

A meeting of the **CORPORATE GOVERNANCE COMMITTEE** will be held in **CIVIC SUITE 0.1B, PATHFINDER HOUSE, ST MARY'S STREET, HUNTINGDON PE29 3TN** on **WEDNESDAY, 17 JANUARY 2018** at **7:00 PM** and you are requested to attend for the transaction of the following business:-

**Contact  
(01480)**

## **APOLOGIES**

**1. MINUTES** (Pages 5 - 8)

To approve as a correct record the Minutes of the meeting held on 29th November 2017.

**A Roberts  
388015**

**2. MEMBERS' INTERESTS**

To receive from Members declarations as to disclosable pecuniary and other interests in relation to any Agenda Item.

**3. COMMUNITY GOVERNANCE REVIEW - GREAT AND LITTLE GIDDING PARISH COUNCIL** (Pages 9 - 10)

To consider a report by the Elections and Democratic Services Manager on the request by Great and Little Gidding Parish Council for a Community Governance Review.

**L Jablonska  
388004**

**4. LEAD AND DEPUTY INDEPENDENT PERSONS** (Pages 11 - 14)

To consider a report by the Elections and Democratic Services Manager and Deputy Monitoring Officer on the appointment of Lead and Deputy Independent Persons.

**L Jablonska  
388004**

**5. UPDATE ON CODE OF CONDUCT AND REGISTER OF DISCLOSABLE PECUNIARY INTERESTS** (Pages 15 - 22)

To consider a report by the Policy, Performance and Transformation Manager on the Code of Conduct and the Register of Disclosable Pecuniary Interests.

**T Batha  
388924**

**6. ANNUAL REPORT ON COMPLIANCE WITH FREEDOM OF INFORMATION AND ENVIRONMENTAL INFORMATION REGULATIONS ACTS** (Pages 23 - 28)

To consider a report on requests for information received by the Council under Freedom of Information Regulations Acts and to highlight any issues encountered and actions to be taken to improve performance.

**J Brooks  
01954 713318**

**7. REVIEW OF CODE OF FINANCIAL MANAGEMENT AND CODE**

## OF PROCUREMENT

To consider a report by the Head of Resources on the outcome of the annual review of the Code of Financial Management and the Code of Procurement.

**A Forth**  
**388605**  
**N Arkle**  
**388104**

**8. PROGRESS ON ISSUES ARISING FROM THE 2016/17 ANNUAL GOVERNANCE STATEMENT** (Pages 29 - 36)

To receive a report by the Internal Audit and Risk Manager on progress on introducing the key improvement areas contained in the 2016/17 Annual Governance Statement.

**D Harwood**  
**388115**

**9. NON-IMPLEMENTATION OF AUDIT ACTIONS** (Pages 37 - 52)

To consider a report by the Head of Resources containing an update following the introduction of a new framework for managing and reporting audit actions.

**C Mason**  
**388157**

**10. INTERNAL AUDIT SERVICE INTERIM PROGRESS REPORT** (Pages 53 - 60)

To receive an interim report by the Audit and Risk Manager on the performance of the Internal Audit Service for the period April to November 2017.

**D Harwood**  
**388115**

**11. CORPORATE GOVERNANCE COMMITTEE PROGRESS REPORT** (Pages 61 - 64)

To receive the Corporate Governance Committee Progress Report.

**A Roberts**  
**388015**

Dated this 9 day of January 2018



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.

### **Non-Statutory Disclosable Interests**

- (4) If a Member has a non-statutory disclosable interest then you are required to declare that interest, but may remain to discuss and vote providing you do not breach the overall Nolan principles.
- (5) A Member has a non-statutory disclosable 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 a disclosable pecuniary interest, 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, or
  - (c) it relates to or is likely to affect any body –
    - (i) exercising functions of a public nature; or
    - (ii) directed to charitable purposes; or
    - (iii) one of whose principal purposes includes the influence of public opinion or policy (including any political party or trade union) of which you are a Member or in a position of control or management.

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 Anthony Roberts, Democratic Services, Tel: 01480 388015 / email [Anthony.Roberts@huntingdonshire.gov.uk](mailto:Anthony.Roberts@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.**

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

If you would like a translation of Agenda/Minutes/Reports or would like a large text version or an audio version please contact the Elections & 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 COMMITTEE held in Civic Suite 0.1A, Pathfinder House, St Mary's Street, Huntingdon PE29 3TN on Wednesday, 29 November 2017.

PRESENT: Councillor M Francis – Chairman.

Councillors Mrs L A Duffy, T Hayward, P Kadewere, Mrs R E Mathews, D M Tysoe, J M Palmer and D A Giles.

APOLOGIES: Apologies for absence from the meeting were submitted on behalf of Councillors E R Butler, Mrs S Conboy, D B Dew and R J West.

IN ATTENDANCE: Councillor J A Gray.

### **30. MINUTES**

The Minutes of the meeting of the Committee held on 13th September 2017 were approved as a correct record and signed by the Chairman.

### **31. MEMBERS' INTERESTS**

Councillor D A Giles declared a non-statutory disclosable interest in Minute No. 33 by virtue of being the Mayor of St Neots.

Councillor D M Tysoe declared a non-statutory disclosable interest in Minute No. 32 by virtue of being the Ward Member for Great and Little Gidding.

### **32. COMMUNITY GOVERNANCE REVIEW - GREAT & LITTLE GIDDING PARISH COUNCIL**

Consideration was given to a report by the Elections and Democratic Services Manager (a copy of which is appended in the Minute Book) on the receipt of a request from Great and Little Gidding Parish Council to increase its size from seven to eight parish councillors. Members discussed the likely reasons for the requested change and the potential benefits of revisiting the arrangements for determining the size of town and parish councils. It was suggested that the latter might be carried out after the elections in May 2018. Having noted the timescale for the review including the submission of a further report to the Committee's next meeting in January, it was

RESOLVED

- a) that the request for a Community Governance Review of Great and Little Gidding Parish Council to increase the number of parish councillors from 7 to 8 be approved;
- b) that the review's terms of reference at Appendix to the report now submitted be approved, and

- c) that the Elections and Democratic Services Manager after consultation with Great and Little Gidding Parish Council be authorised to agree a timetable for the review.

### **33. CODE OF CONDUCT COMPLAINTS - QUARTERLY UPDATE**

By means of a report by the Elections and Democratic Services Manager (a copy of which is appended in the Minute Book), in accordance with its responsibility for monitoring the operation of the Code of Conduct, the Committee was provided with general information on alleged breaches of the Code. In response to a question by a Member, the Elections and democratic Services Manager reported that the first hearing under the new Standards regime had taken place that day, that the process had worked well and that, despite only limited sanctions being available, a suitable conclusion had been reached.

Following questions by another Member, the Elections and Democratic Services Manager informed the Committee that all parties were informed of the outcome of complaints, the Monitoring Officer usually tried to reach a local resolution, the Council was under a duty to undertake investigations into complaints, there was no right of appeal against decisions and the Council could not interfere in the running of, nor provide legal advice to, town and parish councils.

Having received confirmation that all newly elected Councillors received training on standards and the Code of Conduct and that this training would be made available to existing Councillors, it was

RESOLVED

that the progress of outstanding complaints and the conclusion of cases resolved since the last meeting be noted.

### **34. DISPOSAL OF SMALL LAND PARCELS POLICY/ UPDATES TO THE DISPOSALS AND ACQUISITIONS POLICY - CHANGES TO THE CONSTITUTION**

Consideration was given to a report by the Head of Resources to which was attached a draft policy for the Disposal of Small Land Parcels. Copies of the report and draft Policy are appended in the Minute Book. The Executive Member for Strategic Resources, Councillor J A Gray, informed the Committee of the background to and purpose of the Policy. The Council currently devoted significant levels of resources to the disposal of small areas of land. The sale process was time consuming and complex. He also questioned the level of return the Council obtained from such sales. It was suggested that the Council should introduce a presumption that any small areas of land should be used as open space. Land would only be sold where there were good strategic reasons to do so.

During discussion on the terms of the Policy, it was established that Members' views would be taken into account when a decision to sell land was taken, that where a sale took place the buyer would meet all the costs involved and that the price would be determined on a case by case basis.

The Chairman read out an e-mail by Councillor S Conboy in which she expressed her views on the sale process. In response, it was stated that Ward Members were informed of proposed sales and it was their duty to engage with interested parties, including town and parish councils, on them. They also were informed that town and parish councils were formally requested to provide intelligence on activities that might affect the ownership of land. Whereupon, it was

RESOLVED

- a) that the Disposal of Small Land Parcels Policy appended to the report now submitted be endorsed, and
- b) that the Council be recommended to make any consequential changes to the Constitution (including the Code of Procurement and Code of Financial Management) to reflect the new Policy along with the respective updates to the Disposals and Acquisitions of Land and Buildings Policy.

### **35. ANNUAL AUDIT LETTER 2016/17**

With the aid of a report by the Finance Manager (a copy of which is appended in the Minute Book) the Committee was acquainted with the contents of the external auditor's Annual Audit Letter. Members' attention was drawn to the key issues highlighted in the Letter and to the lessons learnt arising from the identified Control Themes and Observations. With regard to the latter, a thorough review was to be undertaken. Immediate actions would be to overhaul the creditors and debtors and produce a monthly reconciliation so that working papers were available for the auditor next year. However, owing to the varying nature of the Council's debtors, the accounts would not be closed down each month.

Members emphasised the importance of adopting a strong plan to ensure the lessons learnt were realised and that the issues experienced during the last audit did not reoccur next year, especially given the shorter deadline to close the accounts. To put the lessons learnt into context, it was pointed out that the Council had met the shorter deadline for 2016/17 and that an unqualified audit opinion had been received.

With regard to the introduction of the new Financial Management System, in order not to expose the Council to risk, the decision had been taken to close the 2017/18 accounts on the old system and two additional accountants would be employed during the transfer to the new one.

Having been informed that the variation to the Audit Fees was the result of the Auditor having to devote extra resources to the audit because delays experienced had been attributed to the Council, it was

RESOLVED

that the contents of the report and the 2016/17 Annual Audit

Letter be noted.

**36. CORPORATE GOVERNANCE COMMITTEE PROGRESS REPORT**

The Committee received and noted a report (a copy of which is appended in the Minute Book) on progress of actions in response to decisions taken at previous meetings. The Elections and Democratic Services Manager confirmed that Members did not have responsibility for the conduct of town and parish councillors. In response to a question by a Member, the Elections and Democratic Services Manager informed the Committee that the identity of Councillors who were the subject of Code of Conduct investigations could not be revealed until the complaint process had been completed and was subject to the public interest test.

Councillor J M Palmer reported that he and Councillor S Conboy had met with the Head of Development to discuss the way the Development section dealt with customer feedback. It was recognised that improvements were required and this was being worked on. Members were reminded that they would be able to follow up on this matter when they received a report on the outcome of the review of the complaints process and when the annual report on complaints was presented.

