

Agenda

Audit and Risk Assurance Committee

Tuesday, 15 November 2022 at 5.30 pm
At Council Chamber - Sandwell Council House, Oldbury

This agenda gives notice of items to be considered in private as required by Regulations 5 (4) and (5) of The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012.

1 Apologies for Absence

2 Declarations of Interest

Members to declare any interests in matters to be discussed at the meeting.

3 Minutes

7 - 14

To confirm the minutes of the meeting held on 29 October 2022.

4 Additional Items of Business

To determine whether there are any additional items of business to be considered as a matter of urgency.

5 Council Improvement Plan Update

15 - 126

To receive and comment upon the progress of the Improvement Plan and the Risk Register up to 3



November 2022.

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|-----|---|-----------|
| 6 | Internal Audit Progress Report | 127 - 140 |
| | To review and comment upon the Internal Audit Progress Report. | |
| 7 | Internal Audit Charter | 141 - 148 |
| | To review and approve the Internal Audit Charter. | |
| 8 | Corporate Risk Management Strategy | 149 - 164 |
| | To note and approve updates made to the corporate risk management strategy. | |
| 9 | Directorate Risk Register - Housing | 165 - 182 |
| | To note and comment on the Housing directorate risks. | |
| 10 | Cabinet Forward Plan | 183 - 202 |
| | Standing item to consider items on the Cabinet Forward Plan. | |
| 11 | Work Programme | 203 - 208 |
| | Standing item to consider the work programme of the Committee. | |
| 12 | Exclusion of the Public and Press | |
| | That the public and press be excluded from the rest of the meeting. This is to avoid the possible disclosure of exempt information under Schedule 12A to the Local Government Act, 1972, as amended by the Local Government (Access to Information) (Variation) Order 2006, relating to any action taken or to be taken in connection with the prevention, investigation or prosecution of crime. | |
| 13. | ICT Incident Report | 209 - |
| | 7 | 216 |
| | To receive and comment on the ICT incident report. | |

Kim Bromley-Derry CBE DL
Managing Director Commissioner
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Distribution

Councillor Preece (Chair)
Councillors Ager, Anandou, Choudhry, L Giles, Hinchliff, Khatun, Melia and
Hussain

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Minutes of Audit and Risk Assurance Committee

29 September 2022 at 5.30pm
In the Council Chamber at Sandwell Council House

Present: Councillor Preece (Chair);
Councillors L Giles, Hinchliff, Khatun and Melia
Mr Ager (Independent Member).

Officers: Maria Price (Legal Services Service Manager); David Wilcock (Governance Review Consultant); Peter Farrow (Audit Services Manager); Narinder Phagura (Business Partner for Audit, Fraud, Risk and Insurance); Kate Ashley (Strategic Lead – Service Improvement); Elaine Newsome (Service Manager for Democracy); Helen Green (Commissioning Team Manager); Colin Marsh (Divisional Manager – Adult Social Care); Sean Russell (Customer Feedback Coordinator); Matt Powis (Senior Democratic Services Officer); Ant Lloyd (Democratic Services Officer).

43/22 **Apologies for Absence**

Apologies for absence were received from Councillors Anandou, Choudhary and Mr Hussain (Independent Member).

44/22 **Declarations of Interest**

There were no declarations of interest.



45/22 **Minutes**

Resolved

That, the minutes of the previous meeting held on 21 July 2022 be confirmed as a correct record.

46/22 **Urgent Business**

There was no urgent business for discussion.

47/22 **Law and Governance Directorate Risk Register Risk**

The Committee received an overview of the Law and Governance Directorate risk register.

A red risk was identified on the implementation of the Election Act 2022. The Act would introduce several new variables and requirements for the Council to implement for upcoming elections. Such changes included the planned introduction of photo identification requirements at polling stations as well as postal vote changes. However, due to the absence of national guidance, the implementation of the Act remained a risk for the Council. The Committee was reassured that once the guidance and legislation was clearer, the risk would be reduced significantly.

The implementation of the legislation may be required as soon as 2023 although, this was not guaranteed. It was noted that the Council would communicate with the electorate on the proposed changes, once finalised by the Government.

Members noted that the Midland Metropolitan Hospital was on target to open in early 2024.

Overall Members noted the positive direction of the highlighted risks and were satisfied that appropriate measures had been taken to combat any concerns highlighted by the register.



The Committee thanked officers for their attendance.

Resolved that the Law and Governance Risk Register update be noted.

48/22

Strategic Risk Register Update

The Audit Services Business Partner provided an update on the Council's Strategic Risk Register. The following key risks were highlighted and discussed:

- Risk 4 – Children's Social Care was downgraded from red to amber following the publication of the recent Ofsted report on Children's Services in Sandwell, which took place in May 2022. The report confirmed that the service had been re-evaluated from inadequate to requiring improvement to be good due to some areas of positive work. However, it was noted that further development was required to take place in order to improve practice and outcomes for vulnerable children and their families.
- Risks 27 and 27b – Medium Term Financial Plan and Budget Management 2022/23 were listed as a red risks due to the impact of the current and forecasted levels of inflation impacting the Council's financial performance.
- Risk 54- Special Educational Needs and Disabilities Transport risk had improved from red to amber, following the successful completion of the procurement for SEND transport. The residual risk reflects the budget pressure to ensure that any overspends were managed.
- Risk 56a – Towns Fund Programme phase 2 had been identified as a new risk which reflected the next delivery phase of the programme.
- Risk 63a – Establishment of a Local Authority Trading Company (LATC) to manage nine of the Council's Leisure Centres was identified as a new risk. It was noted that the LATC was due to take over responsibility of the Council's leisure facilities from Sandwell Leisure Trust when arrangements cease in May 2023.
- A new risk was added to the register respect of inflation and the impact -on the cost of living for residents and council services.



The Committee noted the update and raised concerns in respect of the current cost of living crisis. A Member sought clarification on whether the risk register would identify current concerns relating to the economy. In response it was confirmed that the risk register was collated in August 2022 and therefore would not reflect the most recent developments in respect of Government economic policy.

It was noted that a report on the Business Continuity Management incident relating to the Council's ICT system would be presented to the Committee in January 2023.

The Chair requested that the Committee receive a briefing note on the impact of UK inflation on Council finances.

Resolved that the Strategic Risk Register Update be noted.

49/22 **Adult Social Care Directorate Risk Register Report**

The Adult Social Care Directorate Risk Register was presented to the Committee.

The Committee were informed that a total of 13 risks were identified. to which 3 were green, 7 were amber and 3 were red.

Resilience in the Care Market, Adult Social Care Charging Reform and the Fair Cost of Care were all identified as red risks. It was noted that the Council had mitigation plans to reduce and ease these risks on the Council.

The Committee noted the update and thanked officers for their attendance.

Resolved that the Adult Social Care Directorate Risk Register Report be noted.



Improvement Plan Progress

The Service Improvement Strategic Lead presented an update on the Council's Improvement Plan. The Committee received a previous update on 28 June 2022.

An overview of the monitoring tool was discussed to provide context to the Improvement Plan. The tool allows adaptable and flexible programme management to help ensure aims and objectives were monitored closely. This tool could be used to identify issues as identified.

In total, 12 risks were identified against the improvement plan, 7 were rated amber, 3 were rated green and 2 were rated red. It was noted that the risks identified as red were due to resource implications. Furthermore, although financial resources had been obtained and approved, the risk remained red due to difficulties recruiting. It was confirmed that some key job vacancies had been successfully filled and further improvements were anticipated to be made prior to the next scheduled Committee update.

It was confirmed that the Cabinet, the Leadership Team and the Commissioners were consistently updated on the delays to the plan. Some delays were expected due to the changes in the schedule of meetings following the recent cancellations due to the passing of the Queen. In this respect, the Chair requested an update report on the overview of the progressed and implemented recommendations specifically relating to the improvement plan at the next scheduled meeting of the Committee.

Resolved that the improvement plan progress be noted.

Local Government and Social Care Ombudsman's Annual Report 2021/22

The Customer Feedback Coordinator presented the Local Government and Social Care Ombudsman's (LGO) Annual Report 2021/22. The report provides a summary of the settled complaints by the LGO in relation to the Council. It was noted that 58 complaints and enquiries were received by the LGO regarding the



Council in the year 2021/22. However, only 30 detailed investigations were carried out with only 20 cases upheld.

Statistics were provided detailing the total number of complaints upheld alongside compliance with Ombudsman recommendations and satisfactory remedies provided by the Council. In respect of complaint performance, the Council was on par with other equivalent unitary local authorities.

Members highlighted concerns regarding the poor performance by the Council in completing actions and recommendations on time. In a fifth of cases where recommendations were provided to remedy a complaint, the Council did not complete the required actions on time.

