, a Member questioned whether a letter had been sent to the Department of Communities & Local Government, the Department of Works & Pensions and the Audit Commission over the cost of auditing benefit claims and the criteria for taking a second sample. In response to which, the Panel were informed that the Department had explained that it was not always necessary to undertake an extra sample so long as the auditors feel any identified error is an isolated one.

At the same time, Members noted that, due to a change in personnel, the annual report on the number of requests received by the Council under the Freedom of Information Act would be submitted to the next meeting of the Panel.

28. EFFECTIVENESS OF THE PANEL

A report by the Internal Audit Manager was submitted (a copy of which is appended in the Minute Book) detailing the outcome of a review undertaken by the Chairman and Vice-Chairman on the effectiveness of the Panel. A copy of the report is appended in the Minute Book.

Members noted that the review had concluded that the Panel was generally acting effectively and fulfilling its terms of reference. The Panel was also made aware of a number of opportunities to further improve the Panel's effectiveness identified during the review

process. In that respect, Members discussed whether the effectiveness of the Panel should be the subject of an independent review. Having been advised that an external assessment would cost between £3,000 and £20,000 and given the financial challenges being faced by the authority, Members agreed that it would be unreasonable to pursue this course of action.

With regard to paragraph 2.4 and the suggestion that all or some of the Panel be invited to informal meetings with Managers to consider particular issues, the Panel felt that this should be confined to the Chairman and Vice-Chairman.

Having considered a revised terms of reference for the Panel together with a proposed action plan, the Panel

RESOLVED

- (a) that the results of the outcome of the Chairman and Vice-Chairman's review of the effectiveness of the Panel be noted;
- (b) that Council be recommended to amend the terms of reference of the Cabinet to include the approval of the Risk Management Strategy;
- (c) that Council be recommended to approve the Panel's Terms of Reference appended to the report now submitted;
- (d) that the opportunities identified to further improve the effectiveness of the Panel as set out in the Executive Summary of the report be approved; and
- (e) that future reviews of the Panel's effectiveness be undertaken annually.

29. RISK REGISTER

(During the discussion on this item (7.05pm) Councillor J A Gray, Executive Councillor for Resources took his seat at the meeting).

With the aid of a report by the Internal Audit Manager (a copy of which is appended in the Minute Book) the Panel were acquainted with changes made to the Risk Register between the period 6th March to 2nd September 2013.

The Panel discussed specific risks identified within the report and the process by which risks are measured for impact and likelihood. Particular mention was made of the risks associated with MMI's Scheme of Arrangement and a reduction in numbers of new affordable homes being built and its impact on the use of temporary accommodation. A Member questioned why some risks had been identified as being deleted. The Internal Audit Manager explained that in the majority of cases the risk had been superseded or duplicated by another and that an explanation for their deletion would

be included in future reports.

Having thanked Officers for their efforts in compiling the risk register, it was

RESOLVED

that the contents of the report be noted.

30. IMPROVING INTERNAL CONTROLS

Further to Minute No 13/24, a report by the Internal Audit Manager was submitted (a copy of which is appended in the Minute Book) detailing proposed changes to the Code of Procurement and the Code of Financial Management. Members were advised that the documents had been revised as a result of a recent internal audit investigation into procurement practices which highlighted the need to modify or reinforce internal control processes in a number of areas.

Members were advised that in addition to the changes, a number of initiatives would be introduced including the training of Managers on procurement practices, the Code of Procurement and the e-marketplace and the development of a new overarching procurement strategy. In response to questions raised by the Panel it was confirmed that the final procurement strategy would be submitted to a future meeting, details of which would be confirmed in the Panel's Progress Report.

The Panel also noted that the Employees' Code of Conduct would be replaced by an Employee Handbook. The handbook would deal with issues relating to the Code of Conduct and contain a Code of Ethics, incorporating current key values and behaviours and the seven principles of public life. In response to a question raised by a Member, it was confirmed that the handbook would also include issues relating to the procurement and register of interests as well as general staffing protocols.

Having discussed the circumstances and procedure for dealing with arithmetical errors and post tender negotiations, the Panel

RESOLVED

- (a) that Council be recommended to endorse the revised Code of Procurement set out in Appendix 1 to the report now submitted;
- (b) that Council be recommended to endorse the revised Code of Financial Management detailed in Appendix 2 of the report now submitted;
- (c) that Council be recommended to apply to become a signatory to the Prompt Payment Code as endorsed by the Department for Business Innovation & Skills; and
- (d) that the actions agreed with regard to the employees' handbook be noted.

31. APPROVAL FOR PUBLICATION OF THE 2012/13 ANNUAL GOVERNANCE STATEMENT AND ANNUAL FINANCIAL REPORT

(Mr C Everest and Ms H Clark, PricewaterhouseCoopers LLP were in attendance for consideration of this item).

Following a detailed presentation, the Panel received a report by the Assistant Director (Finance and Resources) (a copy of which is appended in the Minute Book) seeking approval for the publication of the Council's Annual Governance Statement and the Annual Financial Report for 2012/13.

Members were reminded of the process required to be undertaken prior to the documents' publication. As part of which, Mr C Everest delivered the external auditors' ISA 260 report which outlined their findings arising from the audit of the 2012/13 accounts. Members were encouraged to note that there were no significant issues to bring to the attention of the Panel. Ms H Clark then proceeded to deliver an explanation of the audit approach undertaken and updated the Panel on matters which had progressed since the publication of the report.

The external auditors then proceeded to respond to a number of questions raised by the Panel relating to net pension liabilities, succession planning, project management, the use of reserves and the perceived advantages of introducing zero based budgeting.

In considering the contents of the Annual Governance Statement, Members' attention was drawn to some significant areas for improvement, including developing the themes and aims contained in the Leadership Direction, budgetary control, partnership engagement, annual reporting, project management, compliance with the Code of Procurement and noted the appropriate action to be taken.

The Panel complimented Officers on their efforts in finalising the documents in advance of the statutory deadline for publication of 30th September 2013. At the same time, Members congratulated the Internal Audit Manager on the quality and high standard of the Annual Governance Statement.

Having expressed their satisfaction with the content of the external auditors' Letter of Representation, the Panel

RESOLVED

- (a) that the content of the external auditor's ISA 260 report be noted;
- (b) that the Governance Statement for 2012/13 be approved and the Executive Leader and Managing Director authorised to sign the Statement on behalf of the Council;
- (c) that the Letter of Representation appended as an Annex to the auditors' report now submitted be approved and the Assistant Director (Finance and Resources)

authorised to sign it on behalf of the Council; and

- (d) that the revised Annual Financial Report, as amended to reflect the final external audit review, be approved and the Chairman of the Panel authorised to sign the accounts on behalf of the Council.

32. WORK AND TRAINING PROGRAMME

By way of a report by the Internal Audit Manager (a copy of which is appended in the Minute Book) Members received and noted a work programme for the Panel for the period 2013/14. In doing so, the Panel requested that a presentation be made, prior to the start of the next meeting, on the District Council's approach to tackling fraud with particular emphasis on the National Fraud Initiative.

Chairman

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CORPORATE GOVERNANCE PANEL PROGRESS REPORT

Panel Date	Decision	Response	Date for Action	Officer Responsible
25/09/12	<p><u>Annual report on the Freedom of Information Act, Environmental Information Regulations and Data Protection Act</u></p> <p>Agreed that the previous year's statistics on the number of requests received by the Council under the Freedom of Information Act be included in future reports for comparative purposes.</p>	Report on the agenda	November 2013	Heads of IMD, Legal and Democratic Services
25/09/12	<p><u>2010/11 Accounts</u></p> <p>The corporate guide to managing projects be reviewed and approved by Chief Officers Management Team and subsequently forwarded on to Managers for their perusal.</p>	A report on the agenda describes the new officer Governance Board and supporting working groups. One of these has responsibility for Project Management and will deliver the Corporate Guide together with other items to enhance project management.		Assistant Director Finance and Resources
12/12/12	<p><u>Corporate Business Continuity Planning</u></p> <p>Service Manager, IMD to identify site which would accommodate council services in the event of major incident at Pathfinder House. Details to be included in the 2013 Annual Report to Panel.</p>	Report on Agenda.	December 2013 – Annual Report	Service Manager, IMD
24/7/13	<p><u>Internal Audit Service Annual Report</u></p> <p>Requested regular updates from Chief Officers Management Team on procurement practices.</p>	The Governance Board will provide information and assurance to the Panel	27th Assistant	Internal Audit Manager/ Assistant

CORPORATE GOVERNANCE PANEL PROGRESS REPORT

Panel Date	Decision	Response	Date for Action	Officer Responsible
		on a regular basis starting with the Panel's March meeting.	Director, Finance and Resources November 2013	Director Finance and Resources
26/9/13	<u>Effectiveness of the Panel</u> Recommendation to Council that both the Panel's and Cabinet's Terms of Reference be amended. Future reviews to be undertaken by Chairman and Vice Chairman annually.	Approved by Council on 13 th November 2013.	13 th November 2013	Senior Democratic Services Officer Internal Audit Manager
26/9/13	<u>Risk Register</u> Explanation for the deletion/duplication of risks to be included in future reports.	Agreed.		Internal Audit Manager
26/9/13	<u>Improving Internal Controls</u> Internal Audit Manager to submit final procurement strategy to Panel. Code of Procurement and Code of Financial Management to be endorsed by Council. Council to apply to become a signatory to the Prompt Payment Code.	Approved by Council on 13 th November 2013.	13 th November 2013	Internal Audit Manager Senior Democratic Services Officer Internal Audit Manager
26/9/13	<u>Approval for Publication of the 2012/13 Annual Governance Statement and Annual Financial Report</u> Executive Leader and Managing Director to sign the Governance Statement for 2012/13.	The Annual Governance Statement has been signed by both the Executive	On or before 26 th September	Assistant Director, Finance and Resources

CORPORATE GOVERNANCE PANEL PROGRESS REPORT

Panel Date	Decision	Response	Date for Action	Officer Responsible
	Assistant Director Finance and Resources to sign the Letter of Representation.	Leader and the Managing Director. Letter of Representation signed by the Assistant Director, Finance and Resources on 26 th September 2013.	2013. 26 th September 2013	Assistant Director, Finance and Resources
	Chairman of the Panel to sign the Accounts on behalf of the Council.	Chairman of the Panel signed the accounts on the 26 th September 2013.	26 th September 2013	
26/9/13	<u>Work and Training Programme</u> Requested presentation prior to the November meeting on the District Council's approach to tackling fraud with particular emphasis on the National Fraud Initiative.	Arranged.	27 th November 2013.	Corporate Fraud Manager

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HUNTINGDONSHIRE DISTRICT COUNCIL

Title: External Auditors: Annual Audit Letter 2012/13

Meeting/Date: Corporate Governance Panel
27 November 2013

Executive Portfolio: Resources: Councillor J A Gray

Report by: Assistant Director (Finance and Resources)

Ward(s) affected: All Wards

Executive Summary:

The 2012/13 audit of the Councils Annual Financial Report, the Annual Governance Statement and relevant grant claims is now complete. Consequently, the Council's external auditor, PricewaterhouseCoopers is required to issue an Annual Audit Letter; this is attached at Appendix 1. The Annual Audit Letter is a digest of the auditor's findings, recommendations and fees in respect of 2012/13.

Recommendation(s):

The Panel is requested to note the 2012/13 Annual Audit Letter.

1. PURPOSE

- 1.1 At the conclusion of each year's audit work the external auditor issues an Annual Audit Letter, which is a digest of their findings and recommendations made along with an indication of the audit fee due.

2. BACKGROUND

- 2.1 The Panel is designated as "those charged with governance". Members will recall that at the meeting of the 26th September they:
- received a draft ISA 260,
 - approved the Executive Leader and Officers to authorise the Annual Governance Statement and the Letter of Representation, and
 - approved the Chairman to authorise the Annual Financial Report.

3. RECEIVING THE AUDITORS ANNUAL AUDIT LETTER

- 3.1 On the 27th September the auditors signed the 2012/13 Annual Financial Report and the report was published by the statutory deadline of the 30th September. The auditors have now issued the Annual Audit Letter, attached as Appendix 1, which is a digest of their findings, recommendations and fees for their work in respect of 2012/13.

- 3.2 With regard to:

- the findings and recommendations, these were previously reported in the draft ISA 260.
- audit fees, these are shown on page 11 of the Annual Audit Letter and are subject to final agreement.

4. LEGAL IMPLICATIONS

- 4.1 The purpose of this report is to satisfy procedural and legal requirements in connection with Code of Audit Practice and Statement of Responsibilities of Auditors and Audited Bodies.