**37. ADDITIONAL MEETING**

Members noted that an additional meeting of the Committee would be held on 17th January 2018.

Chairman



**Public  
Key Decision - No**

## HUNTINGDONSHIRE DISTRICT COUNCIL

**Title/Subject Matter:** Community Governance Review – Great and Little Gidding Parish Council

**Meeting/Date:** 17th January 2018

**Executive Portfolio:** Councillor G J Bull, Executive Leader

**Report by:** Elections and Democratic Services Manager

**Ward(s) affected:** Sawtry

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### **Executive Summary:**

The purpose of this report is to update Members on the Community Governance Review of Great and Little Gidding following the request from the Parish Council to increase the size from 7 to 8 parish councillors.

### **Recommendation:**

It is recommended that the Committee note the request to cancel the Community Governance Review for Great and Little Gidding Parish Council following a number of recent changes at the Parish Council.

## **1. PURPOSE OF THE REPORT**

- 1.1 Following a request received from Great and Little Gidding Parish Council to increase the council size from 7 to 8 parish councillors and the Committee agreeing the terms of reference of the Community Governance Review at their last meeting on 29th November 2017, correspondence has been received from the Parish Council.
- 1.2 The current Chairman reported that there has been a number of changes at the Parish Council recently, including the resignation of the previous Chairman and Clerk without notice. The Parish Council have therefore requested that the Community Governance Review now not proceed as they are concerned that following the recent resignations there would be an increased difficulty now in filling the seats on the Parish Council.

## **2. REASONS FOR THE RECOMMENDED DECISIONS**

- 2.1 As Great and Little Gidding Parish Council has requested that the Community Governance Review no longer proceed, the necessary work to undertake the consultation and preparation of final order is now deemed not necessary.

## **BACKGROUND PAPERS**

Local Government and Public Involvement in Health Act 2007  
Communities and Local Government Guidance on Community Governance Reviews  
March 2010  
Request from Great and Little Gidding Parish Council dated 21st September 2017 &  
20th December 2017

## **CONTACT OFFICER**

Lisa Jablonska, Elections and Democratic Services Manager  
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**Public  
Key Decision - No**

## HUNTINGDONSHIRE DISTRICT COUNCIL

**Title/Subject Matter:** Lead and Deputy Independent Persons

**Meeting/Date:** Corporate Governance Committee – 17 January 2018  
Council – 21 February 2018

**Executive Portfolio:** Councillor G J Bull, Executive Leader

**Report by:** Elections and Democratic Services Manager and Deputy  
Monitoring Officer

**Ward(s) affected:** All

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### **Executive Summary:**

The Localism Act 2011 established the requirement for every principal authority to appoint one or more Independent Persons. Accordingly, the appointments of Lead and Deputy Independent Persons were confirmed by the Council in March 2016 for a two-year term. The terms of office of the Lead and Deputy Independent Persons expire on 30th April 2018. The Council is responsible for ensuring that the requirement to have Independent Persons is complied with.

The Corporate Governance Committee is

### **RECOMMENDED**

that the Council affirm the re-appointment of Mrs Gillian Holmes and Mr Peter Baker to the posts of Lead and Deputy Independent Persons respectively for a further two-year period to 30th April 2020 without the need for further ratification in each year by the Council at its Annual Meeting.

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## **1. WHAT IS THIS REPORT ABOUT/PURPOSE?**

- 1.1 This report provides the Corporate Governance Committee with an opportunity to recommend to Council the appointment of Independent Persons as required by the Localism Act 2011.

## **2. BACKGROUND**

- 2.1 The Localism Act 2011 requires every principal authority to appoint one or more Independent Persons. The Act contains strict rules preventing a person from being appointed if they are a friend or relative to any member or officer of the authority, or of any Parish Council within the authority's area. It also prescribes the role of Independent Persons. They must be consulted before the authority takes a decision to investigate any allegation.
- 2.2 Independent Persons, furthermore, may be consulted by a Member of the authority against whom an allegation has been made, as well as by a Parish Councillor in similar circumstances.
- 2.3 Given the valuable contributions of impartial advice made by Mrs Gillian Holmes and Mr Peter Baker, the Lead and Deputy Independent Persons respectively, and the excellent working relationship established with the Monitoring Officer and Deputy Monitoring Officer in the period since their appointment, it is suggested that their terms of office should be extended to 30th April 2020.

## **3. CONSULTATION**

- 3.1 The Lead and Deputy Independent Persons have been consulted and have indicated they are willing to continue with their roles in assisting the Corporate Governance Committee and Code of Conduct investigations.

## **4. LEGAL IMPLICATIONS**

- 4.1 Section 28 of the Localism Act 2011 requires the appointment of at least one Independent Person who may not be a member, a co-optee and officer or a close friend or relative of a member, co-optee or officer and may not have been any of those roles for a period of at least five years.

## **5. RESOURCE IMPLICATIONS**

- 5.1 The Lead and Deputy Independent Persons receive an allowance of £1,000 and £500 respectively plus reimbursement of the costs involved in attending meetings and training events.

## **6. CONCLUSION**

- 6.1 It is necessary to for the Council to consider and resolve the two appointments in advance of their terms of office expiring. In so doing, this will provide continuity in the roles that are prescribed in legislation.

## **BACKGROUND PAPERS**

District Council's Constitution  
Corporate Governance Committee Reports/Minutes.

**CONTACT OFFICER**

Lisa Jablonska, Elections and Democratic Services Manager and Deputy Monitoring Officer

Tel No. (01480) 388004

Email: [lisa.jablonska@huntingdonshire.gov.uk](mailto:lisa.jablonska@huntingdonshire.gov.uk)

Public  
Key Decision – No

## HUNTINGDONSHIRE DISTRICT COUNCIL

**Title/Subject Matter:** Update on Code of Conduct and Register of Disclosable Pecuniary Interests

**Meeting/Date:** Corporate Governance Committee  
17 January 2018

**Report by:** Tom Batha, Member Support Assistant

**Ward(s) affected:** All Wards

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### **Executive Summary:**

The Monitoring Officer has a duty to establish and maintain a register of Disclosable Pecuniary Interests (DPIs) and this report provides the Committee with an update on the current level of returns and to consider any action that might be necessary to encourage those Councillors who continue to fail to return their forms to comply.

### **Recommendation(s):**

The Committee is requested to consider and comment on the report.

## **1. WHAT IS THIS REPORT ABOUT?**

- 1.1 Chapter 7 of the Localism Act 2011 requires the Monitoring Officer to establish and maintain a register of disclosable pecuniary or other interests of Members of the District Council and the District Council also continues to be responsible for maintaining the Register for Parish Councils. The register is open for inspection at the District Council's offices and published on the District Council's website. Where a Parish Council has a website, the District Council is required to provide that Council with the information necessary to enable it to publish their current register on its own website. Information in respect of the DPIs of each Parish Council is presented in Appendix 1.
- 1.2 Each Parish Council also has a duty to adopt a Code of Conduct. All Town and Parish Councils were requested to advise the Monitoring Officer when their Council had adopted a new Code and to confirm whether it was identical to that adopted and promoted by the District Council or alternatively the version produced by the National Association of Local Councils (NALC) or any other.

## **2. WHY IS THIS REPORT NECESSARY/BACKGROUND**

- 2.1 The Committee is responsible for maintaining high standards of conduct by Members of the District and Town and Parish Councils, for monitoring operation of the Code of Conduct and for considering the outcome of investigations in the event of breaches of the Code. The District Council has a duty to maintain and publish the Registers of Pecuniary Interests of both the District and Town and Parish Councils. Those Members who fail to comply with the 2011 Act are guilty of an offence and liable to a maximum fine of £5,000 and disqualification for up to 5 years.
- 2.2 This report describes the current position in relation to both of these matters.

## **3. ANALYSIS/REPORT**

- 3.1 All DPI forms that have been received have been published. Any changes made to pecuniary interests have also been published.
- 3.2 Of 71 Town and Parish Councils, 46 have had their full Register published on the District Council's website and 25 Parishes have published their Register with vacancies.
- 3.3 In terms of individual DPIs, 610 out of a total of 650 have been received from Parish Councillors; with 40 vacant. The up to date position on each Council is noted in Appendix 1. The Committee will appreciate that it is unlikely that there will ever be a complete return at any one time because of the ever changing nature of Parish Council membership.
- 3.4 All District Councillors' DPI forms are uploaded onto the Council's website.

## **4. KEY IMPACTS? HOW WILL THEY BE ADDRESSED?**

- 4.1 The Corporate Team regularly requests updates from those Parish Councils where DPIs are outstanding. Similarly, incomplete or inaccurate forms are returned to Parish Councils with a request to revise and return. All Parish Councils are asked twice a year to verify details held by the District Council regarding DPIs and the Code of Conduct adopted by each Parish Council.



## **5. WHAT ACTIONS WILL BE TAKEN**

- 5.1 Parish Clerks are regularly reminded by email to submit DPI forms as soon as possible following any changes.

## **6. LINK TO THE CORPORATE PLAN**

- 6.1 The Council's strategic priorities include enabling communities. By ensuring that DPIs are published, the Council is supporting local accountability and transparency in decision making which contributes to the objective to develop stronger and more resilient communities to enable people to help themselves.

## **7. CONSULTATION**

- 7.1 Not applicable.

## **8. LEGAL IMPLICATIONS**

- 8.1 While there is no legal obligation upon Town and Parish Councils to notify the Monitoring Officer, records indicate that all Town and Parish Councils have adopted a Code of Conduct. 57 of those Parish Councils have adopted a Code based on that adopted by the District Council. 12 Town and Parish Councils have opted for the Code promoted by NALC, and two have adopted their own version of the Code. The up to date position on each Council is noted in Appendix 2.

## **9. REASONS FOR THE RECOMMENDED DECISIONS**

- 9.1 The Committee take a role in maintaining high standards of conduct by Members and monitoring the Code of Conduct.

## **10. LIST OF APPENDICES INCLUDED**

Appendix 1 – Town and Parish Councils Disclosable Pecuniary Interests (DPI) forms

Appendix 2 – Town and Parish Council New Standards Regime and Code of Conduct.

## **BACKGROUND PAPERS**

None.

