

# Audit Committee

29 July 2019



**Report of:** Director of Finance

**Title:** Annual Governance Statement Tracker

**Ward:** N/A

**Officer Presenting Report:** Denise Murray

**Contact Telephone Number:** 0117 3576627

## Recommendation

The Audit Committee note the progress made to date against the Annual Governance Statement (AGS) action plan for 2017/18, proposal for taking forward any residual actions and consider any issues arising.

## Summary

The AGS for previous years identified a number of weaknesses that needed to be addressed to ensure continuous improvement in the governance framework and financial and budget management within the Council.

The areas identified for improvements were incorporated into a separate AGS Action Plan for 2017/18, monitored in 2018/19 and progress reported to the Audit Committee. A number of residual items remained outstanding in 2019, updates and were required the proposed approach for taking these items forward are provided in this report.



## 1. Purpose

1.1. To report on the progress made to date against the AGS Action Plan for 2017/18.

## 2. Background

2.1. The members of the Audit Committee previously endorsed, in their meeting on 23rd June 2017, that the Committee should receive regular monitoring reports advising of progress against the AGS Action Plan. The last report was presented to Committee in January 2019 and this report sets out the progress made since then and the tracker records the actions implemented to address the improvements identified.

2.2. The progress made to date against the implementation of the agreed actions arising from the Councils response to the Bundred review is summarised below and the high level narrative and detailed schedule is outlined in Appendix A.

Table 1 - Changes in the Implementation of Actions from the Bundred Review

Status	September 2018	January 2019	July 2019
Green – Completed and Evidenced	75 (88%)	77 (91%)	85 (100%)
Amber – In Progress with Evidence	10 (12%)	8 (9%)	0(0%)
Red – Not Started / Started but not Evidenced, date at risk	0 (0%)	0 (0%)	0 (0%)
<b>Total</b>	<b>85</b>	<b>85</b>	<b>85</b>

2.3. Since the previous report to the Audit Committee in January 2019, all outstanding actions from the Bundred review have been implemented:

- **B58** – Housing Delivery and HRA Peer Challenge - **Amber to Green**
- **B60** – Adult Social Care Peer Challenge – **Amber to Green**
- **B72** – Permanent Finance Structure – **Amber to Green**
- **B73** – Assessment Centre for Finance restructure – **Amber to Green**
- **B74** – Conditions for Finance Function – **Amber to Green**
- **B78** – Appointment of Business Partner – **Amber to Green**
- **B79** – Implementation of Competency Framework – **Amber to Green**
- **B80** – Learning and Development Programme – **Amber to Green**

2.4. The progress made to date against implementation of the actions required from the AGS 2017/18 is summarised in table 2 below and the high level narrative and detailed schedule is outlined in Appendix C:

2.5. Two of the items were identified as recommended areas of improvement following the LGA peer review and to prevent duplication are being monitored by Cabinet as part of the LGA improvement action plan. As a result of the transfer the overall number of 2017/18 actions being monitored via this plan have reduced from 13 to 11.

- **AGS 11.1** – Member Development Programme
- **AGS 12.1** – Performance Management

Table 2 - Changes in the Implementation of Actions from the AGS 2017/18

Status	September 2018	January 2019	July 2019
Green – Completed and Evidenced or transferred	0 (0%)	1 (9%)	8 (73%)
Amber – In Progress with Evidence	0 (0%)	6 (55%)	3 (27%)
Red – Not Started / Started but not Evidenced, date at risk	13 (100%)	4 (36%)	0 (0%)
<b>Total</b>	<b>13</b>	<b>11</b>	<b>11</b>

**Commented [FB1]:** Should we put total 11 and remove LGA ones from below

2.6. Since the previous report to the Audit Committee in January 2019, the principal changes in the implementation of the AGS 2017/18 review have been:

- **AGS 1.1** – Treatment of the homeless – **Amber to Green**
- **AGS 2.1** – Multi Agency Review recommendations – **Amber to Green**
- **AGS 5.1** – Future State Assessment of ICT – **Red to Green**
- **AGS 6.1** – Digital Vision – **Red to Green**
- **AGS 7.2** – Partnership Working (commercial Training) – **Red to Green**
- **AGS 8.1** – Risk Management – **Amber to Green**
- **AGS 9.1** – Capital Projects Delivery – **Red to Green**

2.7. The improvements that require a programmed approach with elements still to be finalised are as follows:

- **AGS 4.1** – Delivery of improved level of education - **Amber**
- **AGS 7.1** – Partnership Working (policy, toolkit and agreements) – **Amber**
- **AGS 10.1** – Contract Management Improvements - **Amber**

- 
- 

### 3. Proposal

3.1. The Audit Committee considers the progress made to date against the Action Plan and proposed actions to address 2017/18 improvement areas, consider any issues arising and challenge where appropriate.