The Customer Feedback Coordinator confirmed that the Council was actively working with the Ombudsman to improve performance and response times. A tighter deadline of 10 days was to be put in place when obtaining information from service areas to help reduce waiting times for the Ombudsman. In addition, the Council's Learning and Development team was providing quality training to Council staff to reiterate the importance of adhering to Ombudsman requests.

The Committee noted the update and expressed their interest in seeing the improvements made in next year's report.

Resolved that the Local Government and Social Care Ombudsman's Annual Review be noted.

52/22

Audit and Risk Assurance Committee Annual Report

The Audit Services Manager presented the Audit and Risk Assurance Committee Annual Report.

It was highlighted that the report was a key component of the Council's governance, risk management and internal control framework. The report provided an overview of the Committee's work from the previous year and would be presented to the next scheduled meeting of Council by the Chair.



The Chair noted the concerns of the Committee about the finalisation of the 2020 to 2021 financial accounts.

Resolved that the Annual Report of the Audit and Risk Assurance Committee be approved and presented to the next meeting of the Council.

53/22 **Cabinet Forward Plan**

The Forward Plan was presented for information and to allow the Committee an opportunity to contribute to any items or raise any issues with the Executive.

53/22 **Work Programme**

The Committee noted the work programme for 2022/23.

Meeting ended at 6.26p.m

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Report to Audit and Risk Assurance Committee

15 November 2022

Subject:	Improvement Plan Progress and Risk Register
Director:	Managing Director Kim Bromley-Derry
Contact Officer:	Strategic Lead – Service Improvement Kate Ashley Kate1_ashley@sandwell.gov.uk Senior Lead Officer – Service Improvement Rebecca Jenkins Rebecca_jenkins@sandwell.gov.uk

1. Recommendations

- 1.1. That Audit and Risk Assurance Committee considers and comments upon the progress of the Improvement Plan and the Risk Register up to 3 November 2022.
- 1.2. That any recommendations or comments are reported to Cabinet at their meeting on 7 December 2022 for their consideration.
- 1.3. That the Committee considers any additional areas of focus for its work plan.

2. Reasons for Recommendations

- 2.1 This report provides a quarterly update on progress against the Improvement Plan agreed by Council on 7 June 2022. The Improvement Plan incorporates all recommendations from the Grant Thornton Governance Review, the LGA Corporate Peer Challenge and







the CIPFA Financial Management Review, as well as the Statutory Directions from the Secretary of State for Levelling Up, Housing and Communities.



- 2.2 On 28 June 2022, Audit and Risk Assurance Committee received the Improvement Plan and accompanying risk register and requested regular updates on progress. The last progress report and risk register was received by this Committee in September 2022.
- 2.3 As part of the governance and assurance arrangements for the Improvement Plan, Audit and Risk Assurance Committee and Budget and Corporate Scrutiny Management Board will review progress of the Improvement Plan and utilise the plan for work programming purposes. Both Committees are due to consider progress at their meetings in November. Any recommendations or comments Audit and Risk Assurance Committee wish to make to Cabinet can be presented for Cabinet’s consideration on 7 December 2022.

3. How does this deliver objectives of the Corporate Plan?

3.1 Sandwell Council’s Improvement Plan focuses on the governance arrangements of the council and areas of improvement across the organisation. The underpinning objective of the Improvement Plan is to ensure that the council is able to deliver on the aims and priorities as set out in the Corporate Plan. The deliverables set out in this Improvement Plan will achieve long-term sustainable improvements in how the council operates and is able to make effective decisions focused on improving outcomes for residents and experiences of service users. Therefore, this impacts on the council’s ability to deliver all the objectives in the Corporate Plan.

	Best start in life for children and young people
	People live well and age well
	Strong resilient communities
	Quality homes in thriving neighbourhoods



	A strong and inclusive economy
	A connected and accessible Sandwell

4 Context and Key Issues

4.1 Background

- 4.1.1 The council's external auditors Grant Thornton conducted a Value for Money Review into the council's governance arrangements over the period August to October 2021 and reported their findings of this review to Full Council in January 2022. In response, Council approved a Governance Improvement Plan in January 2022 to address the recommendations made by Grant Thornton and the proposed reporting mechanisms to ensure progress is managed effectively.
- 4.1.2 Since the approval of this Governance Improvement Plan findings were received from the CIPFA Financial Management Review, LGA Corporate Peer Challenge along with the Statutory Directions from the Secretary of State for Levelling Up, Housing and Communities.
- 4.1.3 A single Improvement Plan was agreed by Council on 7 June 2022 which addresses the recommendations from all the external reviews and the Statutory Directions. The Improvement Plan provides the organisation with a clear direction for sustainable improvement under six thematic headings. The single Improvement Plan has superseded the Governance Improvement Plan.
- 4.1.4 To ensure that senior officers and members have oversight of delivery against the Improvement Plan, Council approved that progress will be monitored by Leadership Team monthly and reported to Cabinet quarterly. This will continue until all actions have been completed, or changes have been embedded into business as usual.
- 4.1.5 At the meeting of the Audit and Risk Assurance Committee on 28 June 2022, the Chair of the Committee outlined that a distinct approach to the Improvement Plan had been agreed with the Chair of the Budget and Corporate Scrutiny Management Board to avoid overlap with



oversight. Primarily the Audit and Risk Assurance Committee will focus on the assurance and risk management of the plan whereas the Scrutiny Board will focus on challenging policy and performance.

- 4.1.6 This report is the second quarterly update to Audit and Risk Assurance Committee on overall progress of the Improvement Plan and the third update to Audit and Risk Assurance Committee on the Improvement Plan risk register. At that meeting, the Committee requested that future reports include a focus on progress against the recommendations that specifically relate to the Audit and Risk Assurance Committee.
- 4.1.7 The reporting period for the quarterly Improvement Plan monitoring closes on 3 November 2022 which is after the publication date for papers for the Audit and Risk Assurance Committee meeting on 15 November 2022. To ensure that Audit and Risk Assurance Committee receive the latest updates on the Improvement Plan, some of the supporting appendices to this report will be included as late papers with the agreement of the Audit and Risk Assurance Committee Chair.

4.2 Specific Recommendations from External Reviews relating to Audit

- 4.2.1 The Statutory Directions set out that the Council must secure improvement in relation to the proper functioning of the scrutiny and associated audit functions.
- 4.2.2 In the Value for Money Governance Review, Grant Thornton set out specific recommendations relating to audit as follows:
- **Key Recommendation 7:** Members in key statutory roles, in particular in relation to Cabinet, scrutiny, standards and audit, need to be provided with effective development training and support. The Member Development Programme should be reviewed to ensure corporate governance forms part of the training for members with governance roles
 - **Improvement Recommendation 12:** Officer and Member Relationships – There is a need to ensure that members of scrutiny and audit committees are aware of their governance roles including how to interrogate reports and the right questions
 - **Improvement Recommendation 14:** Officer and Member Relationships – the forward plan of the Cabinet should be shared



with the Audit Committee and Scrutiny Board to help structure their agenda planning

- **Improvement Recommendation I34:** Audit Committee – now that the Audit and Risk Assurance Committee has agreed the action to bring this long-standing matter to resolution [review into the Wragge Report], it will be important that – as the Audit and Governance Panel recognised – the Council manages its position so that the matter does not resurface, so that it can move on and focus on its corporate objectives

4.2.3 The CIPFA Financial Management Review and LGA Corporate Peer Challenge did not make any direct recommendations around the role and function of audit.

4.3 Audit Actions within Improvement Plan

4.3.1 The recommendations from the Grant Thornton review were built into the Improvement Plan. The Plan contains a workstream focusing on the role and function of scrutiny and audit within the decision-making theme.

4.3.2 In relation to audit, the Improvement Plan sets out actions around managing the position on historic issues through Officers working with the ARAC Chair, and the completion of ARAC recommendations in relation to governance issues raised around SEND Transport.

4.3.3 A measure of success within the Improvement Plan is for there to be evidence that audit input is driving assurance and improvement across the Council.

4.4 Improvement Plan Progress

4.4.1 A comprehensive monitoring tool has been developed to monitor progress of the Improvement Plan. This tool includes both a risk rating for each main action within the Improvement Plan and a progress status rating for all actions. The Improvement Plan Monitoring Tool will be contained within Appendix 1. The monitoring tool provides quick reference around which actions are on track for delivery, as well as highlighting areas that may require remedial action or additional levels of assurance.



4.5 Progress against each theme of Improvement Plan will be summarised within Appendix 2. This includes an overall status rating, a description of workstream progress, commentary on progress against milestones and achievements. This includes the progress update on the key recommendations for audit set out in 4.2.2.

4.6 Statutory Recommendations

4.6.1 The Value for Money Governance Review made three statutory recommendations that the council has a legal obligation to respond to. These recommendations are incorporated into the single Improvement Plan and are embedded across each of the six themes.

4.6.2 To provide an overview of progress against these three specific recommendations, Appendix 3 extracts the key actions that respond to each of the recommendations.