## **CONTACT OFFICER**

Tom Batha, Member Support Assistant (Corporate Office)

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## Town and Parish Councils Disclosable Pecuniary Interests (DPI) forms

Town/Parish Council	No of Cllrs	DPIs Received	Vacancy	DPIs Outstanding	NOTES
1 Abbots Ripton	6	6			CORRECT
2 Abbotsley	7	6	1		CORRECT
3 Alconbury	11	9	2		CORRECT
4 Alconbury Weston	7	7			CORRECT
5 Alwalton	5	5			CORRECT
6 Barham & Woolley	5	5			CORRECT
7 Bluntisham	11	9	2		CORRECT
8 Brampton	15	15			CORRECT
9 Brington & Molesworth	5	3	2		CORRECT
10 Broughton	7	7			CORRECT
11 Buckden	15	15			CORRECT
12 Buckworth	5	5			CORRECT
13 Bury	9	9			CORRECT
14 Bythorn & Keyston	5	5			CORRECT
15 Catworth	7	7			CORRECT
16 Colne	9	9			CORRECT
17 Conington	5	4	1		CORRECT
18 Earith	11	11			CORRECT
19 Easton	5	5			CORRECT
20 Ellington	7	7			CORRECT
21 Elton	9	8	1		CORRECT
22 Farcet	11	9	2		CORRECT
23 Fenstanton	13	13			CORRECT
24 Folksworth & Washingley	9	8	1		CORRECT
25 Glatton	5	5			CORRECT
26 Godmanchester	17	17			CORRECT
27 Grafham	7	7			CORRECT
28 Great & Little Gidding	7	5	2		CORRECT
29 Great Gransden	9	9			CORRECT
30 Great Paxton	9	8	1		CORRECT
31 Great Staughton	9	9			CORRECT
32 Hail Weston	7	7			CORRECT
33 Hemingford Abbots	7	5	2		CORRECT
34 Hemingford Grey	13	10	3		CORRECT
35 Hilton	9	9			CORRECT

Town/Parish Council	No of Cllrs	DPI Rec'd	Vacancy	DPI Outstanding	NOTES
36 Holme	7	7			CORRECT
37 Holywell cum Needingworth	13	13			CORRECT
38 Houghton & Wyton	9	8	1		CORRECT
39 Huntingdon	19	19			CORRECT
40 Kimbolton & Stonely	11	10	1		CORRECT
41 Kings Ripton	5	5			CORRECT
42 Leighton Bromswold	7	5	2		CORRECT
43 Little Paxton	15	13	2		CORRECT
44 Offord Cluny & Offord Darcy	11	9	2		CORRECT
45 Old Hurst	7	7			CORRECT
46 Old Weston	7	7			CORRECT
47 Perry	9	9			CORRECT
48 Pidley cum Fenton	7	7			CORRECT
49 Ramsey	17	17			CORRECT
50 Sawtry	15	12	3		CORRECT
51 Sibson cum Stibbington	7	6	1		CORRECT
52 Somersham	15	13	2		CORRECT
53 Southoe & Midloe	7	7			CORRECT
54 Spaldwick	7	7			CORRECT
55 St Ives	17	17			CORRECT
56 St Neots	21	19	2		CORRECT
57 Stilton	11	11			CORRECT
58 Stow Longa	5	5			CORRECT
59 The Stukeleys	9	8	1		CORRECT
60 Tilbrook	5	5			CORRECT
61 Toseland	5	5			CORRECT
62 Upton & Coppingford	5	5			CORRECT
63 Upwood & The Raveleys	9	9			CORRECT
64 Warboys	15	14	1		CORRECT
65 Waresley cum Tetworth	5	5			CORRECT
66 Wistow	7	7			CORRECT
67 Woodhurst	7	6	1		CORRECT
68 Woodwalton	5	4	1		CORRECT
69 Wyton on the Hill	7	7			CORRECT
70 Yaxley	17	17			CORRECT
71 Yelling	7	7			CORRECT
Totals	650	610	40		

## Town and Parish Council New Standards Regime and Code of Conduct

Town/Parish Council	HDC Code	NALC Code	Own Code
Abbotsley	X		
Abbots Ripton		X	
Alconbury	X		
Alconbury Weston		X	
Alwalton	X		
Barham & Woolley	X		
Bluntisham	X		
Brampton	X		
Brington & Molesworth	X		
Broughton	X		
Buckden	X		
Buckworth	X		
Bury	X		
Bythorn & Keyston	X		
Catworth	X		
Colne			X
Conington	X		
Earith		X	
Easton	X		
Ellington	X		
Elton	X		
Farcet		X	
Fenstanton	X		
Folksworth & Washingley		X	
Glatton	X		
Godmanchester	X		
Grafham	X		
Great & Little Gidding	X		
Great Gransden	X		
Great Paxton	X		
Great Staughton	X		
Hail Weston		X	
Hemingford Abbots	X		
Hemingford Grey	X		
Hilton	X		
Holme	X		
Holywell cum Needingworth	X		
Houghton & Wyton			X
Huntingdon	X		
Kimbolton & Stonely	X		
Kings Ripton	X		
Leighton Bromswold	X		
Little Paxton	X		
Offord Cluny & Offord Darcy		X	
Old Hurst		X	

## Town and Parish Council New Standards Regime and Code of Conduct

Town/Parish Council	HDC Code	NALC Code	Own Code
Old Weston	X		
Perry	X		
Pidley cum Fenton	X		
Ramsey	X		
Sawtry	X		
Sibson cum Stibbington	X		
Somersham	X		
Southoe & Midloe	X		
Spaldwick	X		
St Ives	X		
St Neots	X		
Stilton		X	
Stow Longa	X		
The Stukeleys	X		
Tilbrook	X		
Toseland	X		
Upton & Coppingford	X		
Upwood & The Raveleys	X		
Warboys	X		
Waresley cum Tetworth		X	
Wistow	X		
Woodhurst		X	
Woodwalton		X	
Wyton on the Hill	X		
Yaxley	X		
Yelling	X		
<b>TOTAL</b>	<b>57</b>	<b>12</b>	<b>2</b>

## HUNTINGDONSHIRE DISTRICT COUNCIL

<b>Title/Subject Matter:</b>	Annual report on HDC compliance with the Freedom of Information (FOIA) & Environmental Information Regulations (EIR) Acts
<b>Meeting/Date:</b>	17 <sup>th</sup> January 2017
<b>Executive Portfolio:</b>	Executive Councillor for Commercial Services Information Governance Manager (3C ICT)
<b>Report by:</b>	All Ward(s)
<b>Ward(s) affected</b>	

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### Executive Summary:

This is an annual report on the Council's compliance with the Freedom of Information Act 2000 and Environmental Information Regulations 2004. This report covers the period July 2016 to October 2017 in order to incorporate data since the last report. Future reports will return to a 12 month format.

The number of requests received by the Council in 2016 (780) increased from the previous year, following a long period of growth. Customer Services and Communities receive the highest request count. The request count for the report period is 908.

The majority of requests are concluded by providing all the information requested. Efforts to proactively make more information open and accessible via the web site has resulted in the ability to defer 16% of requests; in contrast to just 1% previously reported; effectively reducing the burden of requests to Services and in particular Revenues.& Benefits.

A shared request management system was integrated in July 2017. This new process places more ownership on the Services whereby key responders and champions are designated and responsible for ensuring their Service responds within the timeframe. The Information Governance Officer ( a new position filled in June 2017) coordinates all formal requests and allocates specialist support from the Information Governance team where officers require this.

This new process has been successful. After a sustained period functioning below target (90%) in 2016, the Council is now achieving above 90% and even 100% compliance. See appendix A.

**Recommendation(s):**

**Corporate Governance Committee is asked to comment on this report.**

**1. PURPOSE**

1.1 The purpose of this report is to:

- Report on the requests for information received by the Council under FOIA & EIR and highlight any issues encountered and actions to be taken to improve performance.

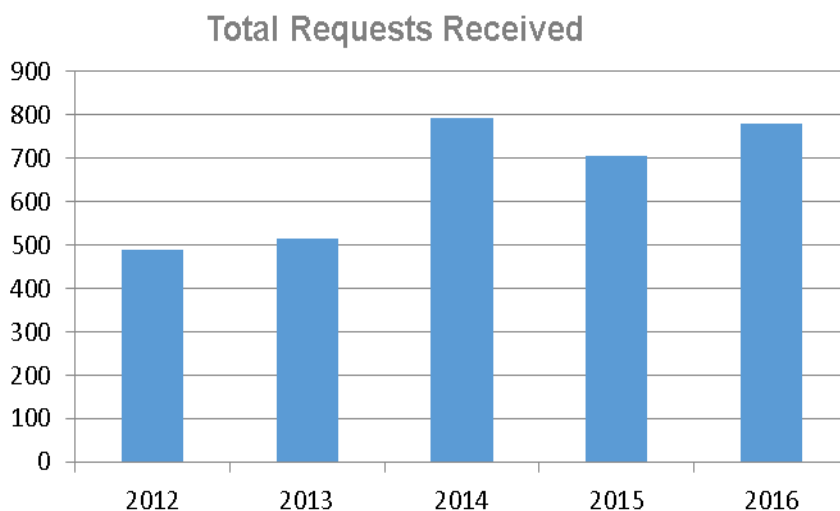
**2. BACKGROUND**

2.1 The public has the right of access to information held by the Council under the Freedom of Information Act. The Freedom of Information Act (FOI) works alongside the Environmental Information Regulations (EIR). Service areas are responsible for responding to requests, and 3C ICT Information Governance Team manage the process, provide support and ensure compliance. The Council works to a target of 90% response compliance within 20 days (statutory requirement) as advised by the Information Commissioner.

2.2 The Council receives many requests for information in all service areas. Most are dealt with as part of the day-to-day business, but where a request is out of the ordinary, specifically invokes the legislation, or is likely to engage an exemption, it is formally logged and processed. This report relates to those formally processed requests.

**3. REQUESTS FOR INFORMATION**

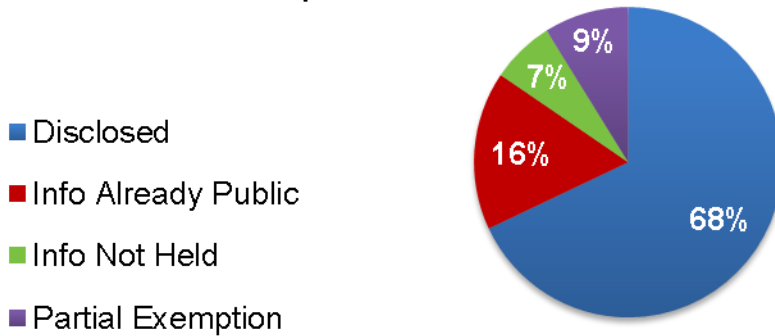
3.1 Total requests received in 2016 were 780. (report period 908). The new process (July 2017) ensures that only official requests are now logged any informal queries are now handled swiftly outside of this process.