5. RESOURCE IMPLICATIONS

- 5.1 The audit fee is noted in paragraph 3.2 and can be met from within current resources.

LIST OF APPENDICES INCLUDED

Appendix 1 – PwC 2012/13 Annual Audit Letter

BACKGROUND PAPERS

Working papers in Financial Services

CONTACT OFFICER

Steve Couper, Assistant Director (Finance and Resources)

☎ 01480 388103

Clive Mason, Accountancy Manager

☎ 01480 388157

Huntingdonshire District Council

Annual Audit Letter

2012/13

13

Government and
Public Sector

October 2013

Contents

Introduction	1
Audit Findings	3
Summary of Recommendations	10
Final Fees	11

Code of Audit Practice and Statement of Responsibilities of Auditors and of Audited Bodies

In April 2010 the Audit Commission issued a revised version of the 'Statement of responsibilities of auditors and of audited bodies'. It is available from the Chief Executive of each audited body. The purpose of the statement is to assist auditors and audited bodies by explaining

where the responsibilities of auditors begin and end and what is to be expected of the audited body in certain areas. Our reports and management letters are prepared in the context of this Statement.

Reports and letters prepared by appointed auditors and addressed to members or officers are prepared for the sole use of the audited body and no responsibility is taken by auditors to any Member or officer in their individual capacity or to any third party.

An audit is not designed to identify all matters that may be relevant to those charged with governance. Accordingly, the audit does not ordinarily identify all such matters.

Introduction

The purpose of this letter

This letter summarises the results of our 2012/13 audit work for members of the Authority.

We have already reported the detailed findings from our audit work to the Corporate Governance Panel in the following reports:

- Audit opinion for the 2012/13 financial statements, incorporating opinion on the proper arrangements to secure economy, efficiency and effectiveness in its use of resources; and
- Report to those charged with Governance (ISA (UK&I) 260).

The matters reported here are the most significant for the Authority.

Scope of Work

The Authority is responsible for preparing and publishing its Statement of Accounts, accompanied by the Annual Governance Statement. It is also responsible for putting in place proper arrangements to secure economy, efficiency and effectiveness in its use of resources.

Our 2012/13 audit work has been undertaken in accordance with the Audit Plan that we issued in March 2013 and is conducted in accordance with the Audit Commission's Code of Audit Practice, International Standards on Auditing (UK and Ireland) and other guidance issued by the Audit Commission.

We met our responsibilities as follows:

Audit Responsibility	Results
<i>Perform an audit of the accounts in accordance with the Auditing Practice Board's International Standards on Auditing (ISAs (UK&I)).</i>	We reported our findings to the Corporate Governance Panel on 26 September 2013 in our 2012/13 Report to those charged with governance (ISA (UK&I) 260). A final version of our report, following the completion of all audit work, was issued on 27 September 2013. We issued an unmodified audit opinion on the same date.
<i>Report to the National Audit Office on the accuracy of the consolidation pack the Authority is required to prepare for the Whole of Government Accounts.</i>	We issued a short form assurance statement to the National Audit Office on 27 September 2013.
<i>Form a conclusion on the arrangements the Authority has made for securing economy, efficiency and effectiveness in its use of resources.</i>	On 27 September 2013 we issued an unmodified value for money conclusion. We have detailed our findings on pages 4-7.
<i>Consider the completeness of disclosures in the Authority's annual governance statement, identify any inconsistencies with the other information of which we are aware from our work and consider whether it complies with CIPFA / SOLACE guidance.</i>	We reviewed the AGS to consider whether it complied with the CIPFA / SOLACE "Delivering Good Governance in Local Government" framework and whether it is misleading or inconsistent with other information known to us from our audit work. No matters were noted in this regard.

Audit Responsibility	Results
<p><i>Consider whether, in the public interest, we should make a report on any matter coming to our notice in the course of the audit.</i></p>	<p>We did not deem it necessary to issue a report in the public interest. We have detailed our consideration of this on page 8.</p>
<p><i>Determine whether any other action should be taken in relation to our responsibilities under the Audit Commission Act.</i></p>	<p>There were no issues to report in this regard.</p>
<p><i>Issue a certificate that we have completed the audit in accordance with the requirements of the Audit Commission Act 1998 and the Code of Practice issued by the Audit Commission.</i></p>	<p>We issued our completion certificate on 27 September 2013.</p>

We have identified three accounts related matters during the course of our audit that we wish to draw to your attention:

- 1. Cut off treatment for housing and council tax benefit payments;*
- 2. Bank reconciliations; and*
- 3. Pension liability.*

Audit Findings

Accounts

We audited the Authority's accounts in line with approved Auditing Standards and issued an unqualified audit opinion on 27 September 2013.

The Authority had significant difficulties in producing its accounts for 2010/11 on a timely basis. In our reporting on the 2011/12 audit we noted that there had been good progress in preparing a version of the Annual Financial Report suitable for audit, but that we continued to encounter some lower level difficulties with obtaining adequate working papers which supported the figures included in the Annual Financial Report.

We are pleased to report to there has again been significant improvement in the quality of working papers received in the current financial year. We are aware that the finance team has made a significant effort during the year to ensure that the Annual Financial Report and working papers were prepared to a standard suitable for audit.

We identified no material errors or adjustments to the accounts presented for audit. We have however identified three more minor matters during the course of our audit that we wish to draw to your attention:

1. Cut off treatment for housing and council tax benefit payments;
2. Bank reconciliations; and
3. Pension liability.

1. Cut off treatment for housing and council tax benefit

Our cut off testing for payments pre and post year end identified that an adjustment is not made in relation to benefit payments which span the financial year end. This is on the basis that, for the accounts, the subsidy is calculated on what is paid in any given year, as opposed to the amounts payable in relation to the financial year. These figures are reconciled to the Annual Financial Report and form the figures in the income and expenditure account.

On the basis that: there is no clear guidance on treatment; a variety of options are being used by Authorities; the amount is below materiality; any impact on the general fund would be trivial; and the improvement of the information provided to the users of the accounts would be negligible, it has been deemed reasonable that the Authority continue to account on a paid basis. This was included as a critical accounting judgement in the Annual Financial Report and we recommended that management monitor the value year on year and consider whether adjustments should be made in future years.

2. Bank reconciliations

In 2012/13 we experienced difficulties in the audit of the bank reconciliation, which reconciled in year movements for each bank account rather than at a point in time. We were subsequently provided with one reconciliation which successfully reconciled all bank account balances in total with the ledger balance as at 31 March 2013. However, reconciliations should be performed on an account by account basis. Management have identified that the brought forward figures for all bank accounts have been merged into a single figure since 1999. We should note that this is a discrepancy within the cluster of bank account ledger codes

and the completion of the reconciliation across all accounts provides evidence that this is not a wider issue. We recommended that management disaggregate the ledger codes which will enable them to perform individual account reconciliations as described above.

3. Pensions liability

The most significant estimate in the Annual Financial Report is in the valuation of net pension liabilities for employees in the Cambridgeshire County Council Local Government Pension Scheme (CCC LGPS). The net pension liability at 31 March 2013 was £58 million (2012 - £51 million).

We reviewed the reasonableness of the assumptions underlying the pension liability, and are comfortable that the assumptions are within an acceptable range. We also validated the data supplied to the actuary on which to base their calculations.

During the course of the audit it was identified that the Actuary in their calculation of the net pension liability for the total fund at 31 March 2013 had estimated total scheme assets as £1,967m. The results of the Cambridgeshire County Council Local Government Pension Scheme audit identified that the actual value of scheme assets at the balance sheet date for the fund was £1,904m, a difference of £63m.

A full valuation exercise is undertaken by actuaries every three years. As such the asset value in the intervening period is an estimate calculated by the actuary using a model, and any differences between the estimate and actual figures are adjusted at the next full valuation. In comparing the asset value per the actuary's report to the admitted body's share of the audited pension fund assets, we are therefore comparing two estimates. In effect we are using the estimated percentage share of the audited assets figure to assess the reasonableness of the actuary's estimate. In our view, a reasonable threshold would be +/- 5% of the asset value. As the difference between the actuary's estimate of the total

value of the fund and the audited total value of the fund fell within the +/- 5% threshold (actual difference is c.3.2%) it was deemed to be reasonable. No adjustment was therefore required to the accounts.

Use of Resources

We carried out sufficient, relevant work in line with the Audit Commission's guidance, so that we could conclude on whether you had in place, for 2012/13, proper arrangements to secure economy, efficiency and effectiveness in your use of the Authority's resources.

In line with Audit Commission requirements, our conclusion was based on two criteria:

- the organisation has proper arrangements in place for securing financial resilience; and
- the organisation has proper arrangements for challenging how it secures economy, efficiency and effectiveness.

To reach our conclusion, we carried out a programme of work that was based on our risk assessment.

We issued an unqualified conclusion in respect of the two criteria above. However, as part of our work this year we identified four areas of note to report. These cover:

1. Financial position;
2. Project management;
3. Procurement and contracting; and
4. Culture of control and compliance.

A summary of the key findings have been set out below. More detailed information can be found in our Report to Those Charged with Governance (ISA (UK&I) 260).

Value of money conclusion – there are four areas we wish to bring to your attention in concluding our audit work:

1. *Financial position;*
2. *Project management;*
3. *Procurement and contracting; and*
4. *Culture of control and compliance.*

Financial position:

In the past the Authority has generally had adequate reserves to support their continued operations. The Medium Term Financial Plan includes the use of reserves in balancing the budget with the acknowledgement that significant savings will be needed going forward. Despite this use of reserves, and comparing approved budgets to the final out-turn for the years 2009/10, 2010/11 and 2011/12, it has been demonstrated there that there has been a consistent pattern of under spending. Assessing the Authority's forward projections for reserves, the Authority is likely to hit their minimum reserves level by 2015/16.

There are a number of recommendations which we believe could be implemented to strengthen the budgetary control and financial planning process for the medium and longer term, based on the following key findings:

- A formal savings plan is not separately identified, agreed at the start of each financial period and monitored over the course of the year. Management have confirmed that savings are allocated to budgets and managers are expected to deliver them or to report that this will not be possible as part of the budgetary control process. Management's view is that the achievement of a saving in an alternative way is acceptable if it does not have an adverse impact on service delivery. Where this occurs it would be highlighted in the normal course of budget monitoring or when the MTP is reviewed.

Our view is that, whilst the achievement of the budget helps to inform the overall financial position it does not necessarily enable the Authority to identify and take timely and appropriate actions where specific savings are not being realised. Furthermore the Authority may not be in a position to understand key drivers for costs and savings in departments, potentially lessening chances of utilising and sharing lessons learnt.

We consider it would be good practice for the Authority to introduce formal procedures to initially record and subsequently monitor savings plans, with each plan having an assigned 'owner' who monitors the plan regularly and reports variances to Cabinet with budgetary information.

- We believe it is also best practice that zero based budgeting is performed and appropriate challenge is applied during the budget setting process to better identify and understand the Authority's cost base. We are not aware of this having occurred in recent years. Management have stated that they will record challenges to budgets and savings as part of the MTP process.
- The regularity of the current in year financial reporting should be considered. Cabinet receives financial monitoring reports quarterly and managers review their budgets monthly. It would normally be good practice that monthly monitoring of the overall financial position would be undertaken to identify any significant variances early on. Management have confirmed that a high level dashboard on the financial position is now produced monthly for all Members. A further monthly service highlight report is currently being considered.
- Given the significant historic variances against budget it should be ensured that budget holders are being held to account and justification sought where there are any significant under or over spends forecast. This process would help to avoid large variances at the year end. Management should ensure that full ownership is being taken by service managers and that appropriate challenge is applied by accountants to ensure effective review of budgets against actual and forecast spend. This point has been recognised by the Authority and has explicitly been included in the Annual Governance Statement.

Whilst we deem these matters significant enough to report, the Authority has demonstrated historical underspends

against budget and there is evidence to support sufficient reserves in the medium term. As such we do not deem it appropriate to qualify the value for money conclusion on this basis. We note that budgetary control has been included as an area for improvement in the Annual Governance Statement.

Project management:

During the year the Authority contracted with Local Government Shared Service (LGSS) for the provision of HR and payroll services. Using risk based procedures we have performed a high level review of the contract this year as part of our review of significant contracts.

1. We understand that the Head of Legal and Democratic Services was not asked to be involved in the review of the contract until the very late stages of the negotiations. Management and the Head of Legal and Democratic Services subsequently confirmed that they believe the arrangement in place satisfied the criteria for not using EU tendering.
2. In reviewing the contract cost proposal it was noted that the overall cost of the service was calculated based on a number of assumptions, and covering several options. The estimated costs were then broken down into the contract cost with LGSS plus an element of costs that would still be incurred by the Authority through remaining staff in relation to payroll and HR.