4.7 Reporting Framework and Governance

4.7.1 To ensure that senior officers and members have oversight of delivery, Council approved the reporting mechanism for the Improvement Plan in June 2022. This set out that progress will be monitored by Leadership Team monthly and reported to Cabinet quarterly until all actions have been completed, or changes have been embedded into business as usual. The diagram included at Appendix 4 sets out the governance framework.

4.7.2 Two quarterly updates on progress of the Governance Improvement Plan were provided to Cabinet in April 2022 and July 2022. The first quarterly update to Cabinet on the single Improvement Plan was considered on 28 September 2022.

4.7.3 The report to Council seeking approval of the Improvement Plan stated that existing member-led committees, such as the Governance & Constitution Review Committee, Audit & Risk Assurance Committee and Scrutiny Committees, will be used for decision making and maintaining oversight of the actions and implementation of the Improvement Plan.

4.7.4 The Governance & Constitution Review Committee and cross-party Working Group have been integral to the development and review of



the governance documents, ahead of decisions taken by Council in July and due later this year.

- 4.7.5 Audit & Risk Assurance Committee received an introduction to the Improvement Plan and the Improvement Plan Risk Register in June 2022, and received a quarterly progress report and the risk register in September 2022. This report forms the second quarterly update to Audit and Risk Assurance Committee.
- 4.7.6 Budget & Corporate Scrutiny Management Board has included several elements of the Improvement Plan on their work programme as well as regular reports on overall progress. Budget & Corporate Scrutiny Management Board received a report on overall progress of the Improvement Plan in September 2022, and will receive the second quarterly update in November 2022.
- 4.7.7 Any recommendations or comments from Audit & Risk Assurance Committee and Budget & Corporate Scrutiny Management Board will be included in the report to Cabinet in December 2022.
- 4.7.8 The government Directions require reporting on the delivery of the Improvement Plan at six monthly intervals to the Secretary of State from the council and the Commissioners. The next report is due in December 2022. In December, Council will consider a recommendation from Cabinet to approve a letter to the Secretary of State along with details of the Council's progress against the Improvement Plan.

4.8 Risk Management

- 4.8.1 The Improvement Plan Risk Register underpins the council's strategic risk relating to the council's Improvement Plan (59a 02/22) and is currently rated as an overall Amber risk. The risk register is reported monthly to Leadership Team and quarterly to Cabinet.
- 4.8.2 The current risk register will be provided at Appendix 5. The main risks are associated with:
- **Resources** – for delivery of key components of the plan including the performance management framework, asset management system implementation and culture change programme. The financial resources required have been identified and were approved by Council in June.



- **Organisational Culture** – If the organisational culture doesn't change, this will limit the improvements that can be made. A theme within the Improvement Plan focuses on organisational culture. It includes plans for a comprehensive engagement programme with staff and members to define a collectively owned culture. We will then embed the conditions for this culture to thrive.
- **Communication** – to ensure everyone is aware of their respective roles and responsibilities. Communication is taking place through a range of methods including briefings, live events, and regular messages.
- **Constitutional Changes** – key corporate governance documents are being reviewed and the first set were approved in July with others to follow in November and December. Once approved, these policies provide an important foundation for improvement.
- **Performance Management Framework** – to ensure that we can effectively monitor progress and evidence improvement. Each theme includes an outline of how success will be evidenced. Processes for monitoring progress are in place, and processes for capturing and using evidence of improvement will be developed.
- **Historic Issues** – if there is a continued focus on and resource directed towards historic issues this will hinder improvement. The improvement plan contains actions to bring historic issues to a conclusion and embed lessons learnt.

4.9 Changes to the Improvement Plan

- 4.9.1 The Improvement Plan is intended to be a live document updated to take account of progress and relevant changes.
- 4.9.2 The Improvement Plan report to Council in June 2022 set out that changes (which may include the addition of new workstreams or objectives, or the amendment of timescales for delivery of actions) will be tracked through programme management mechanisms and that Cabinet will retain oversight of changes through regular formal reporting.
- 4.9.3 Changes are considered by Leadership Team at on a quarterly basis. Appendix 6 will contain details of all the changes made to the Improvement Plan this quarter. This quarter, a number of assurance actions have been added to the Improvement Plan. These have been included where core actions within a workstream are now complete, but



there is a need to ensure that the approach becomes embedded and is sustained.

4.10 External Reviews

4.10.1 External assurance continues to play a part in our improvement journey. The council has invited Grant Thornton, LGA and CIPA to monitor our progress in addressing the recommendations in their reviews. Grant Thornton and the LGA conducted their follow-up review activities over September and October 2022 and CIPFA will conduct their review in November 2022.

4.10.2 The external review findings and reports are expected to be received in forthcoming months. In their initial feedback from their return visit, the LGA recognised the significant progress that has been made in a number of key areas to the good governance and management of the council, but also stressed that the council is on a journey that will take time and there is still a long way to go to embed the improvements required. The LGA's formal report will build on this initial feedback and identify any further recommendations for the council to consider.

4.10.3 A further update to the Improvement Plan will take place in early 2023 once the council has had the opportunity to reflect on the findings from Grant Thornton, LGA and CIPFA as a result of their Autumn 2022 follow-up visits, and the outcomes of the culture listening exercise.

5 Implications

Resources:	Resources to deliver the Improvement Plan have been allocated from within existing commitments in the majority of cases. Where one-off funding is required to deliver improvements, this will either be funded from the Improvement and Capacity Fund or from earmarked reserves created from 2021/22 underspend position. Allocation of this funding was approved by Council with the Improvement Plan on 7 June 2022.
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	<p>Where funding is required for longer-term change, this will be incorporated into the Medium-Term Financial Strategy.</p> <p>There are no land or building implications associated with the Improvement Plan as a whole.</p>
<p>Legal and Governance:</p>	<p>On 22 March 2022, The Secretary of State for Levelling Up, Housing and Communities issued Directions under Section 15(5) and (6) of the Local Government Act 1999 (the 1999 Act) in order to ensure that the council can comply with the requirements of Part 1 of the 1999 Act. Failure to comply with these Directions may lead to further intervention measures for the council.</p> <p>The regular reporting development and approval of this Improvement Plan will mean that the council has achieved one of the elements within the Directions within the specified timescales.</p> <p>The delivery of the Improvement Plan and achievement of the desired outcomes will meet the remainder of the Directions.</p> <p>Ultimately, the changes made through the Improvement Plan will enable the council to effectively deliver its strategic priorities and ensure it is delivering value for money for Sandwell.</p> <p>Audit and Risk Assurance Committee’s consideration of progress of the Improvement Plan and the risk register, contributes to the governance and assurance framework of the Improvement Plan.</p>
<p>Risk:</p>	<p>If the Council fails to take appropriate action to meet the requirements set out in the government Direction, or the Commissioners appointed by the Secretary of State do not have sufficient confidence that appropriate actions are being taken to implement and sustain the required improvements, then the council</p>



	<p>risks not having appropriate arrangements in place to comply with its best value duty under Part 1 of the 1999 Act. This could lead to further government intervention, increased costs and damage to reputation.</p> <p>A risk register will be maintained for the duration of the Improvement Plan which will underpin the council's strategic risk relating to the council's Improvement Plan (59a 02/22). This is reported monthly to Leadership Team, quarterly to Cabinet, and will be regularly reported to Audit and Risk Assurance Committee.</p>
Equality:	The successful delivery of the Improvement Plan will require the development and review of many of the council's policies and procedures. These changes will build in consideration of the impact on equalities throughout the development and will include an Equality Impact Assessment where appropriate.
Health and Wellbeing:	The underpinning objective of the Improvement Plan is to ensure the council is able to achieve the strategic priorities as set out in the Corporate Plan. These priorities focus on improving the health and wellbeing of our residents and tackling health inequalities in a multi-faceted way. Therefore, any improvements to the council's governance structures will strengthen the council's ability to deliver services that will improve the health and wellbeing of Sandwell.
Social Value	Within the Improvement Plan, the council is committed to developing its Social Value Policy in conjunction with the refresh of the Procurement & Contract Procedure Rules. Through strengthening our asks of contractors through this Social Value Policy and linking them to the Corporate Plan objectives, the council will be able to maximise its social value return.