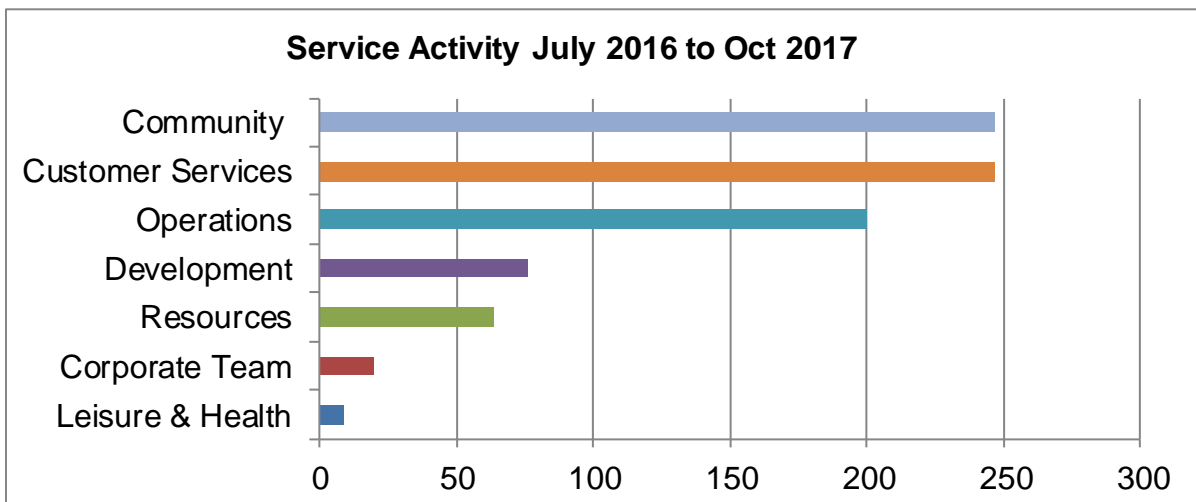
**3.2** Most requests are disclosed. 9% of requests are subject to a partial or full exemption to disclosure. A greater proportion of the information of regular interest is now proactively published and updated on a monthly basis. The IG team will continue efforts to support Services to increase this Open Data offering.

**Resolution of Requests**



**3.3** Completion of requests within the statutory time-frame during the 15 month report period was on average 78%.The target is currently 90%. The period from July 2017 to date is good though, and the work to improve the process and engagement from officers has resulted in above target and 100% compliance.

**3.4** Customer Services and Community receive the highest demand. Its anticipated the next report will show a reduction as business rates information is now proactively published comprising 10% of requests. Information relating to the environment is consistently in demand.



**3.5** The source of requests is becoming more difficult to assess, since many are sent from anonymous webmail addresses, therefore this is not reported.

**3.6** Requestors have the right to an 'internal review' of their case if they are not satisfied with the outcome or how the request was handled, before taking further action to the Information Commissioner's Office. During the report period 10 internal reviews were undertaken, 4 were the subject of further complaint to the Information commissioner, however in all cases the Commissioner found in the Councils favour or were resolved with no further action.

#### **4. KEY IMPACTS/RISKS**

**4.1** The key impact of non-compliance with FOIA/EIR is public scrutiny from the regulator. Poor service or inadequate information management will lead to loss of trust from our customers. Inability to act in accordance with the Act and the Governments accountability and transparency directive will lead to reputational damage. Furthermore the right of access is bound with the Human Rights Act in respect of the right to privacy. Unlawful disclosure of personal information may lead to publicly enforced audit, warning, reprimand, corrective order and fine by the regulator.

#### **5. WHAT ACTIONS WILL BE TAKEN**

**5.1** The strategy under 3C ICT for the next 12 months will continue on: Improvements to the new FOI tracking system.

**5.2** Service specific FOI training on the exemptions. Including improved records management methods.

**5.3** Weekly FOI reports to HoS to enable proactive engagement.

**5.4** An FOI disclosure log published via the Councils web site.

**5.5** An Open Data strategy to manage the process; the quality and frequency of publication of the Councils key assets and compliance with the Transparency Code directive. To enable data to be given the widest publication but enabling correlation with partner data across the district.

#### **6. LINK TO THE LEADERSHIP DIRECTION**

**6.1** Supports the objective to become a customer focused organisation under the strategic priority of becoming a more efficient and effective Council.

## **7. CONSULTATION**

7.1 None

## **8. LEGAL IMPLICATIONS**

8.1 HDC must comply with the law concerning FOIA/EIR.

## **9. RESOURCE IMPLICATIONS**

9.1 There are no direct resource implications arising from this report.

## **10. OTHER IMPLICATIONS**

10.1 None

## **11 REASONS FOR THE RECOMMENDED DECISIONS**

11.1 This paper updates Members on how requests under FOIA/EIR have been dealt with by HDC. The author suggests a broader scope to the report to in future include compliance with requests handled under the Data Protection Act/ The General Data Protection Regulations. These relate to requests for the personal data of individuals. As well as an overview of the Councils 'Open' data. Neither have previously been included in this annual report.

11.2 Members of the Corporate Governance Committee are asked to comment on the contents of this report.

## **12. LIST OF APPENDICES INCLUDED**

12.1 Appendix A - Percentage of Requests Handled Within the Statutory Time frame

## **13. BACKGROUND PAPERS**

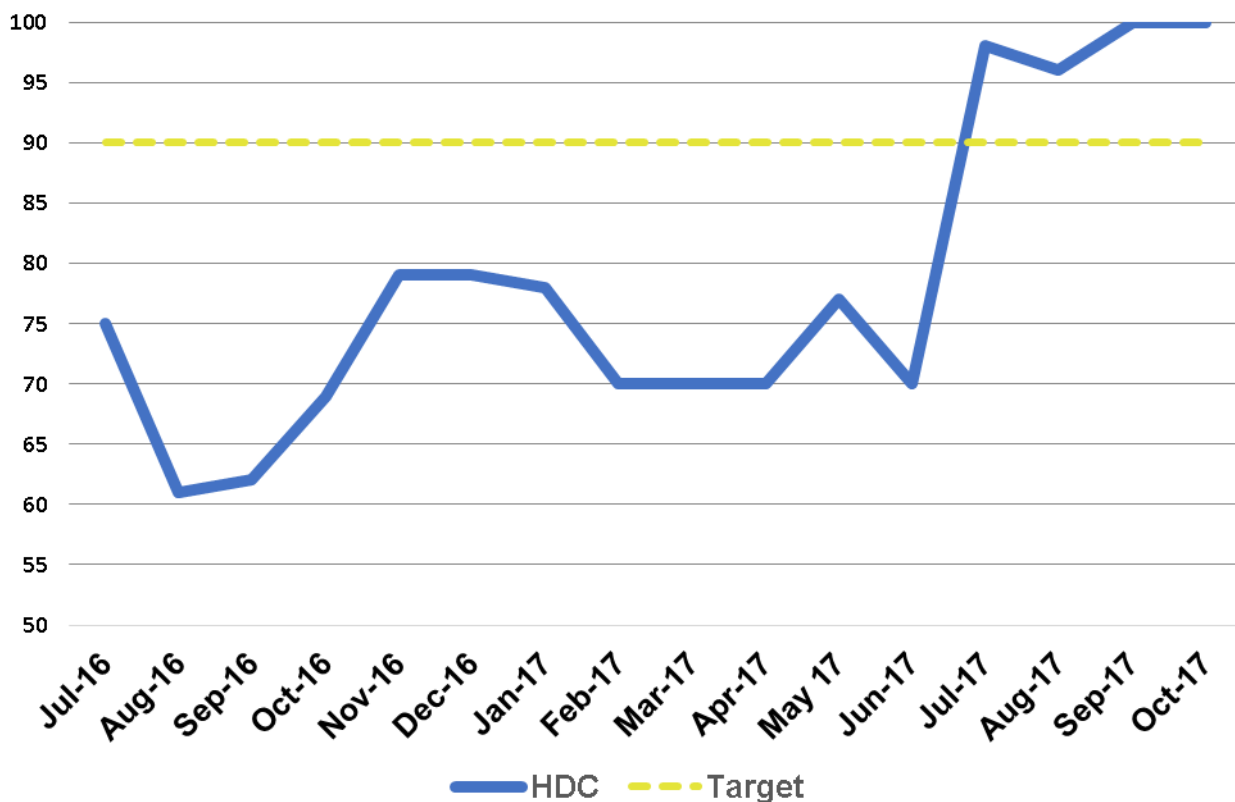
13.2 None

## **CONTACT OFFICER**

**Jo Brooks**  
**Information Governance Manager (3C ICT)**  
**01954 713318**

### Appendix A - Percentage of Requests Handled Within the Statutory Timeframe

Responses Within 20-day Statutory Timeframe (%)



**Public**  
**Key Decision - No**

## HUNTINGDONSHIRE DISTRICT COUNCIL

<b>Title/Subject Matter:</b>	Progress on issues arising from the 2016/17 Annual Governance Statement
<b>Meeting/Date:</b>	Corporate Governance Committee – 17 January 2018
<b>Executive Portfolio:</b>	Strategic Resources: Councillor J A Gray
<b>Report by:</b>	Internal Audit & Risk Manager
<b>Ward(s) affected:</b>	All Wards

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### **Executive Summary:**

The 2016/17 Annual Governance Statement (AGS) included four areas for improvement:

1. The continued development of effective governance and reporting arrangements for shared services.
2. Introduce the replacement financial management system so that it is operational and available to use from April 2018.
3. Ensure better outcomes are delivered to customers by improving the way in which complaints are recorded, investigated and outcomes reported back to the complainant; and
4. Introduce robust safeguarding procedures.

The Corporate Management Team are of the opinion that good progress that has been made against all four areas and anticipate that all will be sufficiently 'achieved' prior to the preparation of the 2017/18 AGS and will no longer need to be recorded as improvement areas.

Details of the action taken against each area is contained in the main report.

### **Recommendation:**

It is recommended that the Committee note and take into account the progress that has been made in introducing the key improvement areas arising from the 2016/17 AGS when undertaking their 2017/18 governance review.

## 1. WHAT IS THIS REPORT ABOUT/PURPOSE?

- 1.1 This report informs the Committee of the progress that has been to date in introducing the key improvement areas that were contained in the 2016/17 Annual Governance Statement (AGS).

## 2. WHY IS THIS REPORT NECESSARY

- 2.1 The Committee need to be assured that sufficient action has been taken to deal with the four areas for improvement identified.

1. The continued development of effective governance and reporting arrangements for shared services;
2. Introduce the replacement financial management system so that it is operational and available to use from April 2018;
3. Ensure better outcomes are delivered to customers by improving that way in which complaints are recorded, investigated and outcomes reported back to the complainant; and
4. Introduce robust safeguarding procedures.

- 2.2 An extract from the 2016/17 AGS that sets out in detail the issues to be considered has been included at Appendix 1.

## 3. ANALYSIS

- 3.1 The current position is set out below.

### 1. The continued development of effective governance and reporting arrangements for shared services.

An IT Strategy and IT roadmap laying out the future direction of 3CIT services, alongside a refreshed business case for 3CIT has been presented and provisionally endorsed by the leaders of the 3 constituent councils. Similar work is underway for the shared Building Control service.