The initial costs drawn up by finance were £4,541k. This would have made the chosen option the most expensive. Following review of the accountancy assumptions by the former Managing Director of Resources, the overall estimated cost was reduced to £3,997k. The methodology and reasons behind this reduction were not documented at the time and are therefore unknown. This subsequently made the transition to LGSS, whilst retaining the current payroll package, the second lowest cost option.

Following our findings the Assistant Director (Finance and Resources) reviewed the two versions in September 2013 and concluded that in his view the figure of £3,997k is reasonable as there were items in the original calculation that were confirmed as already included in the contract and some other items were significantly over-cautious. Whilst we have seen some evidence in relation to changes made in the services provided under the LGSS contract, there are some elements which have been based on management's current views of what assumptions may have been made at that time, that can now not be supported.

The above highlights that there was no contemporaneous documentation of the adjustments, which represents a compliance failure in the process. There is a key need for an audit trail to be preserved on important financial decisions and a need to ensure that there is an effective structure to challenge senior staff, as finance staff did not challenge the understanding of how the revised costs had been derived.

We should note that all options were more expensive than the existing arrangement, with a budget of £3,878k. At the point of approval by Council the option selected was the second cheapest option. We note that the report highlighted a number of non-financial advantages of the chosen option, and that cost is not the sole determinant of which option represent best value for money. We have not reviewed these other benefits in detail but understand that these were perceived to outweigh the additional cost.

4. Penalty clauses linked to key performance metrics were not built into the contract: as such there are no financial penalties for underperformance (although it is noted that in the event of non-compliance with the contract remedial action would be undertaken at LGSS' expense), and we understand there are no arrangements for the Authority to share in efficiencies through cost reductions under the current contract. The Authority is thus at risk of having locked in their future costs based

on an inefficient service, having lost the opportunity to get financial benefit through restructuring the service, and having less ability to ensure service quality is maintained. On this basis there is a real risk that this contract may prove to be poor value for money. Management stated that the Authority has some ability to share in the benefits of certain future efficiency proposals.

5. Performance monitoring reports are prepared by LGSS and reviewed at performance review meetings; however these are not subject to independent scrutiny and review for accuracy. Whilst discussion with management has identified that the reports are scrutinised and, where relevant, notes have been circulated, this process could be more formalised.

We understand that the Authority may be looking to undertake similar arrangements for other areas of the Authority. We therefore recommend that additional evidence in respect of the compliance, regularity and value for money of the LGSS contract is sought to ensure lessons are learnt before making any decisions.

Procurement and Contracting:

During the year, internal audit informed us that they had become aware of a potential breach in procurement rules for a contract for goods and services, which was reported to the Authority separately as part of the July 2013 Corporate Governance Panel meeting. We have therefore not included detailed information in this report due to the commercial and personnel implications. We do however note that the findings detailed serious non-compliance with the Authority's procedures.

At the time we completed our audit, the Authority was in the process of investigating potential differences in payments made under the contract. These were not material and hence did not prevent us from forming our audit opinion.

An internal audit report on improving internal controls was reported to the Corporate Governance Panel in September 2013, dealing with the proposed actions to minimise the chances of these issues recurring. Recommendations included:

1. Amending the Code of Procurement;
2. Increasing the influence of the Procurement Manager;
3. Improved reporting of procurement activity to the management team and the Corporate Governance Panel;
4. Enforcing the use of, and further developing the contracts register, so that it acts as an internal control mechanism;
5. Amending the Code of Financial Management;
6. Signing up to the Prompt Payment Code;
7. Rewriting and re-launching the Code of conduct as an employee handbook;
8. Introducing a code of ethics that will refer to the seven principles of public life;
9. Policies associated with the handbook to be made available in one location;
10. Formal 'sign up' to the handbook by all employees; and
11. All breaches of the handbook being treated in accordance with the disciplinary procedures.

Culture of control and compliance

Whilst we have not undertaken a detailed review of controls and compliance with controls across the Authority, in considering the issues related to project management, procurement and contracting we observed that there were some examples of poor compliance with mandated control procedures, inadequate identification of these breaches by more senior staff and weaknesses in the degree of financial challenge and rigour applied. Whilst this does not provide conclusive evidence it does raise concerns over the overall culture of compliance within the Authority, without which the established controls structure cannot operate effectively, even if adequately designed.

We would encourage the Authority to look closely at this issue, to establish the extent to which these are isolated issues or indicative of wider concerns across the Authority, encompassing all staff in critical control positions. To the extent there are broader compliance issues, the Authority will need to consider closely how it responds, through changes to procedures and training.

We note also that the Authority is heavily dependent on key individuals for its financial reporting, without whom the improvements made in the last two years could be lost.

Conclusion of value for money opinion:

In determining whether to issue an unqualified or qualified opinion we carefully considered the items detailed above and concluded that it is appropriate to issue an unqualified value for money conclusion.

In relation to the contracting and procurement matters identified above, and the culture of compliance in the Authority, actions are being taken by the Authority to address the matters identified and our discussions with the new Managing Director identified that these are high priority issues for the coming year. Both the procurement and project management matters feature in the Annual Governance Statement.

Reports in the public interest

As part of our audit, we have a legal duty to consider:

- Whether anything coming to our attention is sufficiently important that we should issue a separate report on the matter for consideration by the Authority's members or so that the matter can be brought to public attention; and
- Whether the public interest in the matter is such that we need to issue a report immediately rather than at the end of the audit.

Having carefully considered the issues identified in relation to contracting and procurement above, we determined that a report in the public interest was not required. We believe we can most effectively discharge our reporting responsibilities in a timely matter through referring to these issues in this letter.

Annual Governance Statement

Local authorities are required to produce an Annual Governance Statement (AGS) that is consistent with guidance issued by CIPFA/SOLACE. The AGS accompanies the Statement of Accounts.

We reviewed the AGS to consider whether it complied with the CIPFA/SOLACE guidance and whether it might be misleading or inconsistent with other information known to us from our audit work. We found no areas of concern to report in this context, and would complement the Authority on the efforts made to produce an AGS that clearly set out for readers the key matters, in a format which is easy to read and understand. In this context we saw the AGs as representing good practice. We note that significant matters we have been made aware of during the course of the audit have been included.

Whole of Government Accounts

We undertook our work on the Whole of Government Accounts consolidation pack as prescribed by the Audit Commission. We noted two inconsistencies between the Annual Financial Report and the WGA schedules of £3.680m. These related to the brought forward figures for the pension asset and pension liability provided by the DCLG being incorrect; however the overall net position remained consistent. We reported this matter within the short form assurance statement issued on 27 September 2013.

Certification of Claims and Returns

We presented our most recent Annual Certification Report for 2011/12 to those charged with governance in March 2013. We certified two claims worth £96 million. In one case a qualification letter was required to set out the issues arising from the certification of the claim. We will issue the Annual Certification Report for 2012/13 in February 2014.

We are required to report to you any significant deficiencies in internal control.

Summary of Recommendations

Accounting systems and systems of internal control

Management are responsible for developing and implementing systems of internal financial control and to put in place proper arrangements to monitor their adequacy and effectiveness in practice. As auditors, we review these arrangements for the purposes of our audit of the Annual Financial Report and our review of the annual governance statement.

We have to report to you any significant deficiencies in internal control that we found during the audit which we believe should be brought to your attention. Other than the matters identified in the main body of this report we have no further issues to report.

We report those internal control issues that are less significant separately to management, with action plans being agreed with officers. Consistent with prior years, our Internal Control Report will be issued in due course, however we have discussed all matters identified during the course of the audit with management.

Final Fees

Final Fees for 2012/13

We reported our fee proposals in our audit plan.

We are currently in the process of agreeing the fee over and above the scale element with management. This will then need to be subsequently agreed with the Audit Commission. We will report the final position in due course.

Our fees charged were therefore:

	2012/13 outturn	2012/13 fee proposal	2011/12 final outturn
Audit work performed under the Code of Audit Practice			
- Statement of Accounts	£58,081*	£58,081	£104,302
- Conclusion on the ability of the organisation to secure proper arrangements for the economy, efficiency and effectiveness in its use of resources	£10,000*	£10,000	£16,666
- Whole of Government Accounts	£2,000	£2,000	£3,333
Certification of Claims and Returns	£21,950**	£21,950	£35,000
Non Audit Work	£0	£0	£0
TOTAL	£92,031*	£92,031	£159,301

* Areas where we are seeking fees over and above the scale element.

** Our fee for certification of claims and returns is yet to be finalised for 2012/13 and will be reported to those charged with governance in February 2014 within the 2012/13 Annual Certification Report. At the time of writing this report we have identified a systematic issue which will require additional certification procedures. Once we are able to determine the final cost of this additional work we will agree the amount with management. Similarly we will then need to subsequently agree the additional fee with the Audit Commission. We will report the final position in due course.



In the event that, pursuant to a request which Huntingdonshire District Council has received under the Freedom of Information Act 2000, it is required to disclose any information contained in this report, it will notify PwC promptly and consult with PwC prior to disclosing such report. Huntingdonshire District Council agrees to pay due regard to any representations which PwC may make in connection with such disclosure and Huntingdonshire District Council shall apply any relevant exemptions which may exist under the Act to such report. If, following consultation with PwC, Huntingdonshire District Council discloses this report or any part thereof, it shall ensure that any disclaimer which PwC has included or may subsequently wish to include in the information is reproduced in full in any copies disclosed.

This document has been prepared only for Huntingdonshire District Council and solely for the purpose and on the terms agreed through our contract with the Audit Commission. We accept no liability (including for negligence) to anyone else in connection with this document, and it may not be provided to anyone else.

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HUNTINGDONSHIRE DISTRICT COUNCIL

Title/Subject Matter:	Annual report on the Freedom of Information (FOI) Act, Environmental Information Regulations (EIR) and Data Protection Act (DPA)
Meeting/Date:	Corporate Governance Panel (27 th Nov 2013)
Executive Portfolio:	Executive Councillor for Strategic Economic Development & Legal Executive Councillor for Customer Services
Report by:	Report by IMD Service Manager and Head of Legal & Democratic Services
Ward(s) affected:	All

Executive Summary:

This annual report is intended to update the Corporate Governance Panel on the performance of the Council against its duties in respect of the Freedom of Information (FOI) Act, Environmental Information Regulations (EIR) and Data Protection Act (DPA).

Recommendation(s):

The Corporate Governance Panel is asked to note the findings of this report.

1. WHAT IS THIS REPORT ABOUT/PURPOSE?

1.1 The purpose of this report is to:

- Analyse the requests for information/personal data received by the Council under FOI, EIR and DPA.
- Report these findings to the Corporate Governance Panel

2. BACKGROUND

2.1 The public has had the right to access information held by the Council under the Freedom of Information Act. The Freedom of Information Act (FOI) works alongside the Environmental Information Regulations (EIR) which came into force in 2004. EIR applies to any environmental information which is held by the Council. DPA applies to personal data held. FOI applies to all other information. IMD is responsible for managing the process for dealing with FOI and EIR requests.

2.2 Under the Data Protection Act 1998 (DPA), living individuals have a right to access their own personal data (broadly information about them). The DPA also controls how Data Controllers, such as Councils, are allowed to process data, including personal data. Legal and Democratic Services are responsible for dealing with SAR (Subject Access Requests) under the Data Protection Act.

3. ANALYSIS

FOI and EIR Requests received

3.1 The table below shows a comparison of the number of requests received by the different Cambridgeshire Councils.

Council	Total number of requests since 1/1/2005	Requests in 2012	Requests in 2011
Cambridgeshire County	4550	871	957
Huntingdonshire District	2487	456	519
Cambridge City	2374	495	533
Fenland District	1972	403	408
South Cambridgeshire District	1919	428	425
East Cambridgeshire District	2423 (excluding figures from 2005)	584	872

3.2 A breakdown of the 456 FOI/EIR requests received by HDC in 2012 is shown in Appendix 1.

3.3 95% of requests were completed within the regulatory 20 working day period. The target was 90%. There was a 12% decrease in the number of requests received in 2012 compared with 2011. However, this year the upward trend of previous years has been restored and in 2013 we have seen requests rise to the highest level yet. See Appendix 1 for more information.