6 Appendices



- Appendix 1** - Improvement Plan Monitoring Tool October 2022
- Appendix 2** - Improvement Plan Theme Progress Summary October 2022
- Appendix 3a** – Audit Recommendations October
- Appendix 3b** - Statutory Recommendations Reporting October 2022
- Appendix 4** - Improvement Plan Governance Diagram
- Appendix 5** - Improvement Plan Risk Register October 2022
- Appendix 6a** – October Changes to the Improvement Plan
- Appendix 6b** – Change Control October

7 Background Papers

Improvement Plan Quarterly Monitoring Reports

- Cabinet September 2022
- Budget and Corporate Scrutiny Management Board September 2022
- Audit and Risk Assurance Committee September 2022

Sandwell Council Governance Improvement Plan

- [Adopted January 2022](#)
- [Quarterly Monitoring April 2022](#)
- [Quarterly Monitoring July 2022](#)

Sandwell Council Improvement Plan [Report to Council 7 June 2022](#)

Appendices:

- [Sandwell Council Improvement Plan](#)
- Grant Thornton Value for Money Governance Review Report December 2021
- CIPFA Financial Management Review Report January 2022
- LGA Corporate Peer Challenge March 2022
- Sandwell Directions under Section 15(5) and (6) of the Local Government Act 1999, 22 March 2022
- Sandwell Directions - Explanatory Memorandum



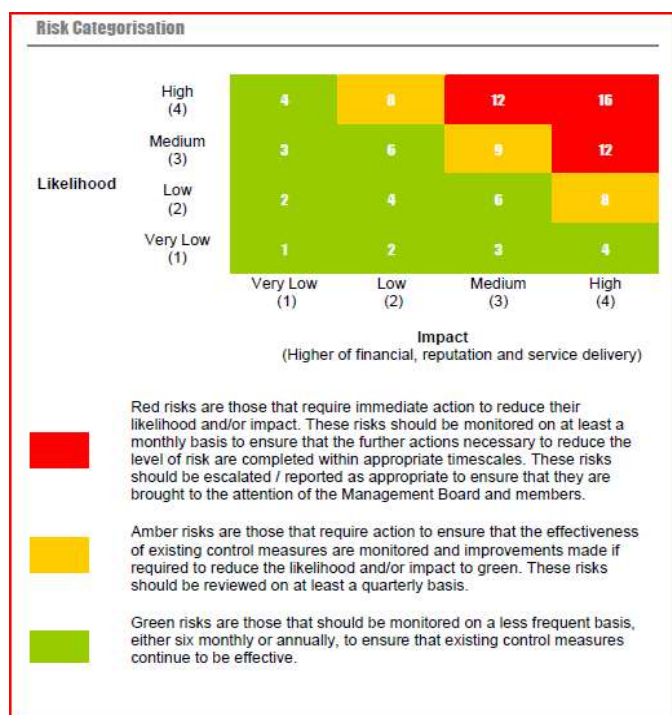


IMPROVEMENT PLAN

Progress against Plan Status Rating	Definition	Leadership Team Action as a result
On Track	Progress against the action is in line with the delivery date with no or minor (of less than a month) actual/projected slippage that does not impact on any dependencies	Leadership Team note progress and seek assurance that on track
Medium progress	Progress on the action is being made but there is actual/projected slippage of between 1-2 months, or any minor slippage presents a risk to dependencies	Leadership Team watching brief and review impact on dependencies
Significant issues / slippage	Progress on the action is or projected to be behind schedule by more than 2 months, or any slippage (actual or projected) presents a risk to critical milestones	Leadership Team review and remedy
Not due to start	Work on the action is not due to start	N/a
Complete	Action is complete	N/a
Closed	Action is complete and there is evidence that the measures of success have been fulfilled	Evidence to be provided
N/A	Update not required at this time	N/a

Action Risk Score (Use Corporate Risk Matrix)

Score	Impact - Higher of			Likelihood (the proximity of the risk at the time of assessment)
	Financial	Reputation	Service Delivery	
4 (High)	>20% of budget	National media coverage – permanent impact on reputation	>80% Serious service or programme failure directly affecting vulnerable groups, requiring intervention by Members.	Almost certain It is reasonable to expect that the event will undoubtedly happen or recur, possibly frequently or at least within the next six months A more than 50% chance of the risk occurring
3 (Medium)	11% to 20% of budget	Local media and TV coverage - long term local reputation affected	50%-80% Significant service or project disruption requiring intervention by Corporate Directors / Management Board	Probably / likely The event is more than likely to occur. It will probably happen in the next year but is not a persisting issue. The chance of the event occurring is between a 25% to 50% likelihood
2 (Low)	5% to 10% budget	Local newspaper coverage – reputation affected temporarily	25%-49% Noticeable disruption to outputs requiring intervention by a relevant Director / Service Manager	Possible Little likelihood of the event occurring. It might happen in the next 18 months or recur occasionally. The chance of the event occurring is between a 10% to 24% likelihood.
1 (Very Low)	<5% of budget	Local gossip/ reputation affected internally	<25% Short term service disruption requiring intervention by a unit or project manager or equivalent	Unlikely The event is not expected. There is no expectation that the event will occur, but it is possible that it might do so. The chance of the event occurring is less than 10%.



Theme 1 -Organisational Culture

															October Update Due		
Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating	Change Control required		
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October		
Establishing Organisational Culture	OC.A1.0	Establish the desired organisational culture for Sandwell Council	Director – Business Strategy and Change	Deputy Leader		Head of HR	May 2022	Dec 2022	Low Risk	Failure to agree desired organisational culture	N/A	N/A	N/A	N/A			
Establishing Organisational Culture	OC.A1.1	Phase 1 Engagement: Starting the Conversation	Director – Business Strategy and Change	Deputy Leader		Head of HR	Jun 2022	Jul 2022	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	13 Listening sessions carried out up to the end of September. (Some original dates had to be rescheduled to due to additional public holiday on 19.9.22). Further sessions planned for October. Survey to be issued as part of all Staff briefing taking place 11 October. Drop in sessions planned for front line workers. Rambutan to have all data by end of October. DS 26.9.22	Complete	Phase 1 marked as complete. Phase 1 included the initial scoping of the approach to be taken to determining the desired organisational culture and initial communication and engagement with staff ahead of Phase 2 (detailed engagement). Phase 2 commenced with the listening group exercises.			
Establishing Organisational Culture	OC.A1.2	Phase 2 Engagement: Determining Desired Culture	Director – Business Strategy and Change	Deputy Leader		Head of HR	Aug 2022	Dec 2022	N/A	N/A	On Track- little or no slippage	Listening groups continue as above commentary	On Track- little or no slippage	As above phase 1 complete, final listening groups taking place in Oct/Nov. Plan to present the outcomes of the sessions/surveys to LT on 22 November. (DS 17.10)			
Establishing Organisational Culture	OC.A1.3	Approval of document setting out the desired organisational culture	Director – Business Strategy and Change	Deputy Leader		Head of HR	Autumn 2022	Autumn 2022	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Pending completion of phases 1 and 2	Medium Progress- actual/ projected slippage of 1-2 months	As per OC.A1.2 the first iteration of the desired organisational culture will go to LT end of November 2022. DS suggest Change Control to January to allow LT time to refine and feedback on first draft. (DS 17.10)	Yes		
Establishing Organisational Culture	OC.A2.0	Create the right environment for that organisational culture to thrive	Director – Business Strategy and Change	Deputy Leader					Medium Risk	Lack of engagement to embed desired culture	N/A	N/A	N/A	N/A			
Establishing Organisational Culture	OC.A2.1	Organisational Development Strategy and Plan Approved Proposed re-wording to action: Workforce Strategy approved	Director – Business Strategy and Change	Deputy Leader		Head of HR	TBC	End 2022	N/A	N/A	Not due to start	Not due to start	Medium Progress- actual/ projected slippage of 1-2 months	Redefine as Workforce Strategy. No start date specified yet this is due to complete end of 2022. Need change control as this is dependent on outcomes of OC.A1.0 above (DS 17.10.22). First draft will be complete by December, to be refined incorporating OC.A.1. outcomes January 2023; complete by March 2023 for multi-year strategy period. Change of dates to start Dec 2022 and end March 2023.	Yes		
Establishing Organisational Culture	OC.A2.2	Other actions as a result of engagement phases	Director – Business Strategy and Change	Deputy Leader		Head of HR	TBC	TBC	N/A	N/A	Not due to start	Not due to start	Not due to start	Not due to start			
Officer Learning and Development	OC.B1.0	Design and deliver Corporate Governance Training for Officers	Director – Business Strategy and Change	Deputy Leader	Director- Law & Governance				Low Risk	Failure to deliver required training within agreed timescales	N/A	N/A	N/A	N/A			
Officer Learning and Development	OC.B1.1	Scope of Corporate Governance Training for Officers approved (including comprehensive finance and governance training tailored to those with different levels of financial responsibility)	Director- Law & Governance	Deputy Leader	Director – Business Strategy and Change Director - Finance		May-22	Jun-22	N/A	N/A	Complete	Scope of training agreed and being delivered as an ongoing programme linked to constitutional approvals.	Complete	Scope of training agreed and being delivered as an ongoing programme linked to constitutional approvals.			
Officer Learning and Development	OC.B1.2	Revision of Corporate Induction	Director – Business Strategy and Change	Deputy Leader	Director- Law & Governance	Head of HR	Autumn 2022	Feb-23	N/A	N/A	Not due to start	Not due to start	On Track- little or no slippage	Preparatory discussions are taking place			
Officer Learning and Development	OC.B1.3	Effective decision-making training	Director- Law & Governance	Deputy Leader	Director – Business Strategy and Change		Jul-22	Sep-22	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Scheduled to commence late November linked to scheme of delegation approvals. (Slippage due to Council date)	Medium Progress- actual/ projected slippage of 1-2 months	Guidance around decision making is being issued to Officers in October. Dates for training are being agreed. Training will take place Nov/Dec. Change control to amend delivery date to December 2022.	Yes		
Officer Learning and Development	OC.B1.4	Procurement of Delivery Partner (corporate governance training)	Director- Law & Governance	Deputy Leader	Director – Business Strategy and Change		Jun-22	Aug-22	N/A	N/A	On Track- little or no slippage	External partner to deliver training in November/December around directorships and trusteeships is in place. Training dates being scheduled for Nov/Dec. (Green - on track - as external partner in place)	Complete	Beth Evans Consulting will be delivering training Nov/Dec. Date to be confirmed. PMO comment: Action marked as complete as procurement took place within timescale. New action proposed to reflect the delivery of training (see OC.B1.7)			