Concurrently a new governance structure is currently being developed to ensure appropriate oversight and alignment of all shared service activity by constituent authorities. This will be presented to the 24 January 3C Joint Management Board.

IT shared service performance information has been included in the quarterly performance management suite reported to Members.

### 2. Introduce the replacement financial management system so that it is operational and available to use from April 2018.

There has been a further delay in the implementation of the new finance system (Technology One). It is now anticipated that 'formal' go-live will be the 1<sup>st</sup> April 2018. This is one month later than our partner councils, but this is as a consequence of:

- i. advice from the Councils external auditors, in that they have said that the Council should look towards a 1<sup>st</sup> April 2018 go-live as this will enable the Council to close 2017/18 on the current (eFinancials)

financial management system.

- ii. the fact that as there have been four delays in implementation, the Section 151 Officer has stated that there must be a successful full month of parallel running prior to go-live to ensure that all services are confident with the systems performance.

Consequently, the Council will have completed all testing and be ready to commence parallel running on the 1<sup>st</sup> March 2018. Then assuming that this is successful, formal go-live will be 1<sup>st</sup> April 2018.

### **3. Ensure better outcomes are delivered to customers by improving that way in which complaints are recorded, investigated and outcomes reported back to the complainant**

A project team has been set up to review our current policies and procedures. They are taking into account the recommendations of the LEAN review, our current IT complaints management system and practices adopted by others. It is anticipated that the review will be completed early in the New Year (although the 31 January deadline may not be met) with a new policy, process and practices in place. In addition it is expected that a plan of action with respect to the IT system will have been agreed but not implemented.

### **4. Introduce robust safeguarding procedures.**

The Safeguarding Governance Board has been established and is meeting monthly to oversee and progress the actions of the Safeguarding Audit report. All actions are on target to be completed within the agreed timescales.

- 3.2 The Corporate Management Team are satisfied that the action taken to date has begun to address the concerns recorded in the 2016/17 AGS.

### **4. KEY IMPACTS. HOW WILL THEY BE ADDRESSED?**

- 4.1 If sufficient and timely action is not taken, this may lead to the actions having to be repeated in the 2017/18 AGS and
  - adverse comments being reported by the external auditor;
  - poor governance procedures remaining in place which may affect the delivery of the Council's objectives.

### **5. WHAT ACTIONS WILL BE TAKEN/TIMETABLE FOR IMPLEMENTATION**

- 5.1 Action has already been taken as set out above. Further updates on the progress that has been to address the four issues identified will be reported to the Committee in March 2018.

### **6. LINK TO THE CORPORATE PLAN**

- 6.1 Good corporate governance structures underpin everything that the Council does. Effective delivery of the Corporate Plan requires sound procedures and processes to be in place. These seek to ensure that decision making complies with laws, regulations and proper governance practices.

## **7 REASONS FOR THE RECOMMENDED DECISIONS**

- 7.1 The Committee require assurance that the areas for improvement identified during the 2016/17 annual governance review process are being addressed.

### **APPENDIX 1**

Extract from 2016/17 AGS.

### **BACKGROUND PAPERS**

Annual Governance Statement 2016/17

### **CONTACT OFFICER**

David Harwood, Internal Audit & Risk Manager  
Telephone: 01480 388115



## Extract from 2016/17 Annual Governance Statement

**Improvement Areas – 2016/17**

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Four improvement areas have been identified.

The reasoning as to why these areas need to be improved and the agreed action plan is set out below.

**The continued development of effective governance and reporting arrangements for shared services.** *Lead Officer: Corporate Director (Services).*

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**What are shared services?**

*Huntingdonshire, Cambridge City Council and South Cambridgeshire District Council (known as the 3C's) are sharing ICT, Legal and Buiding Control servcies.*

This item has been included in the governance statement for the last two years.

Savings have been delivered by all of the shared services, however not all of the anticipated savings have been delivered in year one.

The Council delivers ICT for the 3C's partnership. The 2016/17 ICT savings target of £887k was missed by £590k. There are number of reasons for this – the primary ones being the use of expensive hired staff (including the former temporary Head of Service) and the failure to achieve the £200k savings from the rationalisation of contracts and the sharing of licence costs due to existing contractual obligations and insufficient time to re-procure common systems across all three authorities.

This highlights the need to ensure that business cases accurately reflect the challenges inherent in establishing shared services and capture investment requirements when early years savings targets are adopted. The budget overspend was highlighted in the financial information presented to both the 3C Partnership Board and the 3C Management Board but not until early in Qtr.4, 2016/17, highlighting the need for improved reporting and more proactive management of budget information.

Performance reporting – in respect of both delivery of the shared services business plan and budget – is not included in the performance management suite of information regularly presented to Members of the Council. Members received their only report on the performance of the three shared services in February 2017.

**Action taken:** A permanent Head of Digital and IT was appointed in January 2017. They have prepared a revised business plan that has reduced the savings targets from 15% to a yearly average of 9.7% across the 5 years of the plan. A stepped approach to the rationalisation of contract savings has been agreed. The financial reporting requirements set out in the Partnership Agreement have been introduced.

**Action to be taken:**

The quarterly performance management suite is to include information in respect of the IT shared service performance from Qtr. 2 2017/18.

**Introduce the replacement financial management system so that it is operational and available to use from April 2018.** *Lead Officer: Head of Resources.*

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The 3C Council's jointly purchased a financial management system in June 2016 with the intention of modernising the way each Council undertakes its budgeting, financial forecasting, income collection, procurement and payment of suppliers. The 'go-live' date was April 2017. This date was not achieved and 'go-live' has been delayed until December 2017. The Project Board and the Shared Services Programme Board have approved this 'go live' date.

**Action taken:** The additional staff resources to support the implementation of the financial management system have been extended until December 2017. These costs can be met from the overall project budget.

**Ensure better outcomes are delivered to customers by improving that way in which complaints are recorded, investigated and outcomes reported back to the complainant.** *Lead Officer: Corporate Team Manager*

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An internal audit review of customer feedback procedures was undertaken during Qtr. 3, 2016/17. It concluded that overly bureaucratic and time consuming systems were in place to handle customer complaints, and a 'limited' assurance opinion was given.

**Action taken:** In line with the Transformation agenda, a LEAN review of complaints handling has been undertaken. A number of changes to the complaints process have been proposed – incl. clearly defining when a complaint should be recorded on the complaints system and making the complaint handling process simpler so that it is consistently used across all services.

**Action to be taken:** Policies and procedures are to be reviewed by 30 September 2017. An action plan will then be developed and agreed with SMT ahead of a relaunch of the complaints process by 31 January 2018.

The LEAN review also concluded that the IT system used to administer complaints was struggling to meet the Council's needs and options to replace the system will also need to be considered. No date has been agreed for this element of work.

**Introduce robust safeguarding procedures** *Lead Officer: Head of Leisure & Health*

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An internal audit review of safeguarding procedures was undertaken during Qtr. 4, 2016/17. It concluded that the safeguarding procedures being followed were not as effective as they could be – there was an ad-hoc approach across Services to the assessment of safeguarding risks, piecemeal training and a

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lack of evidence that consistent checks on employees suitability for employment are carried out – this resulted in an ‘limited’ assurance opinion being given.

**Action taken:** The Managing Director has set-up a Safeguarding Governance Board. Its terms of reference and membership have been agreed. A number of Governance Board meetings have already been held. .

**Action to be taken:**

The Safeguarding Governance Board will continue to meet on a regular basis to co-ordinate and oversee the delivery of the action plan identified through the internal audit. The key themes for delivery are:-

- Awareness Raising
- Adults at Risk
- HR Processes
- Service Issues
- Corporate Governance

The deadline for all audit actions being completed is December 2018, however the Governance Board have agreed that key actions will be dealt with as a priority, for example the development of an Adults at Risk safeguarding policy.

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**Public  
Key Decision - No**

## HUNTINGDONSHIRE DISTRICT COUNCIL

**Title/Subject Matter:** Non-implementation of Internal Audit Actions.  
**Meeting/Date:** Corporate Governance Committee – 17 January 2018  
**Executive Portfolio:** Strategic Resources: Councillor J A Gray  
**Report by:** Head of Resources  
**Ward(s) affected:** All Wards

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### **Executive Summary:**

The Committee approved a new framework in May 2017 for the reporting of the non-implementation of internal audit actions. This framework has been followed since its introduction. Committee have requested they be informed of all red actions and all amber actions where the Head of Resources considers their non-implementation poses a significant risk to the internal control and financial framework.

As at the year ending 30 November 2017 there were 13 actions outstanding (5 red and 8 amber) from the 108 due to be implemented.

Two of the 5 red actions (both relating to cyber security) have been superseded following new actions having been agreed from a series of IT network security audits completed in Qtr. 3 2017/18. These 2 actions have not been included in this report.

Since November 2017, of the 8 amber actions, one has been introduced, one superseded and in one case, the Head of Resources considers its non-introduction does not pose a significant risk to the internal control and financial framework. These 3 actions have not been included in this report.

The 3 red actions will remain outstanding on the monthly performance data that Committee members receive until they are introduced, as the framework does not allow red actions to be granted any extensions of time.

Of the 5 amber actions, although for some extensions can't be granted because there has been a previous extension, there have been fair reasons for the delay. Consequently, all the amber actions will be implemented within a few months.

### **Recommendation:**

It is recommended that the Committee consider the report and the action taken by the Head of Resources.

## 1. PURPOSE OF THE REPORT

- 1.1 In accordance with the Framework agreed by Committee in May 2017, this reports informs the Committee of the outstanding internal audit actions as at 30 November 2017 which pose a threat to the internal control and financial framework.

## 2. ANALYSIS

- 2.1 **Appendix 1** contains information in respect of the 3 red actions and 5 amber actions that meet the Framework criteria (all red actions and all amber actions that the Head of Resources considers their non-implementation poses a significant risk to the internal control and financial framework).

- 2.2 A decision has been taken that for each of the 3 red actions,

- **Cyber 1**, has been part-implemented, and will be fully implemented by the end of March 2018. Although a weakness remains, the risk has been heavily mitigated.
- **E-payments 1**, this should be removed as an Audit Action. Although there is a risk, this is a significant project and one that would be better managed via the Councils Project Management Governance Board process.
- **Licensing**, no extension has been granted. However, the delay in the development of forensically correct apportionment costs for Democratic service provision is understood; Finance have committed to complete this work by the end of February 2018 with Community Services completed this remaining elements by the end of March 2018.

- 2.3 With regard to the 5 amber actions, acceptable extensions have been granted based on fair justifications for delays.

## 3. KEY IMPACTS.

- 3.1 It is important that the Council maintains a sound internal control environment. Actions that the Internal Audit Service propose to address risk and control weaknesses are discussed with Heads of Service and if appropriate Directors and agreement reached as to any corrective action that needs to be taken. Internal audit actions are not imposed on management.