### 4. Other Options Considered – N/A

### 5. Risk Assessment

5.1. The publication of an AGS is a legal requirement and the processes of implementation, monitoring and reporting of improvement actions arising therefore constitute an important element of the Council's governance arrangements. The actions identified within the response to the AGS constitute important measures whereby the Council's overall management of organisational risk can be enhanced.

### 6. Public Sector Equality Duties

**6.1.** Before making a decision, section 149 Equality Act 2010 requires that each decision-maker considers the need to promote equality for persons with the following “protected characteristics”: age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation. Each decision-maker must, therefore, have due regard to the need to:

- i) Eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act 2010.
- ii) Advance equality of opportunity between persons who share a relevant protected characteristic and those who do not share it. This involves having due regard, in particular, to the need to --
  - remove or minimise disadvantage suffered by persons who share a relevant protected characteristic;
  - take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of people who do not share it (in relation to disabled people, this includes, in particular, steps to take account of disabled persons’ disabilities);
  - encourage persons who share a protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- iii) Foster good relations between persons who share a relevant protected characteristic and those who do not share it. This involves having due regard, in particular, to the need to –
  - tackle prejudice; and
  - promote understanding

**6.2** No Equality Impact anticipated from this report.

## **7. Legal and Resource Implications**

**Legal – N/A**

**Financial – N/A**

**Land – N/A**

**Personnel – N/A**

## **8. Appendices:**

- Appendix A – Bundred Review Actions
- Appendix B - Annual Governance Statement Actions 2016/17
- Appendix C - Annual Governance Statement Actions 2017/18

## **LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985**

## **9. Background Papers:**

None

## Appendix A – Bundred Review Actions

<b>Bundred Actions by Recommendation</b>		Total Actions	All			% Complete
#	Recommendation		Green	Amber	Red	
<b>1</b>	1 - For future significant savings programmes, especially any involving projects which embrace more than one Directorate, the Council should ensure stronger governance arrangements and clearer Member oversight	14	14	0	0	100%
<b>2</b>	2 - Wherever possible, the Council should ensure that responsibility for the delivery of specific savings initiatives is allocated to Directorates so that ownership of savings programmes and accountability for them is clear	1	1	0	0	100%
<b>3</b>	3 - The Council should adopt a more disciplined, centrally driven approach to business cases supporting investment decisions or savings projects. There should be a standard template of what constitutes an acceptable business case and a standard procedure through which the template must be completed and approved	7	7	0	0	100%
<b>4</b>	4 - The Council should take steps to build on recent improvements in the quality of reporting and document management. Where necessary guidance should be issued, or training provided, to report authors emphasising the importance of clarity, transparency, analysis and advice	13	13	0	0	100%
<b>5,6</b>	5 - Members should be less tolerant of poor quality reports than they appear to have been in the past 6 - Where they do not already exist, arrangements should be made for report authors to receive feedback from Member or senior officer discussion of their reports as a matter of routine	2	2	0	0	100%
<b>7</b>	7 - Relevant officers should be reminded of their responsibilities to keep backbench and Opposition Members properly informed	6	6	0	0	100%
<b>8</b>	8 - The incoming chief executive should be invited to consider and report on the steps needed to improve the management culture within the Council, recognising that any necessary changes will take three to five years to embed. There should be an emphasis on greater openness, professionalism, delegation, mutual respect and better internal communication, but with fewer large and lengthy meetings	17	17	0	0	100%
<b>9</b>	9 - The Council should take further steps to improve the quality of its Finance function, modernise its role and enhance its status. Relevant outstanding recommendations of the review commissioned in December 2015 should be actioned as a matter of urgency	11	11	0	0	100%
<b>10</b>	10 - The previous recommendation that the Council should “Develop a Competency Framework and agree the way forward re Assessment and Development centres” in relation to its Finance staff is overdue and should be given priority	4	4	0	0	100%
<b>11</b>	11 - This should be actioned alongside a review of the role and requirements of Business Partners as part of the current review of the Finance Directorate structure	5	5	0	0	100%
<b>12</b>	12 - The more timely reporting of budget monitoring information that has now been introduced should continue into the future. If the Council opts to return to quarterly budget monitoring and the first quarter report cannot be considered in July, there should be routine reporting in June or July of the position as at the end of May	5	5	0	0	100%
		85	85	0	0	100%