3.4 Processing FOI/EIR requests begins with IMD logging the request. IMD filter requests that are clearly not relevant for District Councils and replies direct to the applicant (e.g. requests relating to social services or education). If it is

appropriate, IMD will ask relevant departments for information to answer the request within 15 working days. Most HDC services are generally achieving the 15 working day timescale. IMD meets with any service which is consistently failing to achieve the 15 working day timescale to consider how they could meet this requirement.

3.5 The most frequent requests were for:

- Land Charges information
- Contracts
- NNDR information
- Planning Preliminary Enquiry files

3.6 The majority of people requesting information continue to be members of the public but there have been a number of requests from companies and the media.

3.7 During 2012 there were 3 complaints, asking the Council to review the response to a FOI/EIR request, as well as 1 complaint made to the Information Commissioner's Office (ICO). All of these have been addressed and the ICO upheld our original response to the complainant. This is in line with numbers of complaints from previous years and we always expect some FOI applicants to seek to challenge the Council's position.

Data Protection

3.8 As a Data Controller, the Council is obliged to notify the Information Commissioner annually of the nature and purposes for which they process data and ensure they operate within the 8 principles governing such processing. Broadly these are that personal information must be:

- Fairly and lawfully processed
- Processed for limited purposes
- Adequate, relevant and not excessive
- Adequate and up to date
- Kept for no longer than necessary
- Processed in line with the data subjects rights
- Secure
- Not transferred to other countries without adequate protection.

3.9 The Information Commissioner is appointed as Regulator to ensure compliance. The current purposes are published by the Information Commissioner and accessible to the public via the internet. The Council makes policies available to members, officers and the public which set out how it will process information.

3.10 The Information Commissioners have various sanctions open to them for breach of the DPA and can now issue monetary penalty notices up to £500,000 for serious contravention of data protection principles of a kind likely to cause substantial damage or substantial distress. These must have been by deliberate act of the Data Controller where it ought to have known of the risk and failed to take reasonable steps to prevent it. The Council need to be vigilant and maintain robust processes and ensure staff are properly trained to comply with legal requirements.

- 3.11 Living individuals are entitled to know in advance, what their personal data is to be used for by any data controller and that it will be processed lawfully. The Council is required, as a data controller, to notify the Information Commissioner annually of their name, address and contact details. They must give a general description of the purposes for which they process personal data including, the types of people and information affected and with whom this might be shared. This information is then recorded and published by the Information Commissioner in a register available over the Internet to the general public. It provides a primary start point for anyone wanting to check what personal data the Council may process. In addition the Council, when they collect personal data, normally have to inform the individual concerned what it may be used for. To do this, Council forms should include a fair processing notice or privacy statement describing those purposes. All departments are **recommended** to review their standard forms involving personal data collection to ensure they refer to the Council's Internet fair processing notice / privacy statement. This has the advantage of making it easier to keep forms up to date and is a logical place for the public to look for reference. It allows more detailed and layered information particularly on specific topics e.g. anti fraud measures for which the Council might use data. There is also the bonus that the privacy statement in the forms should be shorter because diligent readers can be referred to a fuller notice on the Council's website. If an electronic form is involved, it can be hyperlinked on a phrase like 'data protection' or 'privacy'.
- 3.12 The Council has also received a number of Subject Access Requests during the year, all of which were met within the statutory time limit. 14 requests were received for access to personal data. 8 of these were from individuals requesting their own personal data; 3 from a third party requesting lawful authority for disclosure and 3 were from police forces conducting missing persons/murder enquiries. Individuals usually want to see their housing, housing benefit or council tax files.
- 3.13 One complaint was made to the ICO during the year but their findings concluded there was no breach of the DPA by the Authority.
- 3.14 It should be noted that, unlike requests received under FOI and EIR, under a DPA Subject Access Request, unlimited amounts of personal data can be required for a maximum fee of £10.00 once the individual concerned has satisfactorily proved their identity. Unlike FOI/EIR there is no provision in the DPA to treat someone as vexatious with respect to accessing their personal data.

4. IMPACT ON THE COUNCIL

- 4.1 All FOI and EIR requests are managed by IMD. In 2012, IMD alone spent over 850 hours (c.0.5FTE) dealing with FOI/EIR requests, with other services also spending significant amounts of time compiling responses. Demand continues to rise.
- 4.2 Demand for services related to Data Protection including fair processing notices, training and requests for disclosure of personal data also continues to increase, and the law can be expected to develop much further.
- 4.3 At present, the current level of service is being maintained, but if an increased demand from the public is stimulated by the Government's transparency agenda, or resources are reduced, the risk of performance dropping can only increase.

5. WHAT ACTIONS WILL BE TAKEN?

- 5.1 There is a continuing need to make Officers and Members aware of the FOI/EIR/DPA legislation.
- 5.2 FOI/EIR/DPA training has been included in the essential training for all Officers as part of their Personal Development Plan. Training is a standing item on the Information Governance Liaison Group.
- 5.3 Interactive online training has been setup to give self-service training for Officers and Members, although it appears the take up of online training has continued to be slow, it is part of the essential training for all staff. The online DPA training package should improve monitoring capacity. A FOI/EIR course is available on the [e-learning zone](#).
- 5.4 There is an Information Governance Liaison Group which regularly meets to talk about all topics associated with Information Governance including, 'Freedom of Information Act' and 'Data Protection'. The terms of reference have been revised for this Liaison Group and these are attached in Appendix 2.

6. RESOURCE IMPLICATIONS

- 6.1 In August 2012, the Corporate Systems and Information Manager left the Council, taking up a new role at Cambridgeshire County Council. This role leads FOI & EIR at HDC. IMD assessed the options for this post, and presented a paper to COMT.
- 6.2 The paper proposed leaving the post vacant whilst the current investigations regarding shared service in IMD continued. Some of the savings created by this decision would be used to pay CCC to provide a limited 'expert' service to HDC to aid HDC's processing of FOI. This amounts to c.4days per month, the bulk of effort of processing FOI remains at HDC.
- 6.3 COMT approved this paper, and an agreement is now in place with CCC for this limited support. The net saving to HDC of this decision is c£25k over a 12 month period. Once the position with shared service in IMD is clear, this decision will be revisited, and the post may be filled (note the post does much more than FOI and these duties are currently being shared amongst existing resources - and some tasks have been placed on hold).

The impact of this decision is being kept under review, and at present is working successfully.

7 RECOMMENDATIONS

- 7.1 The Corporate Governance Panel are asked to note the findings of this report.

8. LIST OF APPENDICES INCLUDED

Appendix 1 – Relevant data and charts

Appendix 2– Information Governance Liaison Group Terms of Reference

CONTACT OFFICER

Contact Officers: **John Taylor – IMD Development Manager**
☎ 01480 388119
Barbara Morris - Data Protection Officer
☎ 01480 388022

Figure 1 - Breakdown of FOI Requests

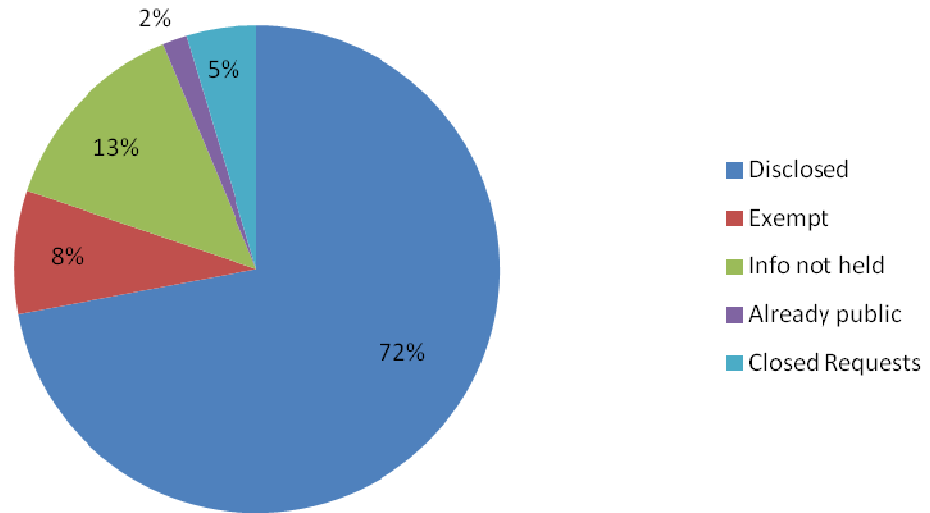


Fig 2 Cumulative Total Number of FOI & EIR Requests received each Month

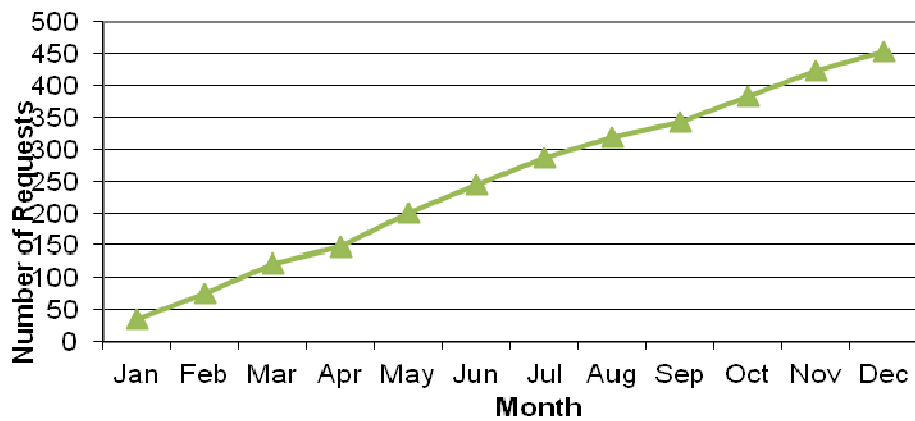


Figure 3 Number of FOI/EIR requests per department (if more than 20 requests)

Dept	Total requests	Late Responses
Democratic/ Administration	10	0
CCTV	1	0
Corporate Team (was Policy/ Chief Execs Office)	5	0
Customer Services	5	1
Env & Community Health	59	2
Environmental Management	8	2
Finance	12	2
Housing	19	2
HR & Payroll	24	0
IMD	23	4
Legal & Estates	20	2
Leisure	3	0
Licensing	16	0
Operations	25	1
Planning	46	2
Planning - S106	2	0
Revenues & Benefits	65	2
FOI Team	55	4
Multiple Depts	48	0
Other (Non HDC)	10	1
Total	456	25

**INFORMATION GOVERNANCE LIAISON GROUP
TERMS OF REFERENCE**

1. The Group's remit is to cover the areas of Governance dealing with data protection, Freedom of Information and Environmental Information Regulations and RIPA, Records Management, Information Security and any other information governance topic. This Group does not cover wider corporate governance issues.
2. The Group will help the organisation comply with its legal obligations within the remit of the Group.
3. The Group believe that information is a key business asset and they will endeavour to ensure that it is handled in a way which will help the organisation to achieve its corporate aims, priorities and objectives.
4. Definition of Information Governance – information governance is the specification of decision rights and an accountability framework to encourage desirable behaviour in the valuation, creation, storage, use, archival and deletion of information. It includes the process, roles, standards and measures that ensure the effective and efficient use of information in enabling an organisation to achieve its goals.
5. The Group will include a cross section of Officers nominated by Heads of Service covering all areas of service within the Council who will act as conduits providing updates on the Groups work to their teams and ensuring a cohesive approach to information governance within HDC.
6. The Group will identify and recommend training and development to the senior management team to ensure HDC complies with its information duties.
7. The Group will build up good relations and trust with all people that it deals with.
8. The Group will ensure that everyone in the organisation understands the importance of information rights and their own responsibility for delivering them.
9. The Group will review processes and procedures relating to data security, records management and compliance with legislation within its remit and will make recommendations to Senior Management Team via the Head of Democratic & Legal Services on any issues identified.
10. The Group will circulate relevant and succinct updates to HDC staff when relevant and necessary.
11. The Group will meet four times annually in order to deal with business.
12. Minutes of meetings of the Group will be kept and will be open to inspection.

Public
Key Decision - No

HUNTINGDONSHIRE DISTRICT COUNCIL

Title/Subject Matter: Corporate Business Continuity Planning
(2013 Annual Report)

Meeting/Date: COMT – 18/11/2013
Corporate Governance Panel – 27/11/2013

Executive Portfolio: Executive Leader

Report by: Corporate Business Continuity Coordinator
(IMD Service Manager)

Ward(s) affected: All

Executive Summary:

The BC Plan has been reviewed and updated as part of an annual review cycle. There were no incidents during the reporting year which required the instigation of the Plan. An exercise to test the robustness of the plan were undertaken and the lessons learned are being reviewed and, where appropriate, incorporated in the Plan before it is re-issued.