## 4. WHAT ACTIONS WILL BE TAKEN/TIMETABLE FOR IMPLEMENTATION

- 4.1 Action has already been taken as set out above. Further updates on the progress that has been to address the four issues identified will be reported to the Committee in March 2018.

## 5. LINK TO THE CORPORATE PLAN

- 5.1 The Internal Audit Service provides independent, objective assurance to the Council by evaluating the effectiveness of risk management, control, and governance processes. It identifies areas for improvement across these three areas such that Managers are able to deliver the Corporate Plan objectives as efficiently, effectively and economically as possible.

## **6 REASONS FOR THE RECOMMENDED DECISIONS**

- 6.1 The Committee require assurance that agreed internal audit actions are being implemented on time and internal control weaknesses are being addressed.

### **APPENDIX 1**

Summary of outstanding internal audit actions as at 30 November 2017.

### **BACKGROUND PAPERS**

Audit actions contained in the 4ction system.

### **CONTACT OFFICER**

David Harwood, Internal Audit & Risk Manager  
Telephone: 01480 388115

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**OUTSTANDING INTERNAL AUDIT ACTIONS AS AT 30 NOVEMBER 2017**

**APPENDIX 1**

	Manager Responsible	Head of Service Position Statement		Responsible Financial Officer		
		Reason for Delay	Revised Implementation Date	RFO Opinion on Impact on Control/Financial Framework	Going Forward Action	
<b>HEAD OF 3C's ICT</b>						
<b>AUDIT</b>	<b>CYBER SECURITY</b>					
<b>Agreed Action (1)</b>	Management should implement a defined information security incident management procedure, which includes but is not limited to: - The definition of what constitutes an incident - The procedure for reporting an information security incident - The procedure for logging incidents - The procedure for investigating and categorising an incident - The arrangements for post-incident management. The procedure should be communicated to all members of staff across the three Councils.	Network Infrastructure Manager	An interim Information Security Management Policy is in place and in use which meets the requirement. However, currently being developed is a centralised IT Policy system that will formalise this interim procedure for all three partners.	No change.	RFO comments as at 04/01/2018:  The interim policy is in place and is operating effectively.  However, its formalisation is awaiting the new Policy System. Therefore it is fair to conclude that this audit action is "In-part" Implemented. Having spoken to the Head of 3C's ICT, the full system will be in place 31 <sup>st</sup> March 2018.  RFO comments as at 30/04/2017.  Cyber security attracts very high importance; the relatively tight revised	"In-part" implemented with full implementation by the 31 <sup>st</sup> March 2018.

**OUTSTANDING INTERNAL AUDIT ACTIONS AS AT 30 NOVEMBER 2017**

**APPENDIX 1**

		Manager Responsible	Head of Service Position Statement		Responsible Financial Officer	
			Reason for Delay	Revised Implementation Date	RFO Opinion on Impact on Control/Financial Framework	Going Forward Action
	Furthermore, information security incidents should be reviewed on a routine basis.				implementation deadline demonstrates management's priority in implementing this action.	
<b>Implementation Date</b>	30/06/2017					
<b>Agreed Action Status</b>	Red				Original implementation date : 30/01/2017  No further extensions to be granted.	
<b>AUDIT</b>	<b>CYBER SECURITY</b>					
<b>Agreed Action (4)</b>	Management should establish an Information Asset Register, which records the following information about the Council's information assets: - The nature of the information asset and the reason for its collection - The owner of the	Information Governance Manager	The development of an Info Asset Register is an integral part of the General Data Protection Regulations (GDPR) and has been	31 <sup>st</sup> May 2018.	RFO comments as at 04/01/2018:  With the statutory requirement to complete the GDPR review, it was more pragmatic to incorporate this recommendation into the GDPR review.  It is essential to have in place	RFO agrees to an extension to 31 <sup>st</sup> May 2018.  No further extensions.

**OUTSTANDING INTERNAL AUDIT ACTIONS AS AT 30 NOVEMBER 2017**

**APPENDIX 1**

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		Manager Responsible	Head of Service Position Statement		Responsible Financial Officer	
			Reason for Delay	Revised Implementation Date	RFO Opinion on Impact on Control/Financial Framework	Going Forward Action
	information asset - The “at rest” location of the information asset - The expected controls in place to secure the information asset.		ongoing since July 2017 and will be implemented in time for the regulations.		a robust Asset Register, this work will complete this requirement.  Original implementation date: 31/05/2017.	
<b>Implementation Date</b>	31/05/2017		A GDPR readiness check has also been undertaken.			
<b>Agreed Action Status</b>	Amber					
<b>AUDIT</b>	<b>E-PAYMENTS</b>					
<b>Agreed Action (1)</b>	The Council should complete a Payment Card Industry (PCI) Data Security Standard (DSS) Self-assessment questionnaire and submit the findings to the Council’s acquirer or payment brand/bank.	Information Governance Manager	A comprehensive Gap Analysis has been completed and work is underway to implement the changes needed to achieve	No change	RFO comments as at 04/01/2018:  Having spoken to the Head of 3C’s ICT, this is a significant project covering all three partner Councils. It will require a thorough review of all payment channels and is strictly not an ICT issue (although 3C’s ICT have taken	This Audit Action to be removed from the Audit Action database. This is a significant project and not just for HDC.  Compliance should be monitored via the Councils Project Management
<b>Implementation Date</b>	30/06/2017					

**OUTSTANDING INTERNAL AUDIT ACTIONS AS AT 30 NOVEMBER 2017**

**APPENDIX 1**

		Manager Responsible	Head of Service Position Statement		Responsible Financial Officer	
			Reason for Delay	Revised Implementation Date	RFO Opinion on Impact on Control/Financial Framework	Going Forward Action
<b>Agreed Action Status</b>	Red		<p>compliance across all three partners.</p> <p>A risk based approach is being taken, initially tackling the payment channels that have the highest volumes in terms of transactions.</p>		<p>on the body of work).</p> <p>I recommend this Audit Action is removed from the database and the service requirement is met via the establishment of it as a specific project that is overseen by the Project Management Governance Board.</p> <p>RFO comments as at 30/04/2017.</p> <p>The report element of this audit action must be completed by the revised deadline. Subsequent actions will require further implementation – but this work will constitute a work programme within the 3C's ICT shared services.</p>	Governance Board.

**OUTSTANDING INTERNAL AUDIT ACTIONS AS AT 30 NOVEMBER 2017**

**APPENDIX 1**

	Manager Responsible	Head of Service Position Statement		Responsible Financial Officer		
		Reason for Delay	Revised Implementation Date	RFO Opinion on Impact on Control/Financial Framework	Going Forward Action	
					Original implementation date : 31/03/2015.  No further extensions to be granted.	
<b>AUDIT</b>	<b>IT DISASTER RECOVERY</b>					
<b>Agreed Action (3)</b>	Management should produce technical recovery plans for all IT infrastructure, hardware and systems that are necessary to provide an IT service to the Council in the event of a disaster. These technical actions plans should be appended to the IT Disaster Recovery Plan and made available in the event of a disaster.	Network & Infrastructure Officer	The IT Disaster Recovery project will follow the Server Room consolidation, this is expected to be completed in February 2018 (there was no point developing a new IT DR until the server	30 <sup>th</sup> April 2018	RFO comments as at 04/01/2018:  It would have been a waste of resources to produce an IT Disaster Recovery plan etc prior to the Server Room consolidation. As noted in the 'Reason for Delay', the consolidation is expected to be completed by the end of February with all supporting documentation, including the IT Disaster Recovery Plan being completed by the end	The IT Disaster Recovery Plan to be completed by the 30 <sup>th</sup> April 2018.  No further extensions.
<b>Implementation Date</b>	30/09/2017					

**OUTSTANDING INTERNAL AUDIT ACTIONS AS AT 30 NOVEMBER 2017**

**APPENDIX 1**

		Manager Responsible	Head of Service Position Statement		Responsible Financial Officer	
			Reason for Delay	Revised Implementation Date	RFO Opinion on Impact on Control/Financial Framework	Going Forward Action
<b>Agreed Action Status</b>	Amber		room consolidation was completed)		of April.  Original implementation date : 30/06/2017.	
<b>AUDIT</b>	<b>FREEDOM OF INFORMATION</b>					
<b>Agreed Action (2)</b>	The existing FOI e-learning course(s) will be revisited and compared to any other similar course available through County. The agreed e-learning course should be advertised, encouraged and take-up monitored	Information Governance Manager	A new "eLearning" module is currently being procured which will include FOI.  The new eLearning module will be a comprehensive tool that will cover a number of different training areas.	31 <sup>st</sup> March 2018.	RFO comments as at 04/01/2017: Technically no extension can be allowed. However, because the FOI training is part of an overall eLearning suite it has been more cost effective to procure as one product.  The loss of control is limited, the Council has a relatively strong centralised FOI service.  RFO comments as at 30/04/2017.	The new eLearning suite will be in place by the 31 <sup>st</sup> March 2018.
<b>Implementation Date</b>	31/08/2017					
<b>Agreed Action Status</b>	Amber					

**OUTSTANDING INTERNAL AUDIT ACTIONS AS AT 30 NOVEMBER 2017**

**APPENDIX 1**

	Manager Responsible	Head of Service Position Statement		Responsible Financial Officer		
		Reason for Delay	Revised Implementation Date	RFO Opinion on Impact on Control/Financial Framework	Going Forward Action	
			Because of the need to ensure that the various modules will be compliant with the training needed, the procurement has taken a little longer than expected.		<p>The risk to the control / finance framework should be mitigated if the revised date is achieved.</p> <p>Manager comments at 30/04/17 were that 'e-learning portals will not be re-established until July 2017 therefore it is not possible to review courses until this date.</p> <p>Original implementation date : 31/03/2015.</p> <p>No further extensions.</p>	
<b>6</b>	<b>COMPLIANCE WITH THE TRANSPARENCY CODE</b>					
<b>Agreed Action (6)</b>	Training/guidance will be given to all responsible officers who prepare data	Information Governance Manager	Formerly this audit action was assigned	31 <sup>st</sup> January 2018	RFO comments as at 04/01/2018:	Full implementation by 31 <sup>st</sup> January 2018.