## Appendix B – Annual Governance Statement Actions 2016/17

No.	Recommendation	Activity Ref	Noted Activity	Responsible Owner (SLT member, Service Director)	Revised Date (if applicable)	R/A/G	Comments on RAG - July 2019
8	The incoming chief executive should be invited to consider and report on the steps needed to improve the management culture within the Council, recognising that any necessary changes will take three to five years to embed. There should be an emphasis on greater openness, professionalism, delegation, mutual respect and better internal communication, but with fewer large and lengthy meetings (paragraph 129).	B58	Participation in the Housing Delivery and HRA Peer Challenge	Julian Higson	Mar-19	G	A report was provided in March 2019 to Exec Director (Growth and Regeneration) to update on progress with benchmarking and peer visits. This illustrates how the housing service has embraced and is developing sector benchmarking across areas of operation, reinforced with a programme of peer research/networking. This mainstreaming into normal business activity effectively replaces the need for a HRA peer review at this point.
8	The incoming chief executive should be invited to consider and report on the steps needed to improve the management culture within the Council, recognising that any necessary changes will take three to five years to embed. There should be an emphasis on greater openness, professionalism, delegation, mutual respect and better internal communication, but with fewer large and lengthy meetings (paragraph 129).	B59	Participation in the Children's Social Care Peer Challenge	Jacqui Jensen	Ongoing	G	Activity complete this has been negated by the Ofsted ILACS inspection of children's services which took place in September 2018. There is also a Early Year Peer Challenge scheduled for February 2019 - no update provided yet.
8	The incoming chief executive should be invited to consider and report on the steps needed to improve the management culture within the Council, recognising that any necessary changes will take three to five years to embed. There should be an emphasis on greater openness, professionalism, delegation, mutual respect and better internal communication, but with fewer large and lengthy meetings (paragraph 129).	B60	Participation in the Adult Social Care Peer Challenge	Jacqui Jensen	Mar-19	G	The initial review by the LGA took place on 7 February. The LGA attended ASC management team on the 20th June and a follow up workshop is being arranged for September. A report is being produced for SPB that will summarise the findings of the peer review and the follow up work which is planned.

No.	Recommendation	Activity Ref	Noted Activity	Responsible Owner (SLT member, Service Director)	Revised Date (if applicable)	R/A/G	Comments on RAG - July 2019
10	The previous recommendation that the Council should "Develop a Competency Framework and agree the way forward re Assessment and Development centres" in relation to its Finance staff is overdue and should be given priority (paragraph 134).	B72	Appointment of a permanent structure based on CIPFA principles	Denise Murray	Mar-19	G	The Finance service has been redesigned with the aim to be a professional service, adequately resourced to meet the needs of the business. Following staff consultation the function has been restructured which facilitates the ability to appropriately support core business and have the agility to provide additional skills and capacity as and when required for specific projects. Over the last 6 months, we have worked closely with CIPFA to design a competency framework for the function and development centres supported by both CIPFA and Penna have been rolled out for all staff (including Business Partners), on a tiered basis. Independent assessments were undertaken, highlighting individual strengths and weaknesses and a report produced of the outcome with areas for development identified for each member of staff. These reports along with Expressions of Interest submitted by officers have guided the allocation process for roles within the structure and development areas incorporated into My Performance Development objectives for 2019/20. In addition to the above, a programme of officer learning lunches has been delivered with a schedule of future learning activity planned for the next period. A learning and development plan has been created which will support professional accountancy training for 2019/20 onwards and request for professional finance training propositions are being considered for the next academic year.
		B73	Utilise an assessment centre based on those which have been developed and used in other authorities	Denise Murray	Mar-19	G	See B72 above.
		B74	The finance function needs to create the conditions that enable it to be agile, adaptable, and accountable and to learn from success as well as failure so that responding quickly to change is second nature, constantly striving for the best possible services and outcomes	Denise Murray	Mar-19	G	See B72 above.
11	This should be actioned alongside a review of the role and requirements of Business Partners as part of the current review of the Finance Directorate structure (paragraph 134).	B78	Appointment of Business Partner roles on a skills based assessment	Denise Murray	Mar-19	G	See B72 above.
11	This should be actioned alongside a review of the role and requirements of Business Partners as part of the current review of the Finance Directorate structure (paragraph 134).	B79	A competency framework will be implemented which outline the set of competencies needed to perform each of the roles effectively and career progression pathway	Denise Murray	Mar-19	G	See B72 above.
11	This should be actioned alongside a review of the role and requirements of Business Partners as part of the current review of the Finance Directorate structure (paragraph 134).	B80	The organisation is in the process of building the learning & development programme	Denise Murray	Mar-19	G	See B72 above.

