

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
1a	Mechanism established to identify principal statutory obligations	Responsibilities for statutory obligations are formally established	<ul style="list-style-type: none"> <li>• Council's Constitution.</li> <li>• Role of the Cabinet, and all other specific council committees, e.g. licensing, defined.</li> <li>• Committee terms of reference</li> <li>• Scheme of delegation in place and reviewed on regular basis.</li> <li>• Structure charts</li> <li>• Job descriptions of relevant managers (Head of Paid Service, Monitoring Officer, s151 Officer)</li> <li>• Scheme of Delegation reviewed in 2008/9 - revised scheme agreed by full Council on 30<sup>th</sup> March.</li> </ul>	Terms of reference for all committees reviewed annually before being agreed each year by full Council
1b	Record held of statutory obligations	Record held of statutory obligations	<ul style="list-style-type: none"> <li>• Council Constitution and scheme of delegation identifies key statutory functions and is reviewed on regular basis.</li> <li>• Constitution available on intranet and in hard copy</li> <li>• Legal Services hold copies of relevant statutory requirements</li> <li>• Scheme of Delegation updated as part of recent review which was completed in March 2009 - revised scheme endorsed by CRWG and agreed by full Council on 30<sup>th</sup> March 2009</li> </ul>	In accordance with best practice scheme of delegation to be reviewed on a periodic basis to ensure fit for purpose and compliant with legislative requirements.
1c	Effective procedures to identify, evaluate, communicate, implement, comply with and monitor	Effective procedures to identify, evaluate, communicate, implement, comply with and monitor	<ul style="list-style-type: none"> <li>• CRWG which is a cross-party member working group has oversight on constitutional issues and meets as required</li> <li>• Reports to the Cabinet, CEMB and other officer</li> </ul>	

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
		legislative change exist and are used	<p>groups and member groups on the implications of new legislation - Briefings / reports for decision prepared and considered as required by relevant bodies e.g. Leader's Conference, member briefing events</p> <ul style="list-style-type: none"> <li>• Members and Officers Code of conduct in place; reviewed on a regular basis and re-issued to all staff.</li> <li>• Included within induction training for specific roles</li> <li>• MLD programme has specific strategy and programme on induction.</li> <li>• Standards Committee has oversight for ethical governance issues and responded to amendments to members' code required by recent legislation (most recent changes made in May 2008).</li> <li>• All newly elected members have induction training including training on Code of Conduct with annual refreshers.</li> <li>• Member attendance at ethical governance training monitored and reported to Standards Committee.</li> <li>• Working at the political interface programme for members and officers being developed and delivered during 2008/9</li> <li>• Leadership programme for managers has a specific element on political and organisational awareness</li> <li>• Political and Organisational Awareness is a key competency in the appraisal process for officers</li> </ul>	

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
1d	Effective action is taken where areas of non-compliance are found	<ul style="list-style-type: none"> <li>• and part of officer induction process</li> <li>• Political Awareness is a key feature of members' PDPs. Outcomes will inform future development programmes for members and officers.</li> </ul>	<p>Evidence to demonstrate that action has been taken:</p> <ul style="list-style-type: none"> <li>• Internal/external audit reports and external assessments e.g. OFSTED, BFI, CSCI.</li> <li>• Action plans in place to monitor achievement against recommendations.</li> <li>• Monitoring reports on actions plans re: implementation of identified key risk areas e.g. ethical governance</li> <li>• Evidence of corrective action taken in response to any upheld complaints</li> <li>• External audit report recommendations e.g. for final accounts; CPA Use of Resources - action plans in place and reported.</li> </ul> <p>Draft JAR action plan produced and submitted to OFSTED and Children's minister in mid-April 2009 for approval</p> <ul style="list-style-type: none"> <li>• Independent Safeguarding Board Chair appointed in Dec 2008</li> <li>• All councillors received refresher safeguarding from Feb – April 2009</li> <li>• New Children's Safeguarding Policy and Practice Panel established in April 2009. ToR agreed. Independent member to be appointed to panel in April / May 2009. Safeguarding Panel members to</li> </ul>	