October Update Due															
Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating	Change Control required
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October
Officer Learning and Development	OC.B1.5	Delivery of Corporate Governance Training	Director – Business Strategy and Change	Deputy Leader			Autumn 2022	Dec-22	N/A	N/A	On Track- little or no slippage	First round of training has taken place. Further training will take place Nov and Dec with regards to constitutional approvals that will be taken to Nov Council. Training focusing on directorships and trusteeships is due to be delivered in November/ December.	On Track- little or no slippage	Range of corporate governance training has been delivered linked to the constitutional approvals. Remaining component is effective decision making. Guidance being issued around decision making (October). Further training around decision making will take place dates to be confirmed (see 1.3 above).	
Officer Learning and Development	OC.B1.6	Annual Refresher of Corporate Governance Training	Director – Business Strategy and Change	Deputy Leader			TBC 2023	TBC 2023	N/A	N/A	Not due to start	Not due to start	Not due to start	Training will be built into workforce strategy	
Officer Learning and Development	OC.B1.7	New action: Delivery of Directorships and Trusteeships Training	Director - Law & Governance	Deputy Leader			Nov-22	Dec-22					New Action Added	Beth Evans Consulting will be delivering training Nov/Dec. Date to be confirmed.	Yes
Officer Learning and Development	OC.B2.0	Develop a clear programme of management development	Director – Business Strategy and Change	Deputy Leader					Low Risk	Lack of engagement from managers with the programme	N/A	N/A	N/A		
Officer Learning and Development	OC.B2.1	Management Development Programme- Designed Management and Development Programme Scope, Content and Budget Agreed	Director – Business Strategy and Change	Deputy Leader					N/A	N/A	On Track- little or no slippage	Procurement and Officer-Member behaviour training commenced as planned. However, design of complete programme unlikely to be achieved and fully signed off ahead of early 2023 due to need to align to new behaviour framework and workforce strategy. Request change to April 2023 for delivery commencement by start of new financial year	On Track- little or no slippage	Specific learning interventions have been delivered as per the training requirements of the IP. These now need to be developed into a broader Management development Programme. Suggest new action is "Management and Development programme scope, content and budget agreed" Change to April 2023 (DS 17.10.22)	Yes
Officer Learning and Development	OC.B2.2	Budget Holder Role Profile Approved	Director - Finance	Deputy Leader				May-22	N/A	N/A	Complete	complete	Complete	complete	
Officer Learning and Development	OC.B2.3	Incorporate training on company roles and responsibilities in senior officer development plan	Director- Law & Governance	Deputy Leader					N/A	N/A	On Track- little or no slippage	Due to be delivered in November/December (directorships and trusteeships)	Complete	Due diligence work carried out between L&D and Democratic Services/External legal provider to identify current Directors with company roles - none currently are in scope as Company directors, the training is currently for Members only (DS 17.10.22) In future, in the event that any officers are appointed, training will be offered at this point.	
Officer Learning and Development	OC.B2.4	Management Development Programme Delivery	Director – Business Strategy and Change	Deputy Leader			2023	2023	N/A	N/A	Not due to start	Not due to start	Not due to start	Not due to start change control to include firmer start date as April 2023.	Yes
Officer and Member Relationship	OC.C1.0	Continue regular weekly meetings between Cabinet Members and Leadership Team	Director- Law & Governance	Leader of the Council					Low Risk	If formalised meeting structures aren't in place, opportunities may be missed for issues to be discussed. Other regular meetings are taking place.	N/A	N/A	N/A	N/A	
Officer and Member Relationship	OC.C1.1	Regular meetings of Commissioners, Monitoring Officer, Section 151 Officer and Chief Whips commence	Director- Law & Governance	Leader of the Council			May 2022	May 2022	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Regular meetings with Whips are being diarised. Regular meetings with Group Leaders have been taking place and these have been meeting needs. No issues arising with this approach. Regular meetings being diarised will ensure sustainability and put arrangements on a more formal footing.	Medium Progress- actual/ projected slippage of 1-2 months	Remaining action is for regular meetings with Whips to be diarised for the rest of the Municipal Year. No issues arising. Categorized Amber as regular meetings with Group Leaders in place. Change Control to change date to November.	Yes
Officer and Member Relationship	OC.C1.2	Meeting structures to support regular dialogue between Senior Leadership (Officer and Member) confirmed for new Municipal Year	Director- Law & Governance	Leader of the Council			May 2022	Jun 2022	N/A	N/A	On Track- little or no slippage	Dates are in diaries and arrangements are currently working fine. Further review will be undertaken following the constitutional council at its November meeting.	Complete	In place for Municipal Year and no issues arising.	
Officer and Member Relationship	OC.C2.0	Continue to adopt star chamber approach for Cabinet Members and Chief Officers as part of budget setting approach	Director - Finance	Deputy Leader			2021	Summer 2022	Low Risk	On track	Complete	Star Chambers all completed by 28th September	Complete	Star Chambers all completed by 28th September. PMO note: proposed closure of main action. Added to Change control.	

October Update Due															
Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating	Change Control required
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October
Officer and Member Relationship	OC.C3.0	Engage LGA to support Officers and Members to develop the relationship going forward including continuation of LGA Cabinet Member mentoring programme	Director- Law & Governance	Leader of the Council			May 2022	Dec 2022	Medium Risk	If cultural and behavioural historic issues that have affected the Council's ability to deliver could return if the relationship between Officers and Members is not addressed.	On Track- little or no slippage	4 sessions between Members and Officers with LGA have taken place. 1 more session to take place with Officers (Nov) and there will then be a report produced by LGA, identifying any further actions required.	On Track- little or no slippage	Final session to be held by LGA with Officers on 21st Nov. Following this session, a report will be produced by the LGA.	
Officer and Member Relationship	OC.C4.0	Ward and Casework Management	Director- Law & Governance	Deputy Leader	Director- Law & Governance		May 2022	Oct 2022	Medium Risk	Risk relates to reputational harm where Members are unable to have their case work addressed in a timely manner	N/a	N/A	N/a	Main action around ward and casework management to be incorporated within new workstream focusing on customer experience- noted on change control	
Officer and Member Relationship	OC.C4.1	Process and approach review –completed as part of customer feedback review	Director- Law & Governance	Deputy Leader	Director- Business Strategy & Change			Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Officer and Member Relationship	OC.C4.2	Leadership Team conversation to identify mechanisms to embed and sustain the required approach and process forward and casework (linked to desired organisational culture)	Director- Law & Governance	Deputy Leader	Director- Business Strategy & Change				N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Review of portal now needs to be reviewed in conjunction with C3.0 above as there is an overlap and it needs to be re-focused on the entire customer journey. Awaiting LGA report to identify next steps. Immediate steps around timeliness and quality of responses to be discussed by Lshp Team in conjunction with customer experience. This specific action around embedding and sustaining the required approach and process will be recrafted within a new workstream focusing on the Customer Journey which will be put forward at next month's change control.	Complete	This sub-action is to be closed. Main action around ward and casework management to be incorporated within new workstream focusing on customer journey	Yes
Member Learning and Development	OC.D1.0	Deliver Member Development Programme including Finance Training Programme	Director- Law & Governance	Deputy Leader					Medium Risk	If we do not ensure Members have the required knowledge and skills to undertake their roles, the Council is at risk of not delivering its priorities and is at risk of challenge around decision	N/a	N/A	N/a	N/A	
Member Learning and Development	OC.D1.1	Service Showcase	Director- Law & Governance	Deputy Leader				18-May-22	N/A	N/A	Complete	Complete	Complete	Complete	
Member Learning and Development	OC.D1.2	New Member Induction	Director- Law & Governance	Deputy Leader			May-22	Jun-22	N/A	N/A	Complete	complete	Complete	complete	
Member Learning and Development	OC.D1.3	Approval of Member Development Programme	Director- Law & Governance	Deputy Leader			Jul-22	Jul-22	N/A	N/A	Complete	Complete	Complete	Complete	
Member Learning and Development	OC.D1.4	Deliver Member Development Programme	Director- Law & Governance	Deputy Leader			Jul-22	Mar-23	N/A	N/A	On Track- little or no slippage	Ongoing delivery. No issues to raise.	Complete	This has moved into regular business of the Ethical Standards and Member Development Committee. They review the MDP. Immediate requirements have been met for the purposes of the IP. ES&MDC review on a regular basis. Evidence base is the minutes of the committee.	Yes
Member Learning and Development	OC.D2.0	Design and deliver Corporate Governance Training for Members	Director- Law & Governance	Leader of the Council	Director- Finance				Medium Risk	If there is insufficient understanding of corporate governance arrangements, this will leave the Council open to reputational and potential legal challenge.	N/A	N/A	N/A	N/A	
Member Learning and Development	OC.D2.1	Scope of Corporate Governance Training for Members approved	Director- Law & Governance	Leader of the Council	Director- Finance		Mar-22	Jun-22	N/A	N/A	Complete	complete	Complete	complete	
Member Learning and Development	OC.D2.2	Effective decision-making training	Director- Law & Governance	Leader of the Council	Director- Finance		Jul-22	Sep-22	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Being prepared for Nov/Dec linked to Council date slippage to Nov. Centre for Governance and Scrutiny are providing training in Nov.	Medium Progress- actual/ projected slippage of 1-2 months	Being prepared for Nov/Dec linked to Council date slippage to Nov. Centre for Governance and Scrutiny are providing training in Nov. PMO: Change control proposed for end date of December.	Yes