## Appendix C – Annual Governance Statement Actions 2017/18

AGS 18-19 Actions by Recommendation		Total Actions	All	Amber	Red	% Complete
Recommendation			Green	Amber	Red	
1	The Local Government and Social Care Ombudsman report into the treatment of a homeless family identified a number of recommendations to be addressed. This report was considered by Cabinet in May 18 with a further detailed action plan to be considered at a future Cabinet meeting, date to be confirmed.	1	1	0	0	100%
2	The Multi-Agency review following the death of Mr Bijan Ebrahimi identified recommendations for the Council which require ongoing monitoring.	1	1	0	0	100%
3	There is a need to enhance the support of the integration of health and social care by ensuring effective governance is in place in relation to delayed transfers of care.	1	1	0	0	100%
4	A detailed review is required and plan developed which supports schools to deliver a good or improved level of education within a reduced funding envelope.	1	0	1	0	0%
5	The Future State Assessment of ICT within the Council has recognised the need to stabilise ICT and ensure it supports transformation going forward. This should include reviewing disaster recovery arrangements.	1	1	0	0	100%
6	Having a strong business led digital vision and strategy for the organisation will support service change and drive the organisation to delivery to citizen expectations with regards to the digitisation of services.	1	1	0	0	100%
7	Arrangements for the Council's approach to working in partnerships have been set up with varying levels of formality. Governance and risk management arrangements are inconsistent in the absence of clearly defined governing principles. (This was reported in the 2016/17 AGS).	2	1	1	0	50%
8	Risk Management processes need to be consistently applied in order to embed risk management across the Council. (This was reported in the 2016/17 AGS).	1	1	0	0	100%
9	There has been significant slippage in delivery of key capital projects in line with the agreed capital programme. (This was reported in the 2016/17 AGS)	1	1	0	0	100%
10	Audit reviews and responses in the Assurance Statements identified weaknesses in the consistency of contract management arrangements and also the use of contract waivers continues to be high and reflects the need for improved contract planning have been identified by both. (This was reported in the 2016/17 AGS)	1	0	1	0	0%
11	LGA IMPROVEMENT ACTION PLAN - It has been identified that there is a need for the member development programme to focus on members' core skills, community leadership and decision making roles. (This was reported in the 2016/17 AGS).	0	0	0	0	#DIV/0!
12	LGA IMPROVEMENT ACTION PLAN - Performance management of our employees has been inconsistent with only 42% having registered completed performance reviews. (This was reported in the 2016/17 AGS)	0	0	0	0	#DIV/0!
		11	8	3	0	73%