BC Coordinators will continue to incrementally improve the BC Plan over the next reporting period and a further exercise will be undertaken.

The annual budget for the BC activity is being reduced to £3k pa.

Recommendation(s):

COMT/Corporate Governance Panel is invited to comment on the contents of the report.

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1. PURPOSE

1.1 The purpose of this paper is to:

- a) Inform the Panel of the progress that has been made in planning for Corporate Business Continuity since the last report in December 2012;
- b) Review the BC exercise that was undertaken in August/September 2013; and,
- c) Report on BCP incidents since December 2012.

This paper describes the processes around the development and maintenance of the **Business Continuity Plan (BCP)** but does not include the detail of the Plan itself.

2. BACKGROUND

- 2.1 Responsibility for updating & maintaining the **Business Continuity Plan (BCP)** (previously the **Service Recovery Plan**) was assigned to the IMD Service Manager approximately 2 years ago after the inadequacy of the Service Recovery Plan was highlighted in an audit report in 2010/11.
- 2.2 There followed substantial work to re-establish the BCP team drawn from each service and the BCP was rewritten.
- 2.2 BGG Associates, who specialise in the areas of Emergency Planning and Business Continuity, reviewed the draft BCP against the British Standard for Business Continuity BS25999 in September 2012.

3. PROGRESS SINCE THE LAST REPORT TO THIS PANEL

- 3.1 The BGG report highlighted a number of issues which formed the BCP team's Improvement Plan for the current year. Two issues of particular note were:
 - a) Identification of Alternative Accommodation
 - b) Determination of a "definitive" set of priority services elements

3.2 Alternative Accommodation

- 3.2.1 In the event of a serious incident one or more of the Council's buildings (or part thereof) may become uninhabitable. Under these circumstances alternative accommodation would need to be found. This would be either for public access or for Officer/Member occupation.
- 3.2.1 For public access, agreement in principle has been reached with Huntingdon Library to offer alternative accommodation for face to face services if Pathfinder Customer Centre (CSC) was inaccessible. At present, if other CSCs were inaccessible, then the public would be referred to Pathfinder House. Due to the availability of the CPSN¹ data network it would be feasible to operate most, if not all, of HDC application systems from other CPSN nodes

¹ CPSN – Cambridgeshire Public Services Network – is a pan-Cambridgeshire (soon to be extended into Northamptonshire) data communications which allows connected "nodes" (typically a public sector building) to communicate with every other node on CPSN. For HDC the majority of Council-owned buildings are connected to CPSN including Pathfinder, Eastfield, the Leisure Centres. For those buildings **not** connected directly there is an intermediate link in place to a CPSN node.

(such as the Library). This arrangement needs to be formalised and tested over the next reporting period.

- 3.2.2 For alternative Officer/Member occupation, discussions have been held with the MAC (Making Assets Count) team although no formal agreement has yet been reached. However, due to the large number (>400) of CPSN nodes within Cambridgeshire, in the event of a serious incidents there would be a wide variety of possible alternative accommodation options that could be considered.
- 3.2.3 Within HDC's own estate a table has been drawn up which lists a number of building facilities eg capacity, availability of catering facilities, network access points, WiFi etc. and this is being completed for each building. This should allow the BC coordinator to make flexible decisions around alternative accommodation depending on the circumstances of the incident.
- 3.2.4 A further option is to allow Officers to work from home via a standard internet connection. At present this facility is limited both in terms of the numbers of concurrent connections (50) and also the range of systems available. A priority system would be imposed in case of an incident. The desktop virtualisation project – expected to begin roll-out in 2014/15 - would greatly reduce these two restrictions.

3.3 **Priority Service Activities**

- 3.3.1 Each service has identified and ranked its own priority activities depending on the time frame of the incident ie within 24 hours, within 7 days and within 30 days. A workshop was held for service BC Coordinators to discuss and agree a pan-Council priority list for public facing service elements. The list isn't to be followed rigidly but acts as a guide for the corporate BC coordinator in the event that resources need to be prioritised during an incident.

3.4 **BC Exercise**

- 3.4.1 During August and September an exercise was facilitated by BGG. This was the first time that the BC Plan had been “used in anger”. Participants included most of the service BC Coordinators and their deputies; their positive comments demonstrate the value of the exercise and it is planned that an exercise will be held annually to help ensure the BC Plan remains a “living” document.
- 3.4.2 The BGG report is included in Annex 1. A number of issues were identified with the Plan and these are being addressed (see Appendix 1 within the Annex).

- 3.5 **Other activities.** BC Coordinators reviewed and updated their service BCPs and attended 1-2-1 sessions with the corporate BC Coordinator to ensure consistency and completeness across the plans. Once the updates have been finalised and signed off by their respective Heads of Service then the full Plan will be re-issued. Quarterly meetings of the service Coordinators are held to discuss specific issues and maintain awareness of the Plan.

4. **BC INCIDENTS DURING THE REPORTING YEAR**

- 4.1 There were no incidents during the year which required the instigation of the Plan. However, there was proactive communication between Coordinators

and COMT to share information regarding the Council's response to snowfall on a number of occasions.

- 4.2 There were a number of partial IT failures during the year which were individually recorded and analysed to help avoid re-occurrence. For example, loss or disruption to network connections to various sites – notably the Call Centre and Ramsey Leisure Centre. There was also disruption to the EDM system and, separately, to the web site and the Benefits Application e-Form.

5. KEY RISKS

- 5.1 The Corporate BC Coordinator (CBCC) role, if fully undertaken, can be quite time consuming during the annual update cycle and this detracts from other important Service Manager roles – in particular ensuring that the ICT BC Plan is fully specified and tested.

6. RESOURCE IMPLICATIONS

- 6.1 Apart from officer time the only expenditure has been the BC exercise workshop and accordingly the annual budget for the BC activities will be reduced to £3k from 2014/15.

7. LIST OF APPENDICES INCLUDED

Annex 1 - Business Continuity Planning Workshop

BACKGROUND PAPERS/REFERENCES

- A) CORPORATE BUSINESS CONTINUITY PLANNING (2012 ANNUAL REPORT)
- B) BUSINESS CONTINUITY INTRANET SITE:

<http://teams.huntsdc.gov.uk/imd/BusinessContinuity/default.aspx>

CONTACT OFFICERS

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Kate Adams, IMD Support Team Officer x8173



Huntingdonshire District Council

Business Continuity Planning Workshop

Post Training Report prepared by BGG Associates

13th September 2013

BGG Associates Limited
St. John's Innovation Centre
Cowley Road
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01533 779213



■ Introduction

Huntingdonshire District Council is committed to developing and maintaining a prepared and resilient organisation to ensure that it is ready for any business interruption or emergency situation that may occur, both internally and/or externally, that threatens its ability to exercise its civil protection and/or ordinary functions, as required by the Civil Contingencies Act 2004.

Following updating of the Council's Business Continuity Plan the Council commissioned BGG Associates, specialists in the fields of emergency management and business continuity, to organise and deliver two training workshops designed to test the draft Plan and provide training for members of the Corporate Business Continuity Team (CBCT).

All attendees confirmed that in their view the workshop objectives were fully met and they all rated the session as 'very good' or 'good'.

The workshops identified a number of learning / action points and these are set out at the end of this report in Appendix 1. (In preparing the exercise we have spotted a few minor typos in the Draft Plan and these are detailed in Appendix 2).

■ Workshop Objectives

The objectives set for the workshops were:

- To provide an opportunity for Council managers to familiarise themselves with the Council's Corporate Business Continuity Plan and their role within it.
- To test the Council's Corporate Business Continuity Plan and the internal service management arrangements.
- To identify learning points which can lead to further improvement of the Council's business continuity arrangements.

■ Attendance

The first workshop on the 29th August was attended by:

Name	Role
Chris Hall	BC Lead
Amanda Burns	Customer Service
Paul France	One Leisure
Nicky Daish	Financial services
John Taylor	Information Management
Brian Bentley	Environmental Management
Neil Coleman	Planning Services
Tracy Elwood	Operations
Wayne Channon	Payroll
Anthony Roberts	Legal, administration and Democratic Services
Kate Adams	Business Continuity
Roger Clark	Emergency Planning

Unfortunately two attendees were unable to come:

Jackie McCarter	Payroll/LGSS
Howard Thackray	Corporate Team

The second workshop on the 12th September was attended by:

Name	Role
Paul Jose	BC Lead
Jon Collen	Housing
Kathryn Sexton	Customer Service
Michelle Schwick	One Leisure
Clive Mason	Finance
Howard Thackray	Corporate Team
Andrew Howes	Information Management
Ian Medicott	Planning Services
Richard Hollingsworth	Environmental Health
Lisa Morris	Payroll/LGSS
Karen Pauley	Legal, administration and Democratic Services
Laura Pearson	Business Continuity
Steven Howell	Emergency Planning
Chris Hall	Head of Information Management (Observer)
Kate Adams	IMD Support Officer (Observer)

Unfortunately two attendees were unable to come:

Gerry Ryan	Environmental Management
John Craig	Operations

Workshop Content

The workshop started with a short presentation to ensure that all attendees were familiar with the contents of the draft plan and was followed by *Exercise Vulcan*.

Workshop Programme

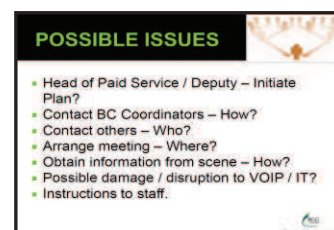
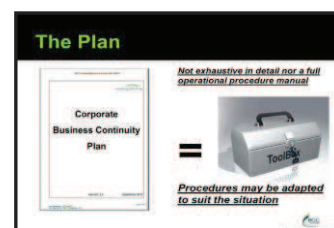
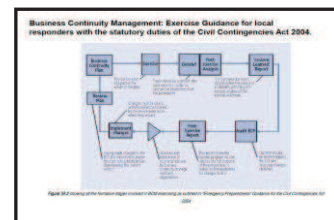
09.00	Coffee and Registration
09.15	Introduction and Summary of Business Continuity Plan
09.50	Exercise 'Vulcan' Commences
10.45	Coffee Break
12.15	Exercise End
12.30	Hot Debrief
13.00	End

Exercise Vulcan was a scenario in which Pathfinder House was severely damaged by fire requiring a relocation of the Council's services.

The scenario ran from the initial alert, through the invocation of the Corporate Business Continuity Plan and challenged the Corporate BC Team to manage the first 7 hours of the response.

The exercise culminated in the Team providing a briefing for the Head of Paid Service.

Following the exercise a Hot- debrief was held to identify learning points (See Appendix 1).



■ Assessment of the Workshops

At the end of the workshop participants were asked for feedback on their learning and their assessment of the event itself.

Learning Points:

(Please identify what you consider to be the three most important learning points identified today)

- Contact details for officers and the contact process.
- How the BC team should lead.
- Relevant information to contribute to process.
- Greater understanding.
- I am expected to be a member of the BC team in an actual emergency!
- Understanding your own element of the BCP.
- Key points to start the process.
- Role of the group.
- Team work.
- Need for Team Work.
- How the BC 'Group Dynamic' works.
- Understanding where my service can fit into the Corporate BCP.
- How team fits and works together.
- Working together as a team – interesting dynamics.
- Good to work with BCP Team.
- Involvement of Corporate Office/Comms.
- Thinking on your feet.
- To ensure I have a better knowledge of the BCP.
- Gained an awareness of how the BCP and emergency planning process interconnect.
- External events and implications for BC procedures.
- Uncertainty and expectations of current systems.
- Continuity between Emergency Planning Team i.e. Business Continuity Team.
- That a strong Chairman is needed.
- That a clarity of intent and a consensus of action should be achieved ASAP.
- That it is easy to deal with the immediate feature at the expense of longer term objectives.
- Need to record actions.
- Record all issues and actions.
- Active response process on white board.
- Issues/actions table is very helpful to be able to see wood for the trees.
- Need more than one 'loggist'.
- Clear logging of incident and actions.
- Action boxes on action sheet need to be bigger.
- Accuracy identifying service priorities.
- To clarify team roles in an emergency scenario.
- To put the paper plan into real practice and test out the documents i.e. log sheets.
- To highlight areas of missing information in the plan and prompt BC team to improve the plan in these areas.
- Effective communication to all stake holders.
- Communication.
- Communications.
- Make sure Comms plan is visible.
- Comms need to be clearer how info is cascaded & what the message is.
- Communication – how to tell staff etc.
- What important messages/actions need to take place in the event of an incident/emergency.
- To understand how important communication is.
- Good communication.