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
			<p>receive additional Safeguarding training in May 2009</p> <ul style="list-style-type: none"> <li>• Corporate Parenting Advisory Group established in April 2009 - to also have oversight for member training, briefings and communications on corporate parenting issues. The Cabinet member / Cabinet to receive periodic updates of what action has been taken / any recommendations for change.</li> <li>• Council Officers, Members and partners consulted in April 2009 on revised Children's Trust Governance structure. Revised structure likely to be agreed in May/June 2009</li> <li>• Reviews of Alexandra Palace governance issues produced and considered by appropriate forums</li> <li>• Since May 2008 Standards Committee has implemented local arrangements for assessment and determination hearings councillor complaints</li> <li>• Independent reviews of Treasury Management arrangements have been undertaken and reported to appropriate officer and member bodies, with agreed action plans in place.</li> </ul>	
2a	Mechanism in place to establish corporate objectives	Consultation with stakeholders on priorities and objectives	<ul style="list-style-type: none"> <li>• The council, together with its partners has developed the Haringey Community Strategy 2007-2016. The objectives of the strategy have been jointly agreed and its implementation is monitored through the delivery of the Local Area</li> </ul>	

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
			<p>Agreement.</p> <ul style="list-style-type: none"> <li>• An update of achievements of Haringey's Sustainable Community Strategy was completed in March 2009 and is being distributed to all residents in April 2009 via Haringey People</li> <li>• Haringey's new LAA was developed and negotiated with the HSP. The final LAA agreement was formally signed by GoL in June 2008</li> <li>• The Thematic Boards are charged with performance managements of their respective targets within the LAA and report quarterly to the HSP PMG</li> <li>• A refresh of the LAA targets were concluded in March 2009. Awaiting final sign-off by GoL.</li> <li>• Consultation on draft community engagement framework underway – consultation period due to finish on 21 April 2009</li> <li>• Draft Community Engagement Framework to be agreed in principle by HSP in late April 2009.</li> <li>• Following agreement by HSP a delivery plan will be produced to assist with oversight of implementation</li> <li>• During 2009/10 there will be a further stage of public communications / consultation on the framework. A plain English version of the framework will be produced</li> <li>• HSP Code of Governance agreed in June 2008 which includes key principle on engagement.</li> </ul>	

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
2b		The Authority's priorities and organisational objectives have been agreed (taking into account feedback from consultation)	<p>Action plan which is also corporate governance statement for HSP produced for which cross-partnership governance group has oversight of implementation. Annual statement on implementation to be presented to HSP in June 2009</p> <ul style="list-style-type: none"> <li>The Community Strategy was developed after extensive consultation with residents and stakeholders through the; <i>Have your say Haringey – shape the future</i> campaign. The Council Plan is linked to the Community Strategy objectives and sets out the priorities of the council and how these will be achieved. The council's objectives are informed by what residents say are important in our annual residents' survey.</li> </ul>	
2c		Priorities and objectives are aligned to principal statutory obligations and relate to available funding	<ul style="list-style-type: none"> <li>The Medium Term Financial Strategy sets out the three year budget for the council. It supports the Council Plan and allocates resources, including to the council's priorities.</li> </ul>	
2d		Objectives are reflected in departmental plans and are clearly matched with associated budgets	<ul style="list-style-type: none"> <li>The council's objectives are reflected in the business plans for the services, setting out how each business unit will achieve these, with performance measures and costs. Progress against the business plans is reviewed mid year with the pre business plan review.</li> </ul>	
2e		The authority's objectives are clearly communicated to staff and all stakeholders, including	<ul style="list-style-type: none"> <li>Individual staff appraisals contain objectives form the service's business plans with individual targets for achievement. Our staff survey results show</li> </ul>	

## Appendix 2

### Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
3a	Effective corporate governance arrangements are embedded within the council	partners  Code of Corporate Governance has been established	<p>that 90% of staff have had an appraisal since April 2008. Staff survey results for understanding vision, values and priorities are excellent.</p> <ul style="list-style-type: none"> <li>Local Code of Corporate Governance formally adopted by the Council and published on Council website.</li> <li>All elements of corporate governance in line with CIPFA/SOLACE guidance are in place – codes of conduct for members and officers, declarations of interest, register of gifts and hospitality etc.</li> <li>Member Learning and Development Programme in place and has Corporate Governance as a specific section.</li> <li>Briefings on the Member Code of Conduct have been provided. Future sessions will be scheduled based on any recommendations from the Standards Committee / monitoring officer.</li> </ul>	<ul style="list-style-type: none"> <li>2009/10 MLD programme to be reviewed to ensure that Corporate Governance issues are adequately covered.</li> <li>Member attendance at events to be more closely monitored by the MLDWG as appropriate it will be recommended that certain topics are compulsory for members to attend based in role</li> </ul>
3b		Review and monitoring arrangements are in place	<ul style="list-style-type: none"> <li>Constitution Working Group in place and reviews of Standing Orders, Procedure Rules. Scheme of Delegation review completed in 2008/9</li> <li>2009/10 Work programme of activities for the CRWG to be agreed on 30 April 2009 – timetable will ensure that CEMB are provided with updated on governance issues relating to the constitution on a regular basis</li> </ul>	<ul style="list-style-type: none"> <li>Provide updates and information on governance issues on a regular basis to CEMB</li> <li>Other amendments brought constitution review working group as required</li> </ul>