Ref	Issue Identified	Activity Ref	Noted Activity	Responsible Owner (SLT member, Service Director)	Revised Date	R/A/G	Comments on RAG - July 2019
1	The Local Government and Social Care Ombudsman report into the treatment of a homeless family identified a number of recommendations to be addressed. This report was considered by Cabinet in May 18 with a further detailed action plan to be considered at a future Cabinet meeting, date to be confirmed.	AGS 1.1	A follow up report will be going to Cabinet on the 2 <sup>nd</sup> October 2018 and any actions for BCC will be outlined in the report.	Colin Molton	Ongoing	G	The report and action plan were endorsed by Cabinet in October. The Ombudsman approved the action plan. All Ombudsman recommendations have now been completed. RAG status can be changed to Green.
2	The Multi-Agency review following the death of Mr Bijan Ebrahimi identified recommendations for the Council which require ongoing monitoring.	AGS 2.1	An action plan for the partnership is being produced with support from Avon & Somerset police. This plan will enable the commitments made by all the relevant agencies (BCC, SARI and Avon & Somerset Police) following the review to be monitored.	Colin Molton	Ongoing	G	A comprehensive multi-agency action plan is in place, which includes every commitment from relevant agencies. The plan was communicated to the Ebrahimi family. Progress has been monitored by the Safer Bristol Partnership Board; monitoring will continue until all actions are complete. Closure report drafted by ASP and BCC. Joint meeting scheduled for 9th Sept 2019 with SARI and the family.
4	A detailed review is required and plan developed which supports schools to deliver a good or improved level of education within a reduced funding envelope.	AGS 4.1	<p>A new permanent Director of Education and Skills has been appointed and starts at the beginning of October 2019.</p> <p>They will continue the work underway in bringing together a fully costed whole system improvement. This will include the following:</p> <p>A plan for whole system education improvement which will optimise the successful funding bid for school improvement/SEND improvements and inclusion.</p> <ul style="list-style-type: none"> <li>• Education restructure consultation begins mid-July</li> <li>• Attendance Strategy signed off by schools and partners - work ongoing</li> <li>• SEND transformation plan, strategy and SEF is in place</li> <li>• Inclusion approach implemented and will be led by a new HOS post.</li> </ul>	Jacqui Jensen	Ongoing	A	<p>The RAG status remains Amber however work is progressing at pace. A Cabinet report was produced to secure additional investment for SEND resources and Business Case will be produced for October Cabinet which will provide an analysis of the future resource required to meet SEND requirements, school improvement and inclusion.</p> <p>Quarterly reporting to EDM remains in place.</p> <p>A new Quality Assurance and performance framework is in place and enabling high support and challenge which is providing transparency to senior leaders.</p>
5	The Future State Assessment of ICT within the Council has recognised the need to stabilise ICT and ensure it supports transformation going forward. This should include reviewing disaster recovery arrangements.	AGS 5.1	<p>A governance board has been set up to oversee the delivery of FSA. The FSA Delivery Board commenced on 28th August, chaired by Head of Paid Service with Cabinet Member oversight.</p> <p>BCC is currently represented and considering is being given as to whether this should be extended.</p> <p>The review will consist of the following things:</p> <ul style="list-style-type: none"> <li>• Outline business cases in line with the FSA plan.</li> <li>• Key project around data centre migration and migration out of the data centre back to BCC site in a precursor to maintain services as the Swindon data centre contract expires.</li> <li>• Migrate out systems to both Azure cloud and Ark data centres in line with our data centre strategy.</li> </ul>	Mike Jackson	Ongoing	G	The FSA Transformation Programme (now named IT Transformation Programme) has now engaged a delivery partner and planning for each of the work streams is in active progress - these work streams include disaster recovery arrangements. Appropriate resources are being put in place to support the delivery programme and the IT organisation review has been published. The Delivery Board, comprising senior stakeholders and independent audit, maintains governance over the programme. DR arrangements are part of the ITTP and IT work programmes. Consideration to close this action.