- Lots of people will ask for IT immediately – be ready!
- IT what happens if we lose the server room.
- Best to delegate.
- Better understanding of my role as Deputy.
- Seeing the process in action.
- Seeing what works.
- Identifying 'holes'.
- Testing the Plan and finding gaps to consider and fill.
- Make sure the BCP is up to date.
- Banking arrangements.
- Cheque stock
- Printout of suppliers / HB – contacting suppliers / landlords etc.
- Refreshing the BC process and action plan.
- Plan review required for minor points.
- Customer Services – move elsewhere.
- Contact for HR to be updated.
- Service Plan for HR?
- Familiarise myself with the Plan.
- Run through of the Plan very useful.
- Work to be done internally for IT BCP.

Training and Support:

(Please identify any areas related to business continuity emergency management in which you would like further training or support)

- Learning how the emergency plan team operates.
- Continuation of training exercises.
- I feel it would be worthwhile regularly testing the plan and reviewing it
- Ongoing refreshers.
- Need better understanding of the fine detail of network and VOIP infrastructure.
- Loggist training.
- Loggist training.
- Loggist training – hard to take notes, can't log information and actions.
- Minute taking.

Did the event fulfil the aim and objectives?

OBJECTIVE	YES	NO
To provide an opportunity for Council Managers to familiarise themselves with the Council's Corporate Business Continuity Plan and their role with it.	24	0
To test the Council's Corporate Business Continuity Plan and the internal service management arrangements.	24	0
To identify learning points which can lead to further improvement of the Council's business continuity arrangements.	24	0

Overall assessment of the event:

Very Good	Good	Weak	Poor
13	11	0	0

Any other remarks:

- Thanks, I have enjoyed the day!
- Very useful session.
- I have a much better understanding of what's in the Plan.

- I really enjoyed the experience!
- Thank you for the training I found it really useful.
- Thanks.
- Thank you a well run and valuable training exercise.
- Very helpful.
- One of the best things I have done recently.

■ Feedback from Facilitators

In both exercises the Teams made full use of the Draft CBCP and it proved a very useful and effective vehicle for shaping the Council's response to the exercise scenario. Whilst a number of areas were identified where the Council's arrangements could be made more robust, this should not in any way detract from the very significant work that has been done to bring the Plan to its current stage. Overall the Plan stood up well and allowed the Teams to achieve a well structured response.

In both exercises the CBCCs used the Appendix A1 form to record the Initial Incident Assessment and summarised the known information effectively.

The initial CBCT activation arrangements were well considered by both CBCCs but the means to convey the message to the CBCT members lacked clarity and this should be reviewed to make the Plan more robust.

Both CBCCs decided to initiate the Plan in the absence of the HOPS – the Plan should be explicit that they, and other Heads of Service, have the authority to take this action.

In both exercises the Teams worked well and the CBCCs established effective working arrangements with good team chairing. Both teams got off to slightly slow starts – to some extent this is inevitable as the members of the team have to establish a modus operandi, however we considered that the CBCT could have benefited from having a pre-set agenda to provide a little more structure to the initial discussions.

In both exercises the Teams drew from the wide range of knowledge / expertise around the table. Where services were not represented this impaired the response of the Team to certain issues.

A common problem in both exercises was initially how to communicate quickly with staff that were based at Pathfinder House and what to tell them. There was a risk that staff who would be needed were being told to go home. It was also possible that Heads of Service would be giving different instructions to their team members. The challenge for the CBCC was to devise a communication strategy that kept operational options open and used effective communication channels.

The use of the summary chart for service priorities helped to provide a structure to the discussions and assisted the Teams in achieving a good focus on immediate service priorities.

In both exercises communications with Elected Members caused difficulties; a robust process to provide regular updates for Councillors needs to be devised. In the second exercise it was suggested that the Leader / Deputy Leader should be a single conduit for messages to and from other Councillors – we have seen this arrangement work well in other authorities.

The use of the whiteboard by both teams to record issues was helpful in keeping the teams focussed. In the first exercise there was greater clarity over the actions and also whether they had been completed.

In both exercises the log keepers found it difficult to take an accurate record and to keep a running

list of actions / issues. We recommend that there should be 2-3 loggists / support people identified for the CBCT.

Both logs were clear and well written. Because log sheets copied from the CBCP were used rather than log books the pages all bear the footer note Page 1 of 1. Pre-printed log sheets with consecutively number pages would help to ensure that pages do not get out of order and that they can be signed off at the end of the shift / incident. Log sheets should also include a box to record the name of the loggist so that an audit trail is established.

It was unclear in both exercises whether the evacuation arrangements for Pathfinder House would have been effective at the start of the day, when there may have been few staff available to carry out a 'sweep' of the whole building. It was also unclear to us as to how the liaison with NHS in the Civic Building would take place. The availability of copy building plans at Eastfield House was questioned in the second exercise. We suggest that the arrangements should be reviewed.

Taking both exercises together, there wasn't a completely consistent view on the robustness of the ICT back up arrangements and how quickly the servers could be switched over. We recognise that to some extent this is work in progress and would recommend that in the future the procedures are firmed up and fully tested.

In an incident of this type the role of the Council's insurers could be significant. The Insurers would want their loss adjusters on site ASAP and they would work with the Council to help minimise loss. It would be likely that the insurers would have useful contacts e.g. document recovery companies, temporary building suppliers, which could be utilised by the Council. We recommend that insurance company contacts and details of cover procured should be included within the CBCP.

Neither team made reference to inventories being available to help establish what might have been lost in the fire. If these are in place then they should be mentioned in the CBCP as they can provide a basis for assessing what needs to be replaced.

In the given scenario close liaison between the Business Continuity response and the Council's Emergency Planning response would have been critical; this was achieved in the exercises but the provisions in the Plan could be more explicit in this regard.

Both teams were tested during the exercises and to some extent found the pressure challenging. In a real incident it would be important for the CBCT to be able to manage shift changes effectively; whilst Deputy BCP coordinators are listed responsibility for managing shift changes could usefully be identified in the CBCP.

Both Teams provided thorough briefings for the HOPS and covered all the main issues requested.

■ Conclusions

The assessment of the workshops by the participants suggests that the structure, content and presentation were effective and that the objectives of the training were fully achieved.

Participants engaged fully and appeared to find the sessions very productive.

The Debrief Session at the end of each workshop identified a number of useful learning / action points to be carried forward – See Appendix 1.

We would like to record our thanks to Kate Adams who helped to set up the workshop.

	Learning Points	Recommended Follow up Actions
1	Copies of plans of the Council's buildings are held at Pathfinder House in the Emergency Grab Box and also at Eastfield House and at St Ives.	Check accuracy of this and include reference in Section 17.
2	Arrangements for Managers to contact all staff would be beneficial.	Consider establishing a 'call cascade tree' and contact centre number for staff to call.
3	The loss of Pathfinder House could be caused by a number of scenarios and there would be benefit in having a pre-prepared Communications Plan.	Include within Section 7 of the Corporate BCP (CBCP) a draft Communications Plan for loss of Pathfinder House.
4	Emergency Planning response in many scenarios needs to be more closely linked to the BC response.	Include within the Corporate BCP references to Emergency Planning response and in particular: <ul style="list-style-type: none"> • LAIO role to report back from the scene. • Emergency Operations Centre at Eastfield House and resources which it could provide. • Media coordination with other agencies where emergency response is activated. • How staff and buildings will be prioritised between BCP and Emergency response (e.g. Rest Centres). • Review role of CCTV in the activation.
5	There was a lack of clarity over how the CBCT will link to Heads of Service and the delegated authority held by members of the CBCT.	Clarify authority of CBCT members and how links to Heads of Service would be maintained to ensure that corporate decisions do not conflict with decisions being made within services. Ensure senior management support.
6	Both CBCCs activated the Plan in the absence of the HOPS.	The Plan should explicitly allow for CBCC / HOS to activate the CBCP.
7	With capacity for 75 people to work from home and log in but 200 people registered to do this the system could become overloaded.	Consider arrangements to manage excessive demand for home working e.g. shift arrangements.
8	Arrangements were unclear for liaising with NHS should there be an incident impacting on their premises at Pathfinder House.	Review liaison arrangements with NHS and include contacts within CBCP. Share BCP arrangements to ensure they are compatible.
9	It was suggested that fire arrangements for sweeping building to ensure it is empty in case of fire only effective within working hours – issue of what happens out of hours was unclear.	Review arrangements for checking building out of hours in the event of a fire.
10	It was unclear what process should be followed to notify next of kin in a case of	Include notification procedure within CBCP.

	fatality / injury of a member of staff.	
11	Two log formats included within the Plan. CBCT did not have ready access to log sheets.	Standardise log sheet format and provide pre-printed sheets to CBCT members. Consider enlarging 'action boxes' and adding box for loggist name.
12	The CBCT meeting lacked some structure at the start and the CBCT spent some time discussing matters in a low level of detail (e.g. catering).	Draft CBCT Initial Agenda to include in the CBCP.
13	Purchasing supplies and equipment may have been difficult.	Include arrangements for using Purchase Cards and extending limits within CBCP.
14	Summary Chart tabled at exercise showing 24 hr Priorities List was very useful in informing discussion.	Include summary chart within CBCP.
15	The use of a whiteboard to list issues helped focus discussion.	Provide pre-printed flipchart sheets to be used to keep track of issues and maintain a record. Ensure that CBCT has a general loggist and an Issues Loggist.
16	Allocation of available accommodation was a challenge for the CBCT.	Complete work to populate Appendix A8. Include any shared arrangements with the Library and NHS.
17	Without the availability of the Leader communications to Members were limited.	Review arrangements for communicating with Members during an incident. Provide advice to Members about statements to the media.
18	The CBCT had difficulty keeping regular communications going with Members, Staff, the Public and other agencies.	Allocate communications lead on CBCT whose role it is to ensure that regular messages are issued. Chair to set frequency.
19	There was a lot of reliance on using the website for communicating with customers. Customers without internet access would be excluded.	Ensure that website and local radio are used fully to communicate with customers.
20	Unclear how long the stock of cheques at Eastfield House would last.	Review stock of chequebooks and increase if appropriate given lead in time of 15-20 working days to print new stock.
21	Contact arrangements for bank could be lost.	Ensure bank contact arrangements are included in CBCT.
22	Difficulty in contacting suppliers and landlords.	Provide back-up arrangements for suppliers and landlords contact details.
23	Contact for HR out of date.	Update HR contacts.

24	No SBCP for HR.	Provide HR BCP linking to LGSS.
25	Some of the Service Specific BCP Plans are incomplete.	Complete Service Specific BCP Plans.
26	Arrangements for switching servers to back up servers were uncertain.	Review IT BCP arrangements and test server switchover arrangements.
27	Need for constant reviews and updates.	Establish and resource programme of regular updates of the CBCP.
28	There was a lack of clarity over the Council's insurance arrangements.	Include details about Council's insurance cover within the CBCP.
29	There was a lack of clarity over communications with the Unions.	Review communication arrangements within the CBCP for ensuring unions /Staff Council are adequately informed.
30	There was no reference to inventories of assets within Pathfinder House.	If inventories exist then consider including reference to them within the CBCP.
31	If the exercise had been more prolonged it would have been necessary to manage a shift change for the CBCT.	Consider including shift change management responsibilities in the CBCP.
32	Delegates requested further training.	Develop arrangements for future training and exercises.

Whilst preparing the exercise we noted a few minor typos in the Draft Plan:

Log sheet in Service BCP has an extra column for expenditure not in the Log Sheet Appendix A3.

Appendix A10 has Malcolm Sharp listed not Joanna Lancaster. Terry Parker is also listed.

Last Para of: 3 Roles and Responsibilities - is out of context. Also refers to Terry Parker.

12. Emergency Purchasing Arrangements – change ‘extracting’ to ‘extract’

Suggest change heading of 13. Service Area Recovery Plans to ‘Service Specific BCP’ for consistency.

Appendix A7iii – rogue arrow head below ‘Issue’ box.

Reference in Glossary to ‘EBCT’ but this is not referred to in the Plan.

Contents shows Appendix A11 as ‘Proforma’ – add for ‘Emergency Purchases’.

Public
Key Decision - No

HUNTINGDONSHIRE DISTRICT COUNCIL

Title: Annual Review of Whistleblowing Policy and Procedure
Meeting/Date: Corporate Governance Panel – 27 November 2013
Executive Portfolio: Resources: Councillor J A Gray
Report by: Internal Audit Manager
Ward(s) affected: All Wards

Executive Summary

The purpose of whistleblowing law is to protect individuals who make disclosures of wrongdoings in the public interest without fear of reprisals from their employer.