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
3c		There is a committee charged with governance responsibilities	<ul style="list-style-type: none"> <li>• Statutory Officers quarterly meeting reviews key areas of governance (Heads of Audit &amp; Risk, Local Democracy and Legal Services)</li> <li>• Ongoing advice provided by Monitoring Officer</li> <li>• Corporate recording and monitoring of gifts and hospitality registers and register of interests</li> <li>• Members register maintained and updated – Reminder sent to Members</li> <li>• Audit Committee terms of reference include responsibility for corporate governance.</li> <li>• TOR include all aspects of corporate governance.</li> <li>• Minutes from committee meetings confirm that responsibilities have been appropriately discharged.</li> </ul>	
3d	Governance training provided to key officers and all members		<ul style="list-style-type: none"> <li>• Presentation by Head of Audit to CEMB and departmental DMT's on corporate governance</li> <li>• Part of the Member Learning and Development programme and strategy.</li> </ul>	<ul style="list-style-type: none"> <li>• Member Development Programme for 2009/10 to be agreed by MLDWG in July 2009. will take account of learning requirements on governance issues and will include <ul style="list-style-type: none"> <li>- Specific training for Cabinet / Audit Committee members;</li> <li>- General training for all Members on</li> </ul> </li> </ul>



## Appendix 2

### Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence governance issues
3e		Officers, public and other stakeholder awareness of corporate governance issues.	<ul style="list-style-type: none"> <li>• Council Constitution available on intranet and website</li> <li>• Whistle blowing policy on website and intranet</li> <li>• Anti-fraud policy, including reporting lines, available on intranet and website</li> <li>• Reminders given in Team Brief and Smart Talk on key governance issues</li> <li>• Code of Corporate Governance available on council's intranet and website</li> </ul>	
4a	Performance management arrangements are in place	Comprehensive and effective performance management systems operate routinely	<ul style="list-style-type: none"> <li>• Clearly identified performance management framework in place that identifies:               <ul style="list-style-type: none"> <li>○ All sources of performance measures – including corporate balanced scorecard</li> <li>○ Who is responsible for achieving each performance measure</li> <li>○ Who is responsible for collating the data for each one</li> <li>○ Who determines and approves the performance measures</li> <li>○ Who receives reports on performance and how often</li> <li>○ How data quality is assured</li> <li>○ How performance data is captured and its integrity maintained</li> <li>○ How poor performance is addressed</li> <li>○ How performance is driven upwards over time</li> </ul> </li> <li>• Reports resulting from internal or external reviews</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure that the new performance management IT system is embedded across the council for performance, risk and projects by March 2010, to maximise its effectiveness</li> </ul>

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
4b		Key performance indicators are established and monitored	<p>of performance management</p> <ul style="list-style-type: none"> <li>Year on year comparison of achievement against performance targets (e.g. in annual reports)</li> <li>Value for money/efficiency reviews, including benchmarking results are part of rolling programme covering all business units</li> <li>Departmental and/or business unit benchmarking results</li> <li>Appropriate KPI's have been established and approved for each service element and are included in departmental and business unit plans.</li> <li>A robust monitoring system has been approved and implemented.</li> <li>There are monthly reports on progress on delivering KPI's.</li> <li>There is an approved mechanism for reviewing the continuing suitability of KPI's and for securing continuous change by increasing the required standards</li> </ul>	
4c		The council is aware how well it is performing against its planned outcomes	<ul style="list-style-type: none"> <li>Regular reports are presented to members on the delivery of national, council-wide and departmental performance targets, including overall balanced scorecard.</li> <li>External audit reports on BVPI's and KPI's.</li> <li>Monthly budget monitoring meetings and reports – capital and revenue, current year and medium term.</li> <li>Monitoring reports are regularly presented to the</li> </ul>	<ul style="list-style-type: none"> <li>Ensure that the new performance management IT system is embedded across the council for performance, risk and projects by March 2010, to maximise its effectiveness</li> </ul>
4d		Knowledge of absolute and		