Ref	Issue Identified	Activity Ref	Noted Activity	Responsible Owner (SLT member, Service Director)	Revised Date	R/A/G	Comments on RAG - July 2019
6	Having a strong business led digital vision and strategy for the organisation will support service change and drive the organisation to delivery to citizen expectations with regards to the digitisation of services.	AGS 6.1	<p>Director of digital Transformation has been appointed and this role will lead the development of our digital vision.</p> <p>Current actions in relation to digital strategy are:</p> <ul style="list-style-type: none"> <li>• Currently building enabling platforms for future digital transformation to utilise; FSA does not provide this transformation.</li> <li>- The strategy (technology, process and procurement) will be developed based on the direction taken within FSA (decisions still to be made).</li> <li>- The CRM deliverable is the first proof of concept of the digital approach and this will help form the final approach.</li> </ul> <ul style="list-style-type: none"> <li>• Disaster recovery will be addressed via two approaches:</li> <li>- Cloud hosting which provides a range of resilience and DR capabilities.</li> <li>- A move to an improved physical asset data centre which removes some of the issues with our current arrangements.</li> </ul> <p>The physical hosting will not provide the level of resilience as our cloud option, so further work (outside of FSA) will need to be commissioned to move some key systems to the new arrangements; some of these will involve re-procurements so best wait for the CRM approach to be proven. Some will be part of an already planned Phase 2 where possible/compatible</p>	Mike Jackson	Sep-19	G	The IT Transformation Programme will deliver the Digital Strategy in Q3 2019, incorporating the contents of the Microsoft DAS report. Consider closing.
7	Arrangements for the Council's approach to working in partnerships have been set up with varying levels of formality. Governance and risk management arrangements are inconsistent in the absence of clearly defined governing principles. (This was reported in the 2016/17 AGS).	AGS 7.1	<ol style="list-style-type: none"> <li>1. Reviewing and refreshing the Partnership Policy and Toolkit by end October 2018.</li> <li>2. Creating a central Partnership Register including SLAs, ToRs and contracts where appropriate by end October 2018.</li> <li>3. Creating a template TOR and porting existing TORs to it by end October 2018.</li> </ol>	Mike Jackson	Ongoing	A	<p>A draft refreshed Partnerships Policy has been prepared and initial director feedback given. A target date to approve this policy by end Aug 19 has been set. The delay is caused by staff capacity in the absence of any dedicated partnerships team or staff.</p> <p>A template TOR is being drafted alongside the policy and a toolkit to be developed thereafter.</p> <p>Following an audit of Risk Management Assurance, fresh consideration is being given to how this is accounted for in partnership settings, with this element to be included within the new policy.</p>
7	Arrangements for the Council's approach to working in partnerships have been set up with varying levels of formality. Governance and risk management arrangements are inconsistent in the absence of clearly defined governing principles. (This was reported in the 2016/17 AGS).	AGS 7.2	<ol style="list-style-type: none"> <li>1. Scope and review need for Commercial Training for relevant managers as part of the developing commercial strategy.</li> </ol>	Mike Jackson	Ongoing	G	This is an ongoing Training Programme. The programme has been developed and first phase of which was delivered to Commercialisation and Citizens colleagues over three sessions from November 2018 to February 2019. The next Phase has been paused to allow for the realignment of the C+C team with the appointment of new members, including two Commercial Services Business Partners and Commercialisation Development Team members, who will provide the additional resource to support the continuing rollout of this Training Programme.

Ref	Issue Identified	Activity Ref	Noted Activity	Responsible Owner (SLT member, Service Director)	Revised Date	R/A/G	Comments on RAG - July 2019
8	Risk Management processes need to be consistently applied in order to embed risk management across the Council. (This was reported in the 2016/17 AGS).	AGS 8.1	<ul style="list-style-type: none"> <li>• Appointment of a Risk and Insurance Manager.</li> <li>• Risk Management Assurance Strategy.</li> <li>• Risk Management Improvement Plan.</li> <li>• Strengthening and further embedding the risk management process, reporting and alignment to other business processes.</li> <li>• Focused risk workshops rolled out across the organisation.</li> <li>• Risk Management Awareness training and supporting E-learning package.</li> </ul> <p>This has now been updated and replaces the item on the 2016/17 AGS tracker.</p>	Mike Jackson	Ongoing	G	<p>The refreshed Policy was approved in January 2019 to further embed the risk management. Significant progress is being made on consistency being applied across the Council.</p> <p>Business risks are recorded on the Service Risk Registers on a quarterly basis which form the Directorate Risk Report and then the Signiant and core risks are escalated to form the Corporate Risk Report. The leadership receive and review the risks prior to escalation to Cabinet. Reports are then received by the Audit Committee and Scrutiny. The risk management process is a cyclical live process and should not have an end point.</p> <p>A communication plan, improvement plan and a risk register guidance document has been drafted and currently under review.</p> <p>The Corporate Risk Management Group was formed in February 2019. The group will assist with embedding risk management across the complimentary functions Business planning, decision making, Project management, Partnerships, Procurement, Health Safety and Wellbeing, Business Continuity, Performance Management and Insurance.</p> <p>In 2019 a self assessment to inform on performance and compliance will be introduced to monitor and report on progress and maturity of the process.</p> <p>For new projects - Project Management are progressively adopting the scoring criteria as set out in the new Policy.</p>
9	There has been significant slippage in delivery of key capital projects in line with the agreed capital programme. (This was reported in the 2016/17 AGS)	AGS 9.1	<p>Corporate deep dive of all capital projects due in September 2018.</p> <p>Transport Delivery Board in transport division will review their capital programme fortnightly, and is governed by the Growth and Regeneration Board (G&amp;R Board).</p> <p>G&amp;R Board currently review capital programmes within G&amp;R and will continue to do so.</p> <p>Finance and G&amp;R officers have drafted new TOR for the G&amp;R Board which will incorporate reviewing the whole capital programme as part of its remit. Chris Holme to review this with Mike Jackson.</p> <p>This has now been updated and replaces the item on the 2016/17 AGS tracker.</p>	Colin Molton	Ongoing	G	<p>The proposals previously identified for strengthen delivery of the capital programme have been implemented but have not been effective in driving the change we hoped to see.</p> <p>The following subsequent action has been taken.</p> <p>A new Capital Strategy has been developed and was approved by Council along with the MTFP and Council approved the Capital Programme in February 2019. Proposals for strengthening governance and reporting agreed by CLB on 19 March 2019. This included the formation of a new capital function with Finance, Capital Board and Delivery Executive (supported by PMO) chaired by a Cabinet Member. The approach to be adopted to obtain reach back capacity in a number of functions is being considered. The new reporting regime will include monitoring of both finance and delivery performance / milestone outputs.</p> <p>The first meeting of the Extended CLB / Capital Board was held on 2 July 2019 and go-going forward the Capital Board will meet on a monthly basis, with exception reporting and call-in's led by Delivery Executive. The impact of the changes will not be fully realised until 2020; workshops are taking place to consider the necessary reprofiling of the programme and details will continue to be tracked and reported in the monthly monitoring, refreshed strategy and budget reports.</p> <p>The next meeting of the Capital Board will be on 6 August 2019</p>