**OUTSTANDING INTERNAL AUDIT ACTIONS AS AT 30 NOVEMBER 2017**

**APPENDIX 1**

		Manager Responsible	Head of Service Position Statement		Responsible Financial Officer	
			Reason for Delay	Revised Implementation Date	RFO Opinion on Impact on Control/Financial Framework	Going Forward Action
	to ensure they are aware of their responsibilities and what is required from them e.g. data protection and redacting information; caveats data amendments; on-line publication/filing rules (formats and names) metadata etc.)		to a different service, but as of December 2017 it was agreed to be reassigned to 3C's ICT.		Strictly speaking no further extension should be granted. However, with the reassignment of the audit action and the fact that 3C's ICT have committed to complete by the end of January 2018, this is a pragmatic solution.	
<b>Implementation Date</b>	Amber		New training/guidance notes are currently being developed and will be implemented by the end of January 2018.		RFO comments as at 30/04/2017.	
<b>Agreed Action Status</b>	31/10/2017				The correct use of data is every member and officers responsible; however, job descriptions etc should identify where there are specific responsibilities. The issuing of up to date training/guidance should be an ongoing process by management so it can gain confidence that staff are	



**OUTSTANDING INTERNAL AUDIT ACTIONS AS AT 30 NOVEMBER 2017**

**APPENDIX 1**

		Manager Responsible	Head of Service Position Statement		Responsible Financial Officer	
			Reason for Delay	Revised Implementation Date	RFO Opinion on Impact on Control/Financial Framework	Going Forward Action
					meeting their responsibilities.  With the issuing of this latest guidance, although late, will meet this requirement. On balance, there is considered limited risk to the control/financial framework.  Original implementation date: 31/03/2016.  No further extensions.	
<b>AUDIT</b>	<b>DATA PROTECTION &amp; INFORMATION MANAGEMENT</b>					
<b>Agreed Action (10)</b>	The Senior Information Risk Officer (SIRO) shall decide how long information and emails etc. shall be kept within Anite, and the process for purging or archiving.	Corporate Team Manager.	The Anite retention module is being tested within the Benefits Service.	31 <sup>st</sup> March 2018	RFO comments as at 04/01/2018:  This action has only just been reassigned to the Corporate Team Manager. It is fair to give the officer an opportunity to implement so	Corporate Team Manager to implement by the revised deadline (31 <sup>st</sup> March 2018).
<b>Implementation</b>	30/06/2017					

**OUTSTANDING INTERNAL AUDIT ACTIONS AS AT 30 NOVEMBER 2017**

**APPENDIX 1**

		Manager Responsible	Head of Service Position Statement		Responsible Financial Officer	
			Reason for Delay	Revised Implementation Date	RFO Opinion on Impact on Control/Financial Framework	Going Forward Action
<b>Date</b>						
<b>Agreed Action Status</b>	Amber		The Corporate Team Manager inherited this action on becoming SIRO in Jan 2018. He has not been able to evaluate the issue or provide a revised implementation date.		an extension until 31 <sup>st</sup> March 2018 is granted.  No further extensions.  Original implementation date : 30/09/2016.	
<b>HEAD OF COMMUNITY SERVICES</b>						
<b>AUDIT</b>	<b>LICENSING</b>					
<b>Agreed Action (2)</b>	A fundamental review of the fees and charges for Hackney Carriage Licences should be undertaken to ensure that they are reasonable and proportionate to the costs	Licensing Manager	A robust spreadsheet has been completed, however it has identified that the recharges	31 <sup>st</sup> March 2018	RFO comments as at 04/01/2018:  No extension is 'formally' granted but the calculation of these costs has to be forensically correct. Finance	Finance Manager supplies required numbers by the 28 <sup>th</sup> February 2018.  Licensing Manager to implement by the 31 <sup>st</sup>

**OUTSTANDING INTERNAL AUDIT ACTIONS AS AT 30 NOVEMBER 2017**

**APPENDIX 1**

	Manager Responsible	Head of Service Position Statement		Responsible Financial Officer		
		Reason for Delay	Revised Implementation Date	RFO Opinion on Impact on Control/Financial Framework	Going Forward Action	
	incurred for the licensing regime. Furthermore, the accounting records for all income and expenditure should be transparent. Evidence should be maintained to support the review and that the appropriate approval has been obtained.		are still incomplete as they do not cover Councillor and officer costs associated with any committee work undertaken. These figures have been requested and are currently awaited. The review will be completed once the figures have been received.		are currently working on a new apportionment approach for democratic costs and have committed to complete this by the 28 <sup>th</sup> February 2018. This then will give Community Services a month to complete by the end of March 2018.  Original implementation date: 31/12/2016.	March 2018.
<b>Implementation Date</b>	30/09/2017					
<b>Agreed Action Status</b>	Red					

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**Public**  
**Key Decision – No**

## HUNTINGDONSHIRE DISTRICT COUNCIL

**Title/Subject Matter:** Internal Audit Service: Interim Progress Report  
**Meeting/Date:** Corporate Governance Committee – 17 January 2018  
**Executive Portfolio:** Strategic Resources: Councillor J A Gray  
**Report by:** Internal Audit & Risk Manager  
**Wards affected:** All Wards

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### **Executive Summary**

This report details the work completed by the Internal Audit Service during the period April to November 2017 and associated performance issues.

The Internal Audit & Risk Manager's opinion on the Council's internal control environment and systems of internal control as at 31 March 2017 was that it provided adequate assurance over key business processes and financial systems. From the work that has been completed since, that opinion remains unchanged.

During the reporting period it should be noted that:

- 1 'substantial', 4 'adequate' and 3 'little' assurance opinions were issued. There are no matters of significant concern arising from these reports that need to be brought to the Committee's attention.
- 24 audits are still to be completed. Fieldwork or report preparation is underway on 8 of these. BDO, the Council's contracted audit partner have agreed start dates for a further 10 audits.
- One audit – cash flow management - has been removed from the agreed audit plan.
- Three of the four service performance targets have been met.
- 100% of customers who returned 'end of audit' survey forms rated the value of the audit undertaken as good or very good.

An Internal Auditor resigned in November 2017 and subsequently the post has been identified as a saving in the 2018/19 draft revenue budget. Options are being developed around how changes in ways of working can mitigate this and maintain and enhance effectiveness.

### **Recommendations:**

It is recommended that the Committee in considering the report, comment on the Internal Audit & Risk Manager's unchanged opinion of 'adequate assurance' over the internal control environment and system of internal control.

## **1. WHAT IS THIS REPORT ABOUT/PURPOSE?**

- 1.1 This is an interim report detailing the performance of the Internal Audit Service for the period April to November 2017.

## **2. WHY IS THIS REPORT NECESSARY/BACKGROUND**

- 2.1 The Public Sector Internal Audit Standards (PSIAS) require that the Committee (who fulfil the role of the Board, as defined by PSIAS) receive an annual report on the work of the Internal Audit Service. Best practice suggests that an interim report should also be presented, to keep the Committee aware of any issues of concern that have been identified and the progress achieved with the delivery of the audit plan.

## **3. ANALYSIS**

### **Staffing**

- 3.1 The Internal Audit team comprises 3.13 full time equivalent (fte) staff. This is made up of 1.00 fte Audit & Risk Manager, 1.86 fte auditors and 0.27 fte specialist IT audit provided under contract.
- 3.2 One fte auditor was seconded in February 2017 for one year to the Transformation project. This was a significant loss of resources and the Committee were informed that BDO LLP (our IT audit partner) were being appointed to deliver 140 general audit days to mitigate the loss of the seconded auditor. The 2017/18 audit plan approved by the Committee on 22 March 2017 was based on the Internal Audit service delivering 412 audit days.
- 3.3 The seconded auditor resigned in November 2017. Due to the Council's financial position, the post has been identified as a potential saving and is included as such in the 2018/19 draft revenue budget due to be discussed by Overview & Scrutiny Panel (Performance and Customers) on 10 January.
- 3.4 The Internal Audit team are currently developing proposals around how some aspects of their work could be delivered differently and where alternative resources could be utilised to ensure effectiveness is maintained and where possible enhanced.

### **2017/18 audit plan delivery**

- 3.5 Committee approved the Internal Audit Plan (consisting of 30 reviews) at its March 2017 meeting. Audit reports that have been issued in the reporting period are listed below together with the assurance opinion that has been given.

Audit area		Action type & No.	
		Red	Amber
<b>Substantial<sup>1</sup></b>			
	Assets of community value		2
<b>Adequate</b>			
	IT Governance	---	---
	Payroll		5
	IT Project Management		5
	Hornbill – 3CITSS service desk application		6
<b>Limited</b>			
	Repairs and maintenance of operational property & equipment <sup>2</sup>	3	4
	One Leisure – Membership and Income		10
	Employee probationary period management		5
<b>No opinion given</b>			
	National fraud initiative data matching: review of potential frauds or irregularities.		

3.6 The position as at 30 November 2017 regarding the delivery of the approved audit plan is shown below. It is anticipated that all the audits will be completed by or shortly after 31 March 2018.

#### Reviews underway

- Client management of shared services
- Countryside services
- S106 Agreements
- Community infrastructure levy
- Procurement - Contract management
- Management of health & safety
- Refuse and kerbside waste collection
- IT: Network security

#### Reviews to commence

BDO

- Commercialisation – governance arrangements
- Ethical standards
- Commercial rents & estate management
- Compliance with the Code of Procurement
- Apprenticeships
- One Leisure – Bars & catering
- Contract reviews:
  - Civic Suite audio replacement
  - One Leisure energy management
- Housing benefits
- Environmental Health – regulatory activities
- Use of Consultants and compliance with IR35 legislation
- Staff and external communications
- Grounds maintenance and street cleaning
- IT: Data protection and GDPR compliance
- IT: Financial management system application

<sup>1</sup> Appendix A contains information that explains the assurance levels.

<sup>2</sup> Draft report issued at 30 November 2017.

- 3.7 One audit from the originally approved plan has been postponed until 2018/19 – cash flow management. This is primarily due to pressure on Resources staff and their need to concentrate on delivering the new FMS application.
- 3.8 Quarterly reviews of the key controls within the main financial systems were also planned to be completed:
- Council Tax and National Non Domestic Rates;
  - Financial Management System (FMS);
  - Accounts Payable (creditors);
  - Accounts Receivable (debtors).

The new FMS, Technology One (T1), was expected to be operational from April 2017 and internal audit key control reviews of the main accounting system, and associated creditor and debtor elements had been planned for the T1 system. The postponement of the go-live date for T1 created an on-going issue as to whether or not the quarterly reviews should be undertaken on the current [old] systems. The Internal Audit & Risk Manager decided not to complete these reviews. However, as T1 is now planned to go-live from April 2018, it has been decided that reviews of the current [old] systems will be undertaken as at December 2017. These reviews are due to commence in January 2018.

- 3.9 In addition to the delivery of the audit plan, Internal Audit has also completed work in a number of other areas. The main areas are:
- Reviewing the newly introduced online disclosure and barring service process.
  - Investigating missing cheques received by the Document Centre.
  - Assisting 3C ICT with information asset identification in preparation for the introduction of the General Data Protection Regulations (GDPR) In May 2018.
  - Providing guidance on newly introduced Public Health Funeral procedures.
  - Preparing the Code of Corporate Governance and 2016/17 annual governance statement.