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
		<p>relative performances achieved is used to support decisions that drive improvements in outcomes.</p>	<p>Cabinet and appropriate committees.</p> <ul style="list-style-type: none"> <li>• The reports include detailed performance results, highlighting where corrective action is necessary.</li> <li>• Committee reports include recommendations and action plans to improve performance.</li> <li>• Performance targets in subsequent corporate, departmental and business unit plans, improvement plans and people plans, are revised in light of actual performance.</li> <li>• Continuous improvement is strived for by increasing the difficulty of performance targets when they have been met over a period of time.</li> <li>• Performance trends are established and reported on over the medium term and are fed into the corporate, departmental and business unit planning processes.</li> </ul>	
4e		<p>The Council continuously improves its performance management</p>	<ul style="list-style-type: none"> <li>• The performance management systems are regularly reviewed and updated to take account of changes in organisational structure, new performance measurement frameworks.</li> <li>• The performance management arrangements are revised in line with external or internal review of the arrangements.</li> </ul>	
5a	<p>The council has robust systems and processes in place for the identification and management of strategic and operational</p>	<p>There is a written strategy and policy in place for managing risk which:</p> <ul style="list-style-type: none"> <li>• Has been formally approved at appropriate</li> </ul>	<ul style="list-style-type: none"> <li>• Approved risk management strategy in place and published on the intranet.</li> <li>• Evidence of formal approval – by CEMB and audit committee</li> <li>• Evidence of formal review of risk management</li> </ul>	<ul style="list-style-type: none"> <li>• JAR action plan. Ensure that the recommendations in the JAR action plan are implemented by</li> </ul>

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
	risk	<ul style="list-style-type: none"> <li>• officer and member levels</li> <li>• Is reviewed on a regular basis</li> <li>• Has been communicated to all relevant staff</li> </ul>	<p>strategy on a regular basis by both CEMB and audit committee.</p> <ul style="list-style-type: none"> <li>• Strategic Risk Management Steering Group established to review council's corporate approach</li> </ul>	December 2009.
5b	<p>The council has implemented clear structures and processes for risk management which are successfully implemented and:</p> <ul style="list-style-type: none"> <li>• Senior management and members see risk management as a priority</li> <li>• Decision making considers risk</li> <li>• A senior manager has been appointed to 'champion' risk management</li> <li>• Roles and responsibilities for risk management have been defined</li> <li>• Risk management systems are subject to independent assessment</li> <li>• Risk management is considered in the annual business planning process</li> </ul>	<p>The council has implemented clear structures and processes for risk management which are successfully implemented and:</p> <ul style="list-style-type: none"> <li>• Senior management and members see risk management as a priority</li> <li>• Decision making considers risk</li> <li>• A senior manager has been appointed to 'champion' risk management</li> <li>• Roles and responsibilities for risk management have been defined</li> <li>• Risk management systems are subject to independent assessment</li> <li>• Risk management is considered in the annual business planning process</li> </ul>	<ul style="list-style-type: none"> <li>• Audit committee minutes.</li> <li>• CPA comments on improved risk management arrangements.</li> <li>• Annual business plans include risk management.</li> <li>• Committee reports include appropriate risk management information.</li> <li>• Corporate business and financial plan assess risks.</li> <li>• Head of Audit &amp; Risk Management has overall responsibility for monitoring risk management policy</li> <li>• Risk Management strategy lists key officers with responsibility for risk</li> <li>• Internal audit complete regular testing of key business unit and departmental risk registers</li> </ul>	
5c		<p>The council has developed a</p>	<ul style="list-style-type: none"> <li>• Systematic procedures for risk identification and</li> </ul>	

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
5d	<p>corporate approach to the identification and evaluation of risk which is understood by staff</p> <p>The council has well defined procedures for recording and reporting risk.</p>	<p>evaluation have been agreed and consistently applied across all business units.</p> <ul style="list-style-type: none"> <li>• Corporate, departmental and business unit risk registers in place</li> <li>• Key risks included in business plans</li> <li>• Project management arrangements require key risk issues to be identified recorded and monitored as part of each reporting cycle</li> <li>• Evidence of regular reporting of risk to appropriate officer and member level.</li> <li>• Evidence of risk based auditing in place</li> <li>• Key risks identified in audits are reported to senior managers, relevant Members and Audit Committee</li> </ul>		
5e	<p>The council has well established and clear arrangements for financing risk</p>	<ul style="list-style-type: none"> <li>• All legal requirements for insurance are met.</li> <li>• Self-insurance provisions are subject to regular independent actuarial valuation and contributions to the fund are adjusted accordingly.</li> <li>• Insurance claims are being managed in accordance with the 'Woolf' protocols.</li> <li>• Monitoring the incidence of successful and unsuccessful claims and reporting to departments.</li> <li>• Council has joined the Local Authorities Mutual (LAML)</li> <li>• Council has contingency arrangements in place in the event that the legal challenge to LAML is</li> </ul>		