The whistleblowing policy and procedure was introduced in 2000 in response to the Public Interest Disclosure Act 1998 (PIDA). Both documents are reviewed annually to ensure they continue to be fit for purpose.

Sections 17-20 of the Enterprise and Regulatory Reform Act 2013 (ERRA) introduced a number of changes to the PIDA.

Section	Change introduced
17	narrows the definition of 'protected disclosure' to those that are made in the 'public interest'
18	removes the requirement that a worker or employee must make a protected disclosure 'in good faith'. (Employment tribunals will have the power to reduce compensation by up to 25% for detriment or dismissal relating to a protected disclosure that was not made in good faith).
19 & 20	introduce protection for whistleblowers from bullying or harassment by co-workers. This amendment introduces personal liability for co-workers who victimise whistleblowers. Employers can then be held vicariously liable for these employees unless they can show that they took reasonable steps to prevent victimisation.
21	enables the Secretary of State to extend the meaning of 'worker' for the purpose of defining who comes within the remit of the whistleblowing provisions.

The Government considered that before ERRA, whistleblowing was open to abuse. Employees were able to make whistleblowing claims around spurious issues (such as the terms of their employment contracts) as it did not impose a requirement that the alleged disclosure should relate to a public interest. ERRA now makes this a requirement.

“Public interest” has not been defined by the ERRA, it is likely that Employment Tribunals and case law will determine the definition.

The updated whistleblowing policy and procedure are attached. The changes that are being proposed are highlighted. Following approval, the Council's website will be updated to reflect the changes.

Financial implications

There are no financial implications arising from the report. .

Legal implications

The Council is not required to have a whistleblowing policy.

The PIDA deals with whistleblowing concerns raised by workers and contractors. The Council's policy and procedure were originally written so that they explained how any concern raised (regardless of by whom) would be dealt with. This decision was taken so as to encourage everyone, not just workers and contractors, to raise issues in confidence via the various whistleblowing routes available.

Whilst the changes introduced by the ERA have made some changes to employment law they do not require the policy or procedure to be fundamentally changed. The protected disclosure status has been made clearer.

An issue that is not included in the updated policy refers to S19 of the ERA. This states that an employer can be held liable (vicarious liability) for any detriment inflicted on the whistleblowing worker by his or her colleagues.. The employer would have a defence if it can demonstrate that it took all reasonable steps (such as compliance with its whistleblowing policy) to prevent such detriment being inflicted on the whistleblower. Compensation for a successful whistleblowing claim against an employee is unlimited and could therefore in some instances be quite substantial.

Recommendations:

It is recommended that the Panel :

1. Approve the revised whistleblowing policy and guidance.

BACKGROUND PAPERS

Public Concern at Work website

CONTACT OFFICER

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Huntingdonshire District Council Whistleblowing Policy

Introduction

Huntingdonshire District Council recognises that those that it employs and provides services to are often in the best position to know when the interests of the public are being put at risk. They can act as an early warning system on matters of health and safety or help to uncover fraud and mismanagement.

The Council also recognises that these people may not wish to express their concerns for a number of reasons. They may think it is disloyal to do so or they may fear reprisals, or they may not expect any action to be taken, or they may not know the best way to proceed. They may therefore find it easier to ignore their own concerns, or to “blow the whistle” to someone outside the Council.

The Council wants to build an environment of trust and openness so that people are prepared to whistle blow knowing that their concern will be treated confidentially and investigated appropriately. This Policy has been prepared in response to the Public Interest Disclosure Act 1998 and other legislation¹ and has been formally adopted by the Corporate Governance Panel on behalf of the Council.

Policy Statement

The Council is committed to the highest possible standards of openness, probity and accountability and to dealing with all fraud and other forms of malpractice reported.

Any employee, contractor, member of the public or any other organisation with serious or sensitive concerns about any aspect of the Council’s work shall be encouraged to come forward and voice those concerns at an early stage without fear of victimisation, subsequent discrimination or disadvantage. These concerns may relate to issues that are occurring now, took place in the past, or are likely to happen in the future.

All concerns received will be treated in confidence, examined and investigated in accordance with this policy.

Any employee or contractor who raises a concern shall be treated as though they are making a ‘protected disclosure’ (within the meaning of employment legislation)², if the concern is connected with any of the areas listed under the following section and has been raised in the public interest.

¹ Enterprise and Regulatory Reform Act 2013

² Employment Rights Act 1996

Concerns covered by the Policy

The policy is intended to deal with genuine concerns of a serious or sensitive nature ~~concerns~~ about wrongdoings in the following areas:-

- fraud and corruption
- any customers that we deal with, particularly children, being mistreated or abused
- ~~unauthorised use of Council money~~
- an unlawful act
- ~~any danger to the~~ health and safety ~~of any individual has been, or is likely to be endangered~~
- damage to the environment
- discrimination of any kind; ~~or the~~
- ~~the deliberate breaching of a Council policy or official code or regulation;~~
~~and~~
- deliberate concealment of any information that falls into any of the areas above.

~~This list is indicative, not exhaustive.~~

Concerns not covered by the policy

The Council wants all serious or sensitive concerns to be raised.

Any concern that falls under another Council policy or procedure will be investigated in accordance with that policy, for example the grievance or complaints procedure. Concerns involving Councillors will be referred to the Council's Monitoring Officer.

If the concern refers to an issue that is not in the public interest, not covered by this policy or any other Council policy or procedures (e.g. an employee not performing their duties correctly whilst under the influence of alcohol or non-prescribed drugs) it will be investigated as though it was received under this policy.

Implementing the Policy

The Council shall take appropriate action to publicise the policy so that all potential whistleblowers:

- feel confident that they are able to contact the Council and raise their concerns about Council practices
- realise that concerns should be raised about any employee, councillor, supplier or anyone who provides services to the public on the Council's behalf
- are aware of the different ways they can inform the Council of their concerns
- understand that concerns will be received in good faith and taken seriously
- are aware that anonymous concerns may not be investigated

- understand that they will receive a response to their concerns and are aware of how to pursue them further if they are not satisfied with the response
- are reassured that they will be protected from victimisation, subsequent discrimination or disadvantage

A guidance note shall be made available setting out the actions that will normally be taken when a concern is received.

Investigating Officer

All whistleblowing concerns received under this policy shall be reported immediately to the Audit & Risk Manager. He will be responsible for reviewing the concern, deciding upon the action to take, leading and directing investigations, preparing any subsequent reports and liaising with the person raising the concern.

Safeguards

The identity of the person raising the concern will remain confidential. If disclosure is required for any reason then this will be discussed with the person concerned.

The Council will not tolerate the harassment or victimisation (including informal pressures) of any person who has raised a concern. The Council's disciplinary procedures will be used against any employee who is found to be harassing or victimising the person raising the concern or who has disclosed the name of a whistleblower to any person other than the Audit & Risk Manager or the Managing Director of the Council.

Whistleblowing Externally

Whilst the Council would like all concerns to be raised with it initially, it recognises that the Public Interest Disclosure Act 1998 allows for concerns to be made to "prescribed persons". The guidance note will provide information on external whistleblowing.

Monitoring and Review

The Head of Legal and Democratic Services will be responsible for monitoring the implementation and effectiveness of the Policy and the guidance note. This will include an annual review, and an annual report to the Chief Officers' Management Team and the Corporate Governance Panel.

End.

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Huntingdonshire District Council Guidance for Whistleblowers

Introduction

This guidance explains how the Council will react when it receives a concern under its whistleblowing policy. You can read the Council's whistleblowing policy on its website or request a copy from the Head of Legal and Democratic Services. His telephone number is listed at the end of this note.

We realise that for some individuals it will take a great deal of courage to raise a concern. Please be assured that your concern will be treated in confidence at all times and that we will not tolerate the victimisation of anyone who reports an issue to us.

Concerns received will probably require different responses. This guidance is intended to provide you with an idea of the steps we will generally follow when a concern is received.

The guidance applies to all employees, suppliers, contractors and members of the public who wish to raise a serious or sensitive concern about a potential criminal offence, breach of the law, health and safety or environmental issue.

What you need to tell us

If you have a concern then please raise it with us sooner rather than later. We would much rather be told about a concern and investigate it, even if the investigation shows your concern was unfounded, than not know about the matter in the first place.

It is best if your concern is raised in writing and that you provide your name and some contact information. A telephone number is sufficient.

When you first raise your concern we will treat it in good faith and accept that it is true. You should however try and avoid making your concern anonymously. If your concern is justified, but made anonymously, we may still be unable to investigate it if we can't contact you to obtain further information. Please think carefully about remaining anonymous.

You need to tell us as much as you can about your concern. Please try and provide some background information and all the names, dates and places that are relevant. If you have any documentary evidence to support your concern then please tell us about that as well. The more information you are able to provide the easier it will be for us to investigate your concern.

If you are uneasy about putting your concern in writing then contact us using one of the methods below and ask for a meeting, which doesn't have to be at the Council's

offices. If you wish you can bring other people to the meeting if that will reassure you.

~~It is important that whichever method you use to make your concern, you make it clear that you are raising the issue as a whistleblower. This gives you additional statutory rights.~~

How to contact us

There are a number of ways you can contact us.

Complete the electronic form that is available on the Council's web pages at <http://www.huntsdc.gov.uk/>. Type whistleblowing into the search engine or go to W on the A to Z listing, and then select whistleblowing

Send an email to whistleblower@huntsdc.gov.uk

Leave a message on the 24 hour telephone hotline, 01480 387080.

Write a letter, clearly marking the envelope Strictly Private & Confidential to:

Internal Audit & Risk Manager
Huntingdonshire District Council
Pathfinder House
St Mary's Street
Huntingdon
PE29 3TN

No matter which method you use to contact us, all the information you provide will be treated in confidence.

Who will investigate your concern

All concerns are passed to the Council's Internal Audit & Risk Manager as soon as they are received. All electronic forms and emails together with the telephone hotline are accessible only by him. Post that is marked 'strictly private and confidential' will be passed unopened to him.

What we will do

Once you have told us of your concern the Internal Audit & Risk Manager will look into it to assess initially what action should be taken.

The initial assessment may involve an internal inquiry or a more formal investigation. Please be assured that the number of people who are made aware of the concern will be kept to a minimum.

If he believes that your concern is valid, but should not be classed as a whistleblowing concern, e.g. a potential breach of planning consent, then he may pass your concern to a member of staff in the relevant department to investigate. Your concern will be passed on anonymously, your details will remain confidential.

Depending on the outcome of the initial assessment we may decide that your concern is valid but that we have insufficient information to continue with the investigation. If this happens we will try and obtain further information to allow us to continue with the investigation. If this is not possible and no other option is available to us, we may request you to gather additional information on our behalf. You are under no obligation to do this however.

Once we have validated your concern and have sufficient information to continue, your concern will be investigated.

All meetings, decisions and actions taken in dealing with the concern will be recorded in writing.

Letting you know what we're doing

If you have provided contact information you will be told who is handling the matter, how you can contact them and whether your further assistance may be needed. If you request it, we will write to you summarising your concern and setting out how we propose to handle it.

When the investigation has been completed we will contact you again with as much detail about the investigation as we are able to provide. Please note that we may not be able to tell you the precise action we have taken, as this may infringe a duty of confidence owed by us to someone else.

What if we take no action

If after undertaking the initial assessment and speaking with you, we feel that we do not have sufficient information to undertake an investigation into your concern then we will tell you. If you are unhappy about this, you should contact ~~one of the~~ Council's Managing Director or ~~Head of Legal & Democratic Services~~ ~~who~~ ~~They~~ will decide if any further action needs to be taken.

Maintaining confidentiality

We will do our utmost to protect your identity. If it has to be disclosed to allow us to undertake disciplinary or other more serious action against any wrongdoer, then we will discuss this with you. In some circumstances, especially if the Police are involved, we may be legally obliged to disclose your identity without your consent. Again, we will discuss this with you.

If you feel that you are being harassed or victimised because you have raised a concern then you must let us know. ~~We will take action to protect you as long as we believe that your concern was raised in good faith.~~

Who to report to externally

If you sincerely believe that, by raising your concern with us, you will be subject to victimisation or reprisals of whatever sort, or that evidence to support your concern will be destroyed, then you should raise the matter with an external organisation, known as a “prescribed person”.

If you wish to take this course of action, but are unsure of what to do then please contact either the Internal Audit & Risk Manager or the Head of Legal and Democratic Services. They will be able to advise you on what you need to do, without asking for details of your concern.