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Member Learning and Development	OC.D2.3	Procurement of delivery partner (for Corporate Governance Training)	Director- Law & Governance	Leader of the Council	Director- Finance		Jul-22	Sep-22	N/A	N/A	Complete	Centre for Governance and Scrutiny are providing training in Nov.	Complete	Centre for Governance and Scrutiny are providing training in Nov.			
Member Learning and Development	OC.D2.4	Delivery of Corporate Governance Training	Director- Law & Governance	Leader of the Council	Director- Finance		Autumn 22	Dec-22	N/A	N/A	On Track- little or no slippage	Centre for Governance and Scrutiny are providing training in Nov.	On Track- little or no slippage	Centre for Governance and Scrutiny are providing training on 28 Nov.			
Member Learning and Development	OC.D2.5	Annual Refresher and inclusion in new Member induction	Director- Law & Governance	Leader of the Council	Director- Finance		Sep-22	Nov-22	N/A	N/A	On Track- little or no slippage	Update as per last month.	Not due to start	This action will commence in line with annual refresher of MDP. Change control- Change to Start: March 2023 for delivery following Annual Council: Summer 2023	Yes		
Member Learning and Development	OC.D3.0	Continue forward plan for all Member briefings based on themes of work / areas for development	Director- Law & Governance	Leader of the Council					Low Risk	Risk relates to insufficient forward planning leading to missed opportunities	N/A	N/A	N/A	N/A			
Member Learning and Development	OC.D3.1	Forward Plan for All Member Briefings in place for new Municipal Year	Director- Law & Governance	Leader of the Council			May-22	Jun-22	N/A	N/A	On Track- little or no slippage	In place and no issues arising	Complete	Latest briefing took place 18/10. Forward plan in place. No issues arising.			
Member Learning and Development	OC.D3.2	Leadership Team Review of All Member Briefings to ensure they are meeting needs	Director- Law & Governance	Leader of the Council			Mar-22	Ongoing	N/A	N/A	On Track- little or no slippage	In place and no issues arising	On Track- little or no slippage	Briefing note will be compiled to report back on the last 12months as a closure report.			
Member Learning and Development	OC.D4.0	Induction training for Leader and Cabinet Members on appropriate processes relating to the employment of Chief Officers, and in particular Statutory Officers	Director- Law & Governance	Leader of the Council			Jun-22	Jul-22	Low Risk	If there is insufficient knowledge and training for Chief Officers Terms and Conditions Committee, then recruitment and selection may result in an unsuitable appointment.	Medium Progress- actual/ projected slippage of 1-2 months	Due to availability in August, training will likely be delivered in September.	Significant issues / actual/projected slippage- more than 2 months	HR have confirmed training will be delivered ahead of interviews for CEX (on the specific processes relating to that appointment).			
Internal Communications	OC.E1.0	A clear and joint message from Chief Executive and Leader regarding Officer and Elected Member relationship delivered	Director- Law & Governance	Leader of the Council	Head of Communications		Dec-22	Dec-22	Low Risk	Failure to successfully complete the action.	Complete	Comms messages have taken place and training sessions held have reinforced the messages around the relationship. Approach to action has been different to how drafted. Attendance records and engagement with training help demonstrate that progress has been achieved.	Complete	Comms messages have taken place and training sessions held have reinforced the messages around the relationship. Approach to action has been different to how drafted. Attendance records and engagement with training help demonstrate that progress has been achieved.			
Internal Communications	OC.E2.0	Deliver the communications strategy to assist with more effective internal communications	Director – Business Strategy and Change	Leader of the Council			Feb-22	Ongoing	Low Risk	Failure to deliver against strategy	On Track- little or no slippage	NC 28/9/22: Presentation to Leadership Team on 20/9 around co-ordinating corporate affairs messaging, social media strategy and development of a corporate narrative. All proposals agreed and progressing	On Track- little or no slippage	Continuation of internal comms channels. Director Live Events have taken place over Autumn. All Staff briefing taking place in November	Yes		
Internal Communications	OC.E2.1	Add new action: Internal comms channels used to deliver comms messages on an ongoing basis including: - All staff briefing - Team Talk Leadership Updates - Member bulletin - Director live events - Bostin People e-bulletin (New)	Director – Business Strategy and Change	Leader of the Council			Ongoing	Monthly updates through IP					New Action Added				
Internal Communications	OC.E2.2	Add new action: Chief Executive's 100 day Comms Plan launched	Director – Business Strategy and Change	Leader of the Council			Spring 2023 TBC	TBC					New Action Added				
Internal Communications	OC.E2.3	Add new action: Develop proposal for all staff conference	Director – Business Strategy and Change	Leader of the Council			TBC Aligned to CEX 100 day plan	TBC					New Action Added				
Internal Communications	OC.E2.4	Add new action: Formal Employee Recognition Scheme - approach and resources identified	Director – Business Strategy and Change	Leader of the Council			TBC Aligned to CEX 100 day plan	TBC					New Action Added				
Internal Communications	OC.E2.5	Add new action: Continuous feedback on effectiveness of internal comms	Director – Business Strategy and Change	Leader of the Council			Ongoing	Quarterly Reporting					New Action Added				
Employee Engagement	OC.F1.0	Actions to respond to employee survey outcomes to be identified and embedded in improvement plan	Director – Business Strategy and Change	Deputy Leader			May-22	Aug-22	Medium Risk	Lack of engagement from individual directorates in identifying required actions	Medium Progress- actual/ projected slippage of 1-2 months	NC 28/9/22: Directorate actions and responses to survey in the process of being collated. Further discussion to be scheduled at LT on 18/10, at which point it should be agreed the range of actions needing to be included in the Improvement Plan	Complete	Leadership Team considered action plan in response to Employee Engagement Survey 18/10. Series of actions to respond already included within Organisational Culture Theme. EES specific action plan in place containing corporate actions and Directorate-specific actions. Actions around staff conference and formal employee recognition scheme have been added to OC.E2 above. EES Action plan will be monitored twice a year. New action added (Corporate Oversight: CO.B3) to ensure monitoring is taking place.	Yes		
Chief Executive Recruitment	OC.F2.0	Recruitment of Chief Executive	Commissioner	Leader of the Council				By Sept 2023	Medium Risk	Failure to recruit a suitable candidate leading to prolonged intervention	N/A		N/A				