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
5f		<p>The authority has developed a programme of risk management training for relevant staff</p>	<p>successful</p> <ul style="list-style-type: none"> <li>• All departmental management teams have undertaken risk management training as part of the process to develop risk registers</li> <li>• Project managers training includes risk management</li> <li>• All special projects have specific risk registers and staff involved are provided with risk management training</li> <li>• Legal Services have Lexel accreditation which includes completing a risk form to highlight key/high risk issues to Head of Legal Services</li> <li>• Risk owners detailed in corporate, departmental and business unit risk registers.</li> <li>• Risk management responsibilities are included in risk registers, business and work plans, job descriptions where appropriate</li> </ul>	
5g	<p>Managers are accountable for managing their risks.</p>		<ul style="list-style-type: none"> <li>• Regular reporting of key risks at CEMB and audit committee</li> <li>• Pre-Business Plan Reviews and Business Plan have specific sections for the inclusion of key risks</li> <li>• Regular review and updating of risk registers</li> <li>• Risk management addressed in all business planning, project management activities</li> <li>• Management of risk strategy provides framework to ensure all key risk activities (health and safety, business continuity planning, project management and risk registers) are reviewed and updated in</li> </ul>	
5h	<p>Risk management is embedded throughout the council</p>			<ul style="list-style-type: none"> <li>• Ensure that the new performance management IT system is embedded across the council for performance, risk and projects by March 2010, to maximise its effectiveness</li> </ul>

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
5j	Risks in partnership working are fully considered	Risks in partnership working are fully considered	<p>line with business planning cycle</p> <ul style="list-style-type: none"> <li>• Risk assessments undertaken before the start of major projects and reviewed during the project period.</li> <li>• Reports made to the appropriate officer and member level.</li> <li>• All key partnerships have been identified.</li> <li>• Risk Management framework for HSP formally agreed and in place</li> </ul>	
5k	Risk management information systems meet users needs	Risk management information systems meet users needs	<ul style="list-style-type: none"> <li>• Risk management information available for business planning, project management</li> </ul>	
5l	<p>The corporate risk management board (or equivalent) adds value to the risk management process by:</p> <ul style="list-style-type: none"> <li>• Advising and supporting corporate mgmt team on risk strategies;</li> <li>• Identifying areas of overlapping risk;</li> <li>• Driving new risk management initiatives</li> <li>• Communicating risk management and sharing good practice</li> <li>• Providing and reviewing risk management training</li> <li>• Regularly reviewing the risk</li> </ul>	<ul style="list-style-type: none"> <li>• CEMB act as overall corporate body with responsibility for risk management across the council and receive regular reports on implementation of risk management</li> <li>• Audit Committee receives regular reports on risk management; updates on risk registers and challenge processes</li> <li>• Internal audit support the risk management processes and provide advice to CEMB and DMT's – evidenced by CEMB and DMT agendas and minutes</li> <li>• The corporate risk management strategy includes references to all key risk management activities – H&amp;S, project management, business continuity, risk registers, performance management</li> </ul>		

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
5m		<p>register(s)</p> <ul style="list-style-type: none"> <li>• Co-ordinating the results for risk reporting</li> </ul> <p>A corporate risk officer has been appointed with the necessary skills to analyse issues and offer options and advice and:</p> <ul style="list-style-type: none"> <li>• Support decision making and policy formulation</li> <li>• Provide support in the risk identification and analysis process</li> <li>• Provides support in prioritising risk mitigation action</li> <li>• Provides advice and support in determining risk treatments</li> <li>• Inspires confidence in managers</li> </ul>	<ul style="list-style-type: none"> <li>• Head of Audit and Risk Management acts as corporate officer – job description includes responsibilities</li> <li>• Resources specified in annual internal audit programme to support the risk management process</li> <li>• Risk management workshop guidance notes are in place to provide assistance to managers</li> </ul>	
6a	<p>The Council has a robust system of internal control which includes systems and procedures to mitigate principal risks</p>	<p>There are written financial regulations in place which have been formally approved, regularly reviewed and widely communicated to all relevant staff:</p> <ul style="list-style-type: none"> <li>• Council has adopted</li> </ul>	<ul style="list-style-type: none"> <li>• Financial regulations and instructions exist are formally approved, reviewed and updated regularly.</li> <li>• Dissemination via induction, briefings, intranet and website.</li> <li>• External and internal audit assessment of compliance with prudential code.</li> </ul>	<ul style="list-style-type: none"> <li>• Implementation of Information Governance Board project timetable and actions</li> <li>• Implementation of key recommendations</li> </ul>



Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
6b	<p>CIPFA Code on Treasury Management</p> <ul style="list-style-type: none"> <li>• Compliance with the Prudential code</li> </ul> <p>There are written contract standing orders in place which have been formally approved, regularly reviewed and widely communicated to all staff.</p>	<ul style="list-style-type: none"> <li>• Scheme of budget delegation for all budget holders.</li> <li>• CIPFA Code on Treasury Management has been adopted</li> <li>• Compliance with Prudential Code is tested by internal audit as part of key financial systems work</li> <li>• Standing orders exist, are reviewed regularly and updated to cover new procedures e.g. partnering, on-line tendering.</li> <li>• Formal approval is achieved via full Council.</li> <li>• Communication and dissemination via intranet, procurement bulletins</li> </ul>	<p>following independent review of treasury management arrangements and revised CIPFA guidance</p>	
6c	<p>There is a whistleblowing policy in place which has been formally approved, regularly reviewed, widely communicated to all staff.</p>	<ul style="list-style-type: none"> <li>• Whistleblowing policy exists and has been reviewed and updated regularly.</li> <li>• Formal approval by members.</li> <li>• Communication and dissemination via intranet, website, staff newsletter and Team Brief.</li> </ul>		
6d	<p>There is a counter fraud and corruption policy in place which has been formally approved, regularly reviewed and widely communicated to all staff.</p>	<ul style="list-style-type: none"> <li>• Counter-fraud and corruption policy exists and has been regularly reviewed and updated.</li> <li>• Formal approval by members.</li> <li>• Examples of dissemination, staff newsletter, website, emails to all staff.</li> <li>• Policy is held in intranet and website</li> <li>• whistleblowing and confidential reporting policy for HSP approved and communicated.</li> </ul>		
6e	<p>There are codes of conduct in place which have been</p>	<ul style="list-style-type: none"> <li>• Codes of conduct in place for officers and members.</li> </ul>		

## Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
6f		formally approved and widely communicated to all staff. A register of interests is maintained, regularly updated and reviewed.	<ul style="list-style-type: none"> <li>Formal approval of Codes by members.</li> <li>Copies provided formally to all staff when updated (July 2006) and to new starters as part of corporate induction.</li> <li>Register of interests exists for members.</li> <li>The register is updated by individual members and reviewed by the Standards Committee</li> </ul>	<ul style="list-style-type: none"> <li>Confirm arrangements for officers' register of interests</li> </ul>
6g		A scheme of delegation has been drawn up, formally approved and disseminated to all relevant staff.	<ul style="list-style-type: none"> <li>Scheme of delegation updated in 2009 and incorporates adequate controls and sanctions.</li> <li>Formal approval of scheme by members.</li> <li>Available on intranet.</li> </ul>	
6h		A corporate procurement policy has been drawn up, formally approved and communicated to all relevant officers	<ul style="list-style-type: none"> <li>Procurement policy exists and has been reviewed and updated regularly to take account of new initiatives e.g. framework agreements.</li> <li>Formal approval of policy by members.</li> <li>Examples of dissemination via regular procurement newsletter</li> <li>New Contract Management system now implemented which is used for monitoring effectiveness of procurement policies and decisions</li> </ul>	
6i		Business/service continuity plans have been drawn up for all critical service areas and the plans: <ul style="list-style-type: none"> <li>Are subject to regular testing</li> <li>Are subject to regular</li> </ul>	<ul style="list-style-type: none"> <li>Corporate, departmental and business unit business continuity plans are in place – in compliance with Civil Contingency Act</li> <li>Regular testing of major incident BCP</li> <li>Risk Management strategy includes requirements to review and update on regular basis</li> </ul>	Need to ensure that all departmental and business unit BCP's are fully tested on a regular basis.