Alternatively you could contact ~~the Audit Commission on their confidential public interest disclosure line 0845 052 2646~~ or the Council’s external auditors, PriceWaterhouseCoopers on 01223 552316.

When raising a concern externally remember to make it clear that you are raising the issue as a whistleblower. This gives you additional statutory rights.

Further information and advice

If you want further information or advice about whistleblowing then please contact either:

David Harwood, Internal Audit & Risk Manager ☎ 01480 388115

or

Colin Meadowcroft, Head of Legal and Democratic Services ☎ 01480 388021

Public
Key Decision - No

HUNTINGDONSHIRE DISTRICT COUNCIL

Title/Subject Matter: Overview and Scrutiny Co-opted Members
Meeting/Date: Corporate Governance Panel – 27th November 2013
Executive Portfolio: Strategic Economic Development and Legal
Report by: Head of Legal and Democratic Services
Ward(s) affected: All

Executive Summary:

At the March 2013 meeting, the Panel noted that the Head of Legal and Democratic Services would be undertaking a review of the Overview and Scrutiny Panel's Procedure Rules, specifically the need for continued involvement of external co-opted persons. The review of Co-opted Members' involvement in Scrutiny has been completed and it is recommended that the Council ceases to co-opt individuals to the Overview and Scrutiny Panels on a permanent basis.

The financial implications of this report are minimal.

Recommendations:

That the Council is recommended to delete the following words from paragraph 2 of the Overview and Scrutiny Procedure Rules contained in the Constitution:

“Each Overview and Scrutiny Panel shall comprise two co-opted persons appointed for a four year period without voting rights. The co-opted persons shall not be paid an allowance.”

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1. WHAT IS THIS REPORT ABOUT/PURPOSE?

- 1.1 The purpose of this report is to acquaint the Panel with the outcome of the review of the external co-optees appointment to the Overview and Scrutiny Panels.

2. WHY IS THIS REPORT NECESSARY/BACKGROUND

- 2.1 The original co-optees' term of office expires in February 2014. It is necessary to determine whether they are to continue or introduce alternative arrangements.

3. OPTIONS CONSIDERED/ANALYSIS

- 3.1 Some other authorities co-opt individuals on a temporary basis to contribute to single studies. However, this could result in particular perspectives having greater influence on a Panel than others. Instead, it is argued that if all interested parties are able make submissions or present evidence, Members will be in a position to triangulate it against other relevant sources and make an objective judgment on the study aims and recommendations.

4. COMMENTS OF OVERVIEW & SCRUTINY PANEL

- 4.1 The Chairmen and Vice-Chairmen have been consulted and they support the recommendation.

5. WHAT ACTIONS WILL BE TAKEN/TIMETABLE FOR IMPLEMENTATION

- 5.1 The Co-opted Members currently are not involved in the Scrutiny Panel's work while the Facing the Future process is taking place. It had been intended they would resume their role in January 2014. If it is decided that they are no longer required, the Co-opted Members would be advised so that their terms of office would naturally end in February 2014. Two vacancies have not been filled because the review was taking place. A further vacancy has recently arisen. One Co-opted Member's term extends past February because he was appointed when a previous post-holder resigned. It is suggested that his term should finish at the same time as the others.

6. RESOURCE IMPLICATIONS

- 6.1 Co-opted Members are entitled to be reimbursed for travel and subsistence expenses incurred in undertaking their role. They claimed a combined total of £184.70 in 2012/13 and £140.40 in 2013/14.

7 REASONS FOR THE RECOMMENDED DECISIONS

- 7.1 The Co-opted Members' terms of office will expire at the start of 2014. The Head of Legal and Democratic Services has been asked to carry out a review of their involvement with the Overview and Scrutiny Panels. This has been done through consultation with the Chairmen and Vice-Chairmen of the Scrutiny Panels. It is intended that the Scrutiny Panels' studies will be conducted more like Select Committee investigations. Instead of making permanent appointments to the Scrutiny Panels, individuals who have specialist knowledge will be invited to provide evidence on particular study areas.

Recommendations:

That the Council is recommended to delete the following words from paragraph 2 of the Overview and Scrutiny Procedure Rules contained in the Constitution:

“Each Overview and Scrutiny Panel shall comprise two co-opted persons appointed for a four year period without voting rights. The co-opted persons shall not be paid an allowance.”

BACKGROUND PAPERS

Constitution

Reports and Minutes of the meetings of the Council held on 22nd April 2009 and 17th February 2012

Reports and Minutes of the meetings of the Overview and Scrutiny Panels held in February 2010.

CONTACT OFFICER

Tony Roberts, Scrutiny and Review Manager
01480 388015.

Agenda Item 9

Public

HUNTINGDONSHIRE DISTRICT COUNCIL

Title/Subject Matter: Officer Governance Working Groups

Meeting/Date: Corporate Governance Panel - 27 November 2013

Executive Portfolio: Executive Leader

Report by: Assistant Director (Finance and Resources)

Ward(s) affected:

Executive Summary:

This report outlines to the Panel how Chief Officers' Management Team are raising awareness of the importance of good governance and involving a variety of managers in ensuring that governance is at the heart of the Council's activities.

A number of issues were raised with the Panel in the external auditor's ISA260 report on the final accounts and value for money opinion. Some of these related to specific issues whilst mention was also made about a concern that there was also a cultural issue with compliance in some areas.

COMT have considered these issues and are introducing a system of working groups which will effectively address them. The Groups will be up and running by the end of November.

The approach is based on an Officer Governance Board consisting of COMT, the monitoring officer and the internal audit and risk manager. Reporting to this Board will be 6 working groups, each led by a Head of Service or Service Manager who has not got responsibility for that service area as part of their normal role. The working groups are:

- Risk
- Project Management
- Customers
- Culture and Compliance
- Finance
- Procurement

Annex A provides more detail on the main elements to be covered within each working group.

Annex B provides the generic terms of reference. The first task for each group will be to propose bespoke modifications to the Governance Board.

Recommendation:

That the Panel note the changes that COMT are introducing.

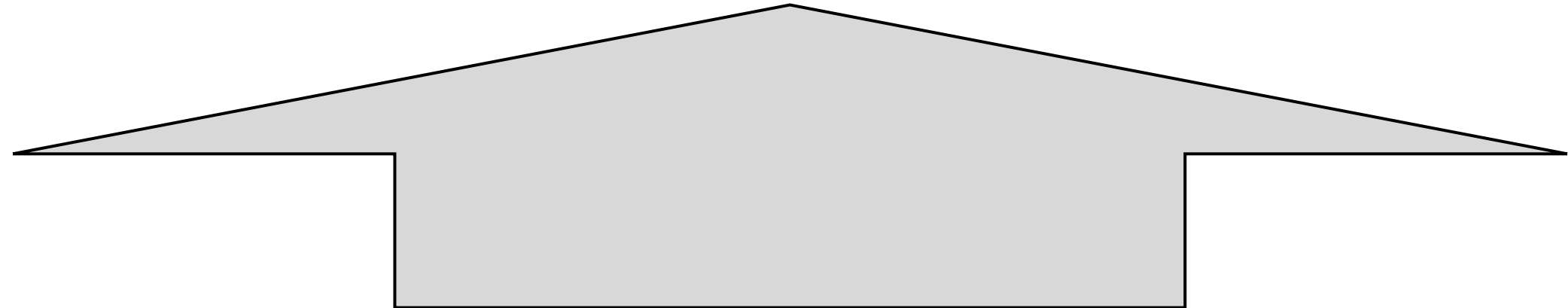
BACKGROUND PAPER: ISA 260

CONTACT OFFICER

Steve Couper Assistant Director (Finance and Resources)

☎ 01480 388103

GOVERNANCE BOARD



PROJECTS REGISTER
 Run by Corporate Office
 Highlights delays
 Highlights resource issues
 Highlights linkages



Risk	Project Management	Customers	Culture & Compliance	Finance	Procurement
Risk Management	Rules for Project Management	Customer Focus	Rules	Monitoring	Options
Health and Safety	Integration of projects	Channel Migration	Competency	Revenue	Systems
Risk Appetite	Resource Conflicts	Image	Equality	Capital	Compliance
	Post Implementation Reviews	PR	Ethics	Savings	
			Compliance		
			Monitoring the delivery of audit and Governance actions		
Delivery of audit and other required actions	Delivery of audit and other required actions	Delivery of audit and other required actions	Delivery of audit and other required actions	Delivery of audit and other required actions	Delivery of audit and other required actions
Training Advice	Training Advice	Training Advice	Training Advice	Training Advice	Training Advice



Chairman	Jo Lancaster	Colin Meadowcroft	Sue Lammin	Chris Hall	Eric Kendall	Julia Barber	Simon Bell
	Steve Ingram Steve Couper Colin Meadowcroft David Harwood	Appropriate managers/representatives from relevant services and Staff Council					

Generic Terms of Reference – Governance Board and Teams

Governance Board

Chairman: Managing Director

Membership: Assistant Directors, Monitoring Officer and Audit Manager.

The Board shall:

Define expectations and objectives and monitor performance in the nominated key areas (with the assistance of the Governance Teams) such that it is satisfied that it can provide with confidence, robust assurance to the Corporate Governance Panel on the delivery and effectiveness of the Council's governance, risk and internal control arrangements and functions.

Governance Teams

Chairman: Head of Service or Service Manager appointed by the Managing Director

Membership: Representatives at an appropriate level from relevant service or functional areas.

The Team shall, within their nominated area:

Identify and resolve any risks to compliance with the Council's agreed rules, procedures and processes.

Make or propose changes to the rules, procedures and processes where they consider that this will optimise the balance between sound and effective governance with cost.

Ensure that appropriate advice and training are made available to relevant staff.

Ensure that sufficient reliable information is collected to provide assurance on the soundness and quality of their area to the Governance Board.

Nominated Areas

Risk Management (including Health and Safety)

Project Management

Customer Focus (including channel migration, Image and PR)

Culture and Compliance (including Competency and monitoring the delivery of audit and governance actions)

Finance (Including the monitoring of revenue, capital and savings)

Procurement (including compliance)

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Public
Key Decision – No

HUNTINGDONSHIRE DISTRICT COUNCIL

Title/Subject Matter: Work Programme & Training
Meeting/Date: Corporate Governance Panel – 27 November 2013
Executive Portfolio: Resources: Councillor J A Gray
Report by: Internal Audit Manager
Ward(s) affected: All Wards

Executive Summary:

The anticipated work programme for the Panel for the next year is shown at Appendix 1.

Panel are asked to consider the work programme and decide what training they would like in preparation for the next or future agendas. Normally this training would be for 30-45 minutes immediately prior to the formal meeting but there may be occasions when a separate longer session would be more appropriate.

Training can be provided by appropriate officers, external audit or external trainers (subject to budgetary constraints).

Financial implications

There are no financial implications.

Recommendation(s):

It is recommended that Panel consider what training is to be provided prior to the January meeting.

Background papers

None

Contact Officer

David Harwood. Internal Audit Manager
Tel No. 01480 388115

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Anticipated Work Programme

29 January 2014

Internal Audit interim progress report
 Progress on introducing external audit recommendations
 Progress on issues raised in the Annual Governance Statement
 Review of the anti-fraud & corruption strategy
 Corporate Fraud Team investigation activity
 Whistleblowing concerns received
 National Fraud Initiative
 Internal Audit opinions

26 March 2014

Review of Council constitution
 Code of financial management
 Code of procurement
 Internal Audit Plan
 External Audit: Audit plan and grant claims
 Employee handbook/code of conduct
 Corporate Board and assurance mapping
 Risk register review

May 2014

Review of the internal audit service
 Internal audit annual report & opinion
 Effectiveness review of Licensing and Protection Panels

July 2014

Annual report - Feedback
 Preparing the Annual Governance Statement
 Corporate Board and assurance mapping

September 2014

Approval of the statement of accounts
 Approval of the Annual Governance Statement
 External audit – ISA 260 report
 Effectiveness of the Panel
 Risk register review

November 2014

Corporate Fraud Team investigation activity
 Whistleblowing : policy review & investigations
 Corporate Board and assurance mapping
 Annual reports – Freedom of Information
 – Business Continuity Planning
 Internal Audit progress report

In addition to the items listed above, reports may be submitted on an ad-hoc basis on

Awards of compensation	Employee's code of conduct
Ombudsman reviews	Money laundering and bribery
Accounting policies	National Fraud Initiative (expected Nov 2014)
External audit recommendations	Effectiveness reviews of Panels/Committees
Constitutional matters	Other governance matters (e.g. equality)

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By virtue of paragraph(s) 4 of Part 1 of Schedule 12A of the Local Government Act 1972.

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