Theme 2- Corporate Oversight

Theme 2- Corporate Oversight													October Update Due		
Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating	Change Control required
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)September 22	Status (October 2022)	Update (Initial and Date)October 22	October
ERP	CO.A1.0	Implement Oracle Fusion	Director- Finance	Deputy Leader	Director- Business Strategy & Change Director- Law		Dec-21	TBC (once Date is know this can be added to the IP monitoring tool)	Medium Risk	Implementation date depends on Support Implementor contract and mobilisation. Likely to be at least 12 month implementation from mobilisation of new SI contract.	N/A	N/A	N/A	N/A	
ERP	CO.A1.1	Cabinet approval for action plan to continue implementation of Oracle Fusion	Director- Finance	Deputy Leader	Director- Business Strategy & Change Director- Law			Complete	N/A	N/A	Complete	Complete	Complete	Complete	
ERP	CO.A1.2	Terminate implementation partner contract with InoApps	Director- Finance	Deputy Leader	Director- Business Strategy & Change Director- Law			Complete	N/A	N/A	Complete	Complete	Complete	Complete	
ERP	CO.A1.3	Implement robust project management arrangements	Director- Finance	Deputy Leader	Director- Business Strategy & Change Director- Law			Complete	N/A	N/A	Complete	Complete	Complete	Complete	
ERP	CO.A1.4	Review operational team to ensure there are appropriate resources in place during implementation phase	Director- Finance	Deputy Leader	Director- Business Strategy & Change Director- Law			Complete	N/A	N/A	Complete	Complete	Complete	Complete	
ERP	CO.A1.5	Project management training for all of project team, including Project Sponsors	Director- Finance	Deputy Leader	Director- Business Strategy & Change Director- Law		Jul-22		N/A	N/A	Complete	Key project members have received training. Ongoing training to be arranged as needed in the future.	Complete	Complete	
ERP	CO.A1.6	Procure new support provider to deliver Oracle Fusion	Director- Finance	Deputy Leader	Director- Business Strategy & Change Director- Law		Aug-22		N/A	N/A	Complete	Procurement complete and contract awarded	Complete	Complete	
ERP	CO.A1.7	Support provider in place and delivery commences	Director- Finance	Deputy Leader	Director- Business Strategy & Change Director- Law		Jul-22	TBC (once Date is know this can be added to the IP monitoring tool)	N/A	N/A	Complete	As above	Complete	Complete	
ERP	CO.A1.8	New actions will be added here to reflect implementation phase													Y
Improvement Planning, Monitoring and Learning	CO.B1.0	Single Improvement Plan Phase 1	Leadership Team	Leader of the Council			Mar-22	Jun-22	Low Risk	IP approved by Council in June. Remaining risks relate to effective progress monitoring of the IP and submissions to SoS.	N/A	N/A	N/A	N/A	
Improvement Planning, Monitoring and Learning	CO.B1.1	Council approval of Improvement Plan	Leadership team	Leader of the Council		Strategic Lead: Service Improvement		Jun-22	N/A	N/A	Complete	Complete	Complete	Complete	
Improvement Planning, Monitoring and Learning	CO.B1.2	Commissioners Report prepared	Commissioners	Leader of the Council		Chief Of Staff: Commissioner Team		by 22 June 2022	N/A	N/A	Complete	Complete	Complete	Complete	
Improvement Planning, Monitoring and Learning	CO.B1.3	Commissioners Report to Secretary of State	Commissioners	Leader of the Council		Chief Of Staff: Commissioner Team		by 22 June 2022	N/A	N/A	Complete	Complete	Complete	Complete	
Improvement Planning, Monitoring and Learning	CO.B1.4	New Action Added: Ongoing Monitoring of Improvement Plan (Monthly Monitoring by Leadership Team, Quarterly Monitoring by Cabinet, ARAC regular review of IP and IP Risk Register, Scrutiny regular review of IP)	Leadership Team	Leader of the Council		Strategic Lead: Service Improvement	Ongoing	Monthly assurance					New Action Added		Y
Improvement Planning, Monitoring and Learning	CO.B1.5	New Action Added: 6 monthly report to Secretary of State	Leadership Team	Council		Strategic Lead: Service Improvement	22-Dec	June each year throughout intervention					New Action Added		Y
Improvement Planning, Monitoring and Learning	CO.B1.6	New main action: Employee Engagement Survey Action Plan monitored and reviewed by Leadership Team	Director – Business Strategy and Change	Deputy Leader			Jan-23	Jan July each year					New Action Added		Yes

Static data		Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		Change Control required	
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October
Improvement Planning, Monitoring and Learning	CO.B2.0	Single Improvement Plan Phase 2	Leadership team	Leader of the Council			Jun-22	Jan-23	Low Risk	Risk relates to timely development and approval, and learning lessons from Phase 1 plan	N/A	N/A	N/A	N/A	yes
Improvement Planning, Monitoring and Learning	CO.B2.1	Council approval of Improvement Plan Phase 2	Leadership team	Leader of the Council		Strategic Lead: Service Improvement			N/A	N/A	Not due to start	Will commence following receipt of SoS reply, and feedback from Autumn External Reviews. Dates to be populated thereafter.	Not due to start	Will commence following receipt of SoS reply, and feedback from Autumn External Reviews. Start December 2022 and end March 2023	
Improvement Planning, Monitoring and Learning	CO.B3.0	Continuous Improvement Plan	Director- Business Strategy & Change	Leader of the Council			Autumn 2022	Spring 2023	Low Risk	Risk relates to timely development and approval linked to organisational culture theme	N/A	N/A	N/A	N/A	
Improvement Planning, Monitoring and Learning	CO.B3.1	Develop a Continuous Improvement Plan	Director- Business Strategy & Change	Leader of the Council			Autumn 2022	Spring 2023	N/A	N/A	Not due to start	Not due to start	On Track- little or no slippage	Initial scoping of work is taking place.	
Performance Management	CO.C1.0	Performance Management Framework (PMF)	Director- Business Strategy & Change	Deputy Leader			Sep-22	Ongoing	High Risk	Risks relate to capacity to embed PMF. Council approval of resources in June. Recruitment underway.	N/A	N/A	N/A	N/A	
Performance Management	CO.C1.1	Council approval of PMF	Director- Business Strategy & Change	Deputy Leader		Strategic Lead: Service Improvement		Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Performance Management	CO.C1.2	Q1 performance report	Director- Business Strategy & Change	Deputy Leader		Strategic Lead: Service Improvement		Aug-22	N/A	N/A	On Track- little or no slippage	RI 29/09/22: Q1 Perf Report made to Lhp Team in line with timescale. Q1 Performance report received by Cabinet on 28/09. Due for scrutiny consideration 13/10. Preparations being made for Q2 report to Cabinet in December. New actions required within this workstream to focus on sustaining approach.	Complete	RI 17.10.22: Q1 report considered by Budget and Corporate Scrutiny Management Board 13/10/22. All Member briefing on Q1 report held 18/10/22. Preparations underway for Q2 report to Cabinet in December. New action required to capture ongoing quarterly reporting.	
Performance Management	CO.C1.3	New Action Added: Quarterly Performance Reports made to Cabinet	Director- Business Strategy & Change	Deputy Leader		Strategic Lead: Service Improvement	Ongoing action	Quarterly monitoring to ensure approach embedded					New Action Added	New action added	Yes
Performance Management	CO.C1.4	New Action Added: Review Corporate KPIs for organisational health to reflect workforce strategy	Director- Business Strategy & Change	Deputy Leader		Strategic Lead: Service Improvement	January 2023	Apr-23					New Action Added	New action added	Yes
Performance Management	CO.C1.5	New Action Added: Review Corporate KPIs for customer experience to reflect customer experience programme	Director- Business Strategy & Change	Deputy Leader		Strategic Lead: Service Improvement	January 2023	Apr-23					New Action Added	New action added	Yes
Performance Management	CO.C2.0	Budget Monitoring	Director- Finance	Deputy Leader			Mar-22	Ongoing	Low Risk	Risk of untimely monitoring or lack of corporate oversight of the budget position impacting on effective decision making	N/A	N/A	N/A	N/A	
Performance Management	CO.C2.1	Report format agreed by Leadership Team	Director- Finance	Deputy Leader				Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Performance Management	CO.C2.2	Q1 budget report to Leadership Team, Cabinet and Scrutiny	Director- Finance	Deputy Leader				Aug-22	N/A	N/A	Complete	Qtr 1 report approved by Cabinet on 28th September	Complete	Complete	
Performance Management	CO.C2.3	Monthly budget monitoring	Director- Finance	Deputy Leader				Ongoing	N/A	N/A	Complete	Complete	Complete	Complete	
Performance Management	CO.C2.4	New Assurance action Added: Quarterly Budget Monitoring Reports made to Leadership Team, Cabinet and Scrutiny	Director- Finance	Deputy Leader			Ongoing action	Quarterly monitoring to ensure approach embedded					New Action Added		y
Performance Management	CO.C2.5	New assurance action added: Where budget pressures identified, assurance provided that action has/is being taken (monthly summary comment from S151 Officer / raise issues)	Director- Finance	Deputy Leader			Ongoing action	Monthly monitoring					New Action Added		y
Organisational Structure and Enabling Corporate Core	CO.D1.0	Restructuring	Leadership Team	Deputy Leader			Dec-20	Dec-22	Medium Risk	Without appropriate oversight there is a risk that this work will not be delivered in the required timeframe and will not be co-ordinated appropriately.	N/A	N/A	N/A	N/A	