## Appendix 2

### Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
6j		<p style="text-align: center;">review</p> <p>The corporate, departmental and business unit risk registers includes key controls to manage identified risks</p>	<ul style="list-style-type: none"> <li>• Risk registers set out key risks and identify controls to manage them.</li> <li>• Key controls are monitored, reviewed and updated regularly.</li> <li>• Risk owners are assigned to manage key risks.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure that the new performance management IT system is embedded across the council for performance, risk and projects by March 2010, to maximise its effectiveness</li> </ul>
6k		<p>Key risk indicators have been drawn up to track the movement of key risks and are regularly monitored and reviewed</p>	<ul style="list-style-type: none"> <li>• Corporate, departmental and business unit risk registers which include risk indicators, have been established</li> <li>• Risk registers are regularly reviewed and monitored by CEMB, individual directors and business unit heads</li> <li>• Audit Committee reviews the corporate risk register on an annual basis</li> </ul>	
6l		<p>The council's internal control framework is subject to regular independent assessment.</p>	<ul style="list-style-type: none"> <li>• Internal audit plans and reports.</li> <li>• Annual audit report.</li> <li>• External audit reports.</li> <li>• CPA opinion and assessment reports.</li> </ul>	
6m		<p>A corporate health and safety policy has been drawn up, formally approved, is subject to regular review and has been communicated to all staff.</p>	<ul style="list-style-type: none"> <li>• Health and safety policy exists and has been regularly reviewed.</li> <li>• Formal approval of the policy by members.</li> <li>• Examples of dissemination e.g. website and intranet, briefings, newsletter.</li> <li>• Evidence of effectiveness of policy e.g. HSE referrals and reports.</li> </ul>	

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
6n		<p>A corporate complaints policy and procedure has been drawn up, formally approved, communicated to all relevant staff, the public and other relevant stakeholders, and is regularly reviewed.</p>	<p>Evidenced by:</p> <ul style="list-style-type: none"> <li>• Complaints policy and procedure exists and has been regularly reviewed and updated.</li> <li>• Procedure is compliant with all relevant statutory requirements.</li> <li>• Formal approval of policy by members.</li> <li>• Examples of dissemination e.g. website and intranet, induction programme, leaflets, posters.</li> <li>• Complaints files.</li> <li>• Committee reports summarising numbers, outcomes etc.</li> </ul>	
7a	<p>Appropriate assurance statements are received from designated internal and external assurance providers:</p> <ul style="list-style-type: none"> <li>• The authority has identified appropriate sources of assurance</li> <li>• Appropriate external assurances are identified and obtained</li> </ul>	<p>The authority has determined appropriate internal and external sources of assurance</p>	<ul style="list-style-type: none"> <li>• Internal director and ACE assurance statements are provided on an annual basis and are embedded in the business planning process</li> <li>• External assurance obtained from various assessment sources e.g. CPA and Use of Resources, external inspection functions e.g. OFSTED/CQC which are reported to CEMB and Members</li> <li>• Independent Member body established to cover Safeguarding</li> <li>• Quality Outcomes Board established</li> <li>• Annual independent residents survey undertaken and reported on</li> <li>• Internal audit undertake reviews of key financial systems on an annual basis</li> <li>• Performance management system reports on KPI's, finance and other performance on a monthly basis to CEMB and members</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure that the recommendations arising out of the independent inspections and reviews of the Housing Allocations service, Adults Service and Joint Area Review are fully addressed by March 2010</li> </ul>

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
7b		Appropriate key controls on which assurance is to be given have been identified and agreed	<ul style="list-style-type: none"> <li>Internal audit document the key controls in all financial systems – all held on audit files</li> <li>Key controls are agreed with external auditors on an annual basis</li> </ul>	
7c		Departmental assurances are provided	<ul style="list-style-type: none"> <li>Internal director and ACE assurance statements are provided on an annual basis</li> </ul>	
7d		<p>External assurance reports are collated centrally</p> <ul style="list-style-type: none"> <li>Reports are reviewed by relevant senior management team and reported to appropriate committee</li> <li>Action plans are prepared and approved as appropriate</li> <li>Follow up reports on recommendations are requested and reviewed by relevant senior management team and progress is regularly reported to relevant committee</li> </ul>	<ul style="list-style-type: none"> <li>All key assurance reports (internal and external) are reported to CEMB and Members</li> <li>Audit Committee receives all relevant reports from external auditors and various inspection functions e.g. Office of Surveillance Commissioner</li> <li>All action plans are monitored – Audit Committee includes follow up of audit recommendations as part of regular quarterly reporting process</li> </ul>	
7e		Internal audit arrangements	<ul style="list-style-type: none"> <li>Council has an internal audit division which fully complies with the CIPFA Code of Practice and evidenced by report to Audit Committee and full</li> </ul>	