#### **Issues of concern**

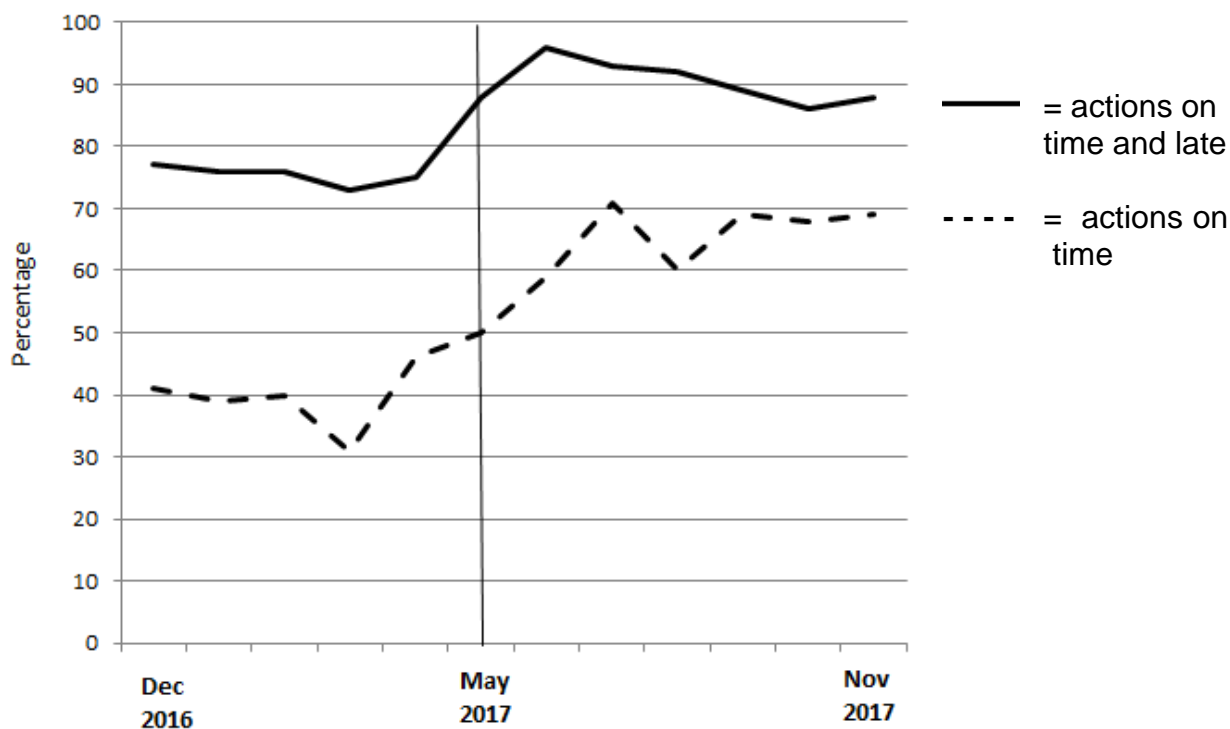
- 3.10 Committee members have received copies of all closed internal audit reports issued in the reporting period. Whilst there have been three limited assurance reports, they contain no issues of specific concern that need to be brought to the attention of the Committee.

As at 30 November 2017, it is the Internal Audit & Risk Manager's opinion that the Council's internal control environment and systems of internal control provide adequate assurance over key business processes and financial systems. This opinion remains unchanged from March 2017.

#### **Implementation of agreed actions**

- 3.11 At its May 2017 meeting, the Committee approved a new framework for resolving outstanding internal audit actions. The introduction of the framework has seen an increase in the overall percentage of actions introduced as the graph below shows.





3.12 As at the year ending 30 November 2017 there were 13 audit actions outstanding (five red and eight amber) from a total of 108 actions due. In accordance with the reporting framework agreed by the Committee in May 2017 a separate report on the agenda provides further information on the outstanding actions.

**Internal Audit performance**

3.13 Details of Internal Audit’s performance against its service plan performance targets are shown below.

**Customer Satisfaction**

Target: 85% or more of customers rate quality of audit as very good or good.  
 Achieved: 12 months to November 2017 – 100% (from 8 responses)

At the conclusion of all audits, managers are requested to complete an end of audit survey form and give an opinion on the value of the audit. The options available are – very good, good, acceptable, requires improvement or unacceptable. Performance is calculated on a rolling twelve month basis rather than by financial year.

**Service Delivery Targets**

There are four delivery elements to this target, all of which relate to the progress of individual audits and the reporting process.

Three of the targets have been met or exceeded. The target (b) that has not been achieved is new this year. It was not achieved due to delays incurred during the fieldwork stage of a review having a knock-on effect to the issue of the draft report.

	Target	November 2017	March 2017
a) Complete audit fieldwork by the date stated on the audit brief.	75%	On target 75%	58%
b) Issue draft audit reports within the month stated on the audit brief.	80%	Below target 75%	---
c) Meet with customer and receive response allowing draft report to progress to final within 15 working days of issuing draft report.	75%	Above target 78%	77%
d) Issue final audit report within 5 working days of receiving full response.	90%	Above target 94%	100%

### Internal Audit independence

3.14 In accordance with the Internal Audit Charter, the Internal Audit & Risk Manager continues to report functionally to the Corporate Governance Committee and administratively to the Head of Resources. He has maintained organisational independence and has had no constraints placed upon him in respect of determining overall audit coverage, audit methodology, the delivery of the audit plan or proposing actions for improvement or forming opinions on individual audit reports issued.

## 4. LINK TO THE CORPORATE PLAN

4.1 The Internal Audit Service provides assurance to both management and the Panel that risks to the delivery of the Corporate Plan across all of its areas are understood and managed appropriately.

## 5. LEGAL IMPLICATIONS

5.1 There are no direct legal implications arising from this report.

## 6. RESOURCE IMPLICATIONS

6.1 There are no direct resource implications. The 2017/18 internal audit plan is anticipated to be delivered within budget.

## 7. REASONS FOR THE RECOMMENDED DECISIONS

7.1 The report informs the Committee of the internal audit work undertaken and allows them to understand how the Internal Audit & Risk Manager has formed his opinion on the internal control environment and systems of internal control.

### LIST OF APPENDICES INCLUDED

Appendix A – Assurance level descriptions

## **BACKGROUND PAPERS**

Internal Audit reports

Internal Audit performance management information

## **CONTACT OFFICER**

David Harwood, Internal Audit & Risk Manager

 **01480 388115**

## Description of Assurance Levels

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

**CORPORATE GOVERNANCE COMMITTEE PROGRESS REPORT**

<b>Committee</b>	<b>Decisions</b>	<b>Date for Action</b>	<b>Action Taken</b>	<b>Officer Responsible</b>	<b>Delete from future list</b>
<b>07/12/2016</b>	<p><b><u>Skills, Knowledge and Effectiveness Review</u></b></p> <p>The Corporate Governance Committee resolved:</p> <p>i. that a training programme be devised by the Internal Audit and Risk Manager in consultation with the Corporate Governance Committee Chairman, and that training be delivered ahead of Committee meetings; and</p> <p>ii. that an Informal Corporate Governance Committee meeting be arranged in January or February to undertake an effectiveness review.</p>		<p>An Informal Corporate Governance Committee was held on 25 January 2017 for a self-assessment review of its own effectiveness.</p>	Internal Audit and Risk Manager	No
<b>24/05/17</b>	New Members to receive the training survey. IRAM to submit report on training options.	12/07/17	Report submitted and training event agreed.	Internal Audit and Risk Manager	
<b>12/07/17</b>	Training to be provided on the values of good governance, external audit and internal audit.	12/09/17	Training arranged.	Internal Audit and Risk Manager.	

**CORPORATE GOVERNANCE COMMITTEE PROGRESS REPORT**

<b>Committee</b>	<b>Decisions</b>	<b>Date for Action</b>	<b>Action Taken</b>	<b>Officer Responsible</b>	<b>Delete from future list</b>
<b>22/3/2017</b>	<p><b><u>Code of Conduct and Register of Disclosable Pecuniary Interests</u></b></p> <p>Audit to be undertaken of those parishes that have adopted their own version of the Code of Conduct.</p>	TBA	TBA	Policy, Performance and transformation Manager and Elections and Democratic Services Manager	No
<b>12/07/17</b>	<p><b><u>CGC Annual Report</u></b></p> <ul style="list-style-type: none"> <li>• Annual Report approved for submission to the Council,</li> <li>• Internal Audit and Risk Manager authorised to make amendments to the Report after consulting the Chairman</li> <li>• Internal Audit and Risk Manager to consider terms of a draft work plan.</li> </ul>	27/09/17	Annual report to be included in the Agenda for the Council.	Internal Audit and Risk Manager.	
		12/17	Chairman and Vice-Chairman to be consulted.	Internal Audit and Risk Manager.	No
<b>12/07/17</b>	<p><b><u>Annual Review of Thresholds – Disposals and Acquisitions Policy</u></b></p> <p>Policy endorsed. Further review to take place in 24 months.</p>	07/2019	Review to be undertaken in 2019	Head of Resources	No

**CORPORATE GOVERNANCE COMMITTEE PROGRESS REPORT**

<b>Committee</b>	<b>Decisions</b>	<b>Date for Action</b>	<b>Action Taken</b>	<b>Officer Responsible</b>	<b>Delete from future list</b>
<b>12/07/17</b>	<b><u>Governance Boards</u></b>				
	Noted changes to the structure and responsibilities of the Governance Boards.	10/18	New safeguarding procedures to be introduced	Head of Leisure and Health	Yes
		09/17	Head of Resources and Transformation Board to be consulted on Governance Boards' routes for reporting to Members		
		07/18	Annual reporting process to commence.	Head of Resources	
<b>13/09/17</b>	<b><u>Approval for Publication for the 2016/17 Annual Governance Statement and the Annual Financial Report</u></b>				
	Statutory decisions approved.  Further information requested on progress of key improvement areas.	01/18	Information appears in a separate report on this subject elsewhere on the Agenda.	Internal Audit and Risk Manager	Yes
	<b><u>Disposal of Small Land</u></b>				

**CORPORATE GOVERNANCE COMMITTEE PROGRESS REPORT**

<b>Committee</b>	<b>Decisions</b>	<b>Date for Action</b>	<b>Action Taken</b>	<b>Officer Responsible</b>	<b>Delete from future list</b>
29/11/17	<p><b><u>Parcels Policy / Updates to the Disposals and Acquisitions Policy</u></b></p> <p>Policy endorsed. Council recommended to approve any consequential changes.</p>	13/12/17	Policy endorsed and consequential changes approved.	Head of Resources	Yes
29/11/17	<p><b><u>Community Governance Review – Great and Little Gidding Parish Council</u></b></p> <p>Request for a Community Governance Review and terms of Reference for the Review approved. Elections and Democratic Services Manager authorised to agree a timetable for the</p>	01/18	See report elsewhere on the Agenda.	Elections and Democratic Services Manager	Yes