Ref	Issue Identified	Activity Ref	Noted Activity	Responsible Owner (SLT member, Service Director)	Revised Date	R/A/G	Comments on RAG - July 2019
10	Audit reviews and responses in the Assurance Statements identified weaknesses in the consistency of contract management arrangements and also the use of contract waivers continues to be high and reflects the need for improved contract planning have been identified by both. (This was reported in the 2016/17 AGS)	AGS 10.1	<ol style="list-style-type: none"> <li>1. Develop and utilise Category Planning to help better manage contracts through their lifecycle</li> <li>2. Standardise the language on contract templates to improve consistency and common approaches</li> <li>3. Greater engagement of Procurement leaders with EDMs and commissioning leads to increase commitments to contract management.</li> <li>4. Commission and make intelligent use of technology and software to improve visibility of contracts.</li> <li>5. Design, assess and gain commitment from the commissioner to bespoke performance goals, before setting contracts in place (ongoing).</li> <li>6. Standardise the approach for contract management across all service areas, using corporate training to deliver key principles, embed performance measurement based on importance of need and increase quality standards</li> </ol> <p>This has now been updated and replaces the item on the 2016/17 AGS tracker.</p>	Mike Jackson	Ongoing	A	<p>Targets have been revised to ensure that they are smart.</p> <ol style="list-style-type: none"> <li>1. Category Management/Planning is on-going and encapsulates Lifecycle costs, TCO (Total Cost of Ownership) to ensure best VFM is obtained</li> <li>2. A suite of standard documents has been created for contract templates and a document control system is in place for these documents.</li> <li>3. Category teams have created and implemented regular client engagement programmes to ensure early engagement and commitment to contract management and compliance</li> <li>4. Each Category Team has put together a master contract plan and pipeline activity for its respective service area. These master plans capture all live contracts contracts/projects which then feeds down into a yearly pipeline activity based on their respective expiry dates. These are regularly updated.</li> <li>5. Category teams work closely with commissioners to establish KPI's /Performance /Bench Marking to ensure they are an integral part of every contract that is let.</li> <li>6. Additional resources have been commissioned to provide increase capacity within the team and specialist support is in the process of being commissioned for increased contract management / scrutiny capacity. The use of procurement professionals will be for key contracts such as PFI contracts to exemplify improved performance and best practice.</li> <li>7. Procurement triage team and CPG are reviewing fwd. plans and seeking compliant routes to market that can meet the needs of the business and assure that waivers are not used inappropriately. Once the additional support is in place this action will move from Amber to Green.</li> </ol>