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
7f		Corporate governance arrangements	<p>reliance by external audit on its work.</p> <ul style="list-style-type: none"> <li>• Reports on key financial systems provided to Audit Committee</li> <li>• Local Code of Corporate Governance formally adopted by the Council and published on Council website.</li> <li>• All elements of corporate governance in line with CIPFA/SOLACE guidance are in place – codes of conduct for members and officers, declarations of interest, register of gifts and hospitality etc.</li> </ul>	<ul style="list-style-type: none"> <li>• Review and update the Local Code of Corporate Governance to reflect current issues</li> </ul>
7g		Performance monitoring arrangements	<ul style="list-style-type: none"> <li>• Performance monitoring system in place and provides regular reports to CEMB and Cabinet on financial and service performance</li> </ul>	
8a	The authority has made adequate arrangements to identify, receive and evaluate reports from the defined internal and external assurance providers to identify areas of weakness in controls	Responsibilities for the evaluation of assurances are clearly defined throughout the organisation	<ul style="list-style-type: none"> <li>• Responsibilities for key Committees contained within their terms of reference e.g. Audit committee includes corporate governance arrangements</li> </ul>	
8b		<p>Mechanism established for collecting governance assurances</p> <ul style="list-style-type: none"> <li>• Overall responsibility allocated to governance senior officer group</li> </ul>	<ul style="list-style-type: none"> <li>• Head of Audit &amp; Risk Management, Head of Member Services, Head of Legal Services form core group to assess governance assurances</li> <li>• Assurances identified and recorded using AGS matrix</li> <li>• Details of where evidence is held (electronically or</li> </ul>	

Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
		<ul style="list-style-type: none"> <li>• Required assurances are agreed and recorded</li> <li>• Central record of all assurances (either evidence file, or showing clear link to where evidence is held)</li> <li>• Clear guidance as to evaluation procedure including assurance over risks, independence and objectivity of assurances</li> <li>• Defined evaluation mechanism</li> <li>• Timetable for completion by statutory deadline</li> <li>• Gap assessment – performed and challenged</li> </ul>	<p>manually) is recorded in the AGS matrix</p> <ul style="list-style-type: none"> <li>• Regular meetings in place between key officers and timetable agreed to meet statutory deadlines</li> </ul>	
9a	<p>There is a robust mechanism to ensure that an appropriate action plan is agreed to address identified control weaknesses and is implemented and monitored</p>	<p>An action plan is drawn up and approved</p>	<ul style="list-style-type: none"> <li>• AGS evidence matrix forms the basis of the action plan</li> </ul>	
10a	<p>An Annual Governance Statement has been</p>	<p>Responsibility for the compilation of the AGS has</p>	<ul style="list-style-type: none"> <li>• Head of Audit, Head of Legal Services and Head of Member Services act as core working group to</li> </ul>	

## Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
	drafted in accordance with the statutory requirements and timetable set out in the Accounts and Audit Regulations 2003, as revised by the A&A (amendment) (England) Regulations 2006, and is in accordance with CIPFA guidelines	been assigned	<ul style="list-style-type: none"> <li>compile AGS</li> <li>Draft AGS presented to CEMB on 7 April 2009.</li> </ul>	
10b		There is an AGS production timetable that meets the statutory deadline	<ul style="list-style-type: none"> <li>Timetable in place and monitored by Head of audit &amp; risk management</li> </ul>	
10c		The AGS is reviewed, challenged and approved by the authority	<ul style="list-style-type: none"> <li>Review and challenge process by CEMB and Audit Committee</li> </ul>	
11a	An annual report to the authority (or delegated committee) on the AGS is presented, in accordance with the CIPFA pro-forma	Responsibility for reporting is clearly defined	<ul style="list-style-type: none"> <li>Head of Audit &amp; Risk Management provides draft AGS for review by CEMB, Cabinet and Audit Committee</li> </ul>	
11b		The signatories to the AGS and SIC are defined and are appropriate in accordance with statutory requirements (i.e. most senior officer and most senior member of the organisation)	<ul style="list-style-type: none"> <li>Chief Executive and Leader of the Council are signatories of AGS</li> </ul>	



## Appendix 2

### Annual Governance Statement 2008/09 – Matrix of supporting evidence

Ref:	Key elements of the corporate governance environment:	Sources/examples of assurance:	Evidenced by:	Actions to address identified gaps in assurance or evidence
11c		The report is likely to be published in a timely fashion with the statutory accounts	<p>• Production of AGS in line with statutory deadlines, AGS on agendas for key meetings, no reason to assume they will not be met.</p>	