Static data		Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		Change Control required	
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October
Organisational Structure and Enabling Corporate Core	CO.D1.1	Directorate Level restructuring	Director- Business Strategy & Change	Deputy Leader		Head of HR		22-Dec	N/A	N/A	On Track- little or no slippage	28/9/22 NC: Work currently focused on creating consistency at Service Manager level and redesignating roles as Assistant Director positions. Roles in 2 directorates currently going through job evaluation to determine if this achievable.	On Track- little or no slippage	19/10/22 Awaiting outcomes from JE for roles in 2 directorates. Spans and layers work is in early stages linked to LGA guidance.	
Organisational Structure and Enabling Corporate Core	CO.D1.2	New action: Review of spans and layers across Council's managerial structures in line with LGA Guidance (likely to be incorporated within Target Operating Model Programme in due course)	Director- Business Strategy & Change	Deputy Leader		AD - Transf Head of HR	TBC	TBC					New Action Added		Yes
Organisational Structure and Enabling Corporate Core	CO.D.2.0	Embedding Finance Business Partner role	Director- Finance	Deputy Leader			Jan-22	Aug-22	Low Risk	Risk relating to missed opportunities and inefficiency	N/A	N/A	N/A	N/A	
Organisational Structure and Enabling Corporate Core	CO.D2.1	Restructure of financial services section to provide a greater focus on business partnering completed	Director- Finance	Deputy Leader				Jun-22	N/A	N/A	Complete	Complete	Complete	Complete	
Organisational Structure and Enabling Corporate Core	CO.D2.2	Expectations on financial services section established	Director- Finance	Deputy Leader				Jun-22	N/A	N/A	Complete	Complete	Complete	Complete	
Organisational Structure and Enabling Corporate Core	CO.D2.3	Workforce development plan implemented for financial services section	Director- Finance	Deputy Leader	Finance Improvement Manager	Finance Improvement Manager		Sep-22	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Will be in place by the end of October. Slight slippage due to delay in interim resources starting.	Medium Progress- actual/ projected slippage of 1-2 months	CR 28.10.22: Some immediate external training has been progressed and undertaken on budget preparation and planning, and further targeted training courses arranged on specific technical areas for some staff. A training matrix is being developed to capture further training requirements going forwards.	Yes
Organisational Structure and Enabling Corporate Core	CO.D2.4	KPIs and standards developed for financial services section	Director- Finance	Deputy Leader	Finance Improvement Manager	Finance Improvement Manager		Aug-22	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Will be in place by the end of October. Slight slippage due to delay in interim resources starting.	Complete	Agreed timetable for distribution of monitoring reports, new standard format for reports to budget holders from month 7 as per AD Finance email to leadership team on 20.10.22	
Organisational Structure and Enabling Corporate Core	CO.D2.5	New Assurance Action: Performance against KPIs for financial services section	Director- Finance	Deputy Leader	Finance Improvement Manager	Finance Improvement Manager	Ongoing	Quarterly					Assurance Action		Yes
Organisational Structure and Enabling Corporate Core	CO.D3.0	Reduction of financial transactional activity	Director- Finance	Deputy Leader			Jan-22	Mar-23	Low Risk	On track. External support procured	N/A	N/A	N/A	N/A	
Organisational Structure and Enabling Corporate Core	CO.D3.1	Business process re-engineering resources approved	Director- Finance	Deputy Leader				Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Organisational Structure and Enabling Corporate Core	CO.D3.2	Review of internal charges	Director- Finance	Deputy Leader				Oct-22	N/A	N/A	Complete	Complete	Complete	Complete	
Organisational Structure and Enabling Corporate Core	CO.D3.3	Review of corporate debt recovery processes completed	Director- Finance	Deputy Leader				Oct-22	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Review underway but significant piece of work covering multiple teams so completion date now December 2022.	Medium Progress- actual/ projected slippage of 1-2 months	Review underway but significant piece of work covering multiple teams so completion date now December 2022.	Yes
Organisational Structure and Enabling Corporate Core	CO.D3.4	Programme of end to end process reviews	Director- Finance	Deputy Leader			May-22	Mar-23	N/A	N/A	On Track- little or no slippage	Transformation Programme being developed by Transformation AD.	On Track- little or no slippage	C Co in place to support finance transactional processes. Series of back office process reviews are being progressed through the Fusion Programme. Approach to transformation being considered by LT 03/11/22 as per updates elsewhere	
Organisational Structure and Enabling Corporate Core	CO.D3.5	Implementation of Recommendations from CIPFa in relation to internal charges	Director- Finance	Deputy Leader			Aug-22	Oct-22	N/A	N/A	On Track- little or no slippage		Not due to start	Simone to review. RJ drafted following conversation with CR. Awaiting report and recommendations from CIPFa. Following receipt, a plan will be made for implementing improvements to internal charges. Change start date to Oct to reflect expected receipt of CIPFa report and end date to TBC.	Yes
Organisational Structure and Enabling Corporate Core	CO.D4.0	Resolve issues relating to the completion and sign off of final accounts.	Director- Finance	Deputy Leader			Jan-22	May-22	Medium Risk	Some progress made	N/A	N/A	N/A	N/A	
Organisational Structure and Enabling Corporate Core	CO.D.4.1	External review of 2020/21 Statement of Accounts	Director- Finance	Deputy Leader				Complete	N/A	N/A	Complete	Complete	Complete	Complete	

														October Update Due	
Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating	Change Control required
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October
Organisational Structure and Enabling Corporate Core	CO.D4.2	New suite of working papers to support the 2021/22 year-end process agreed	Director- Finance	Deputy Leader				Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Organisational Structure and Enabling Corporate Core	CO.D.4.2	Additional resources in place for 2021/22 year-end process	Director- Finance	Deputy Leader				Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Organisational Structure and Enabling Corporate Core	CO.D4.3	Training for key members of the Finance Team complete	Director- Finance	Deputy Leader				Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Organisational Structure and Enabling Corporate Core	CO.D4.4	Simone to review New assurance Action: GT sign-off of 2020/21 Accounts (assurance that previous issues raised have been resolved)	Director- Finance	Deputy Leader			TBC one-off monitoring	TBC	N/A	N/A	Not due to start	not due to start	New Action Added		Yes
Organisational Structure and Enabling Corporate Core	CO.D4.5	Simone to review New assurance Action: Preparation of Draft Accounts for 2021/2022 (assurance that approach to completion and sign-off of final accounts is becoming embedded)	Director- Finance	Deputy Leader			TBC one-off monitoring	TBC	N/A	N/A	Not due to start	not due to start	New Action Added		Yes
Programme and Project Management	CO.E1.0	Programme and Project Management	Director- Business Strategy & Change	Deputy Leader			Dec-21	Late 2022	Medium Risk	Failure to embed consistent approach which provides appropriate oversight of all key projects and consistent approach to their management	N/A	N/A	N/A	N/A	
Programme and Project Management	CO.E1.1	Agree a Corporate approach to Project Management, including re	Director- Business Strategy & Change	Deputy Leader				Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Programme and Project Management	CO.E1.2	Suite of Programme and Project Documentation Agreed	Director- Business Strategy & Change	Deputy Leader				May-22	N/A	N/A	Complete	Complete	Complete	Complete	
Programme and Project Management	CO.E1.3	Corporate Transformation PMO established	Director- Business Strategy & Change	Deputy Leader		AD-Transformation		Late 2022	N/A	N/A	On Track- little or no slippage	NC 28/9/22 - Presentation to LT on 27/9/22 outlining the design principles for corporate PMO, agreement to proceed on this basis and present approach in 4 weeks	On Track- little or no slippage	24/10/22: LT approved governance and framework. In Nov, LT will consider how we manage pipeline of business change projects, governance to manage approval and progress of projects, project and programme mgmt methodology, business analysis methodology, business change methodology, setting up PMO, managing benefits lifecycle.	
Programme and Project Management	CO.E1.4	Programme and Project Management System Implementation	Director- Business Strategy & Change	Deputy Leader		AD-Transformation		Late 2022	N/A	N/A	On Track- little or no slippage	NC 28/9/22 - no additional update to provide	Medium Progress- actual/projected slippage of 1-2 months	24/10/22: Verto system that is being looked at in Regeneration and Growth & ASC Commissioning is likely to be suitable for Transformation Programme needs. Further exploration needed with a view to a pilot. End Date to be adjusted to Feb 2023 for implementation.	Yes
Customer Journey	CO.F5.0	Add new Main Action: Customer Journey Programme	Director - Business Strategy and Change	Deputy Leader		Transformation Programme Manager							New Action Added		yes
Customer Journey	CO.F5.1	Add new action: Structure and Governance for Customer Experience Programme approved	Director - Business Strategy and Change	Deputy Leader		Transformation Programme Manager	22-Sep	Oct-22					New Action Added	Action added retrospectively and is complete. Governance and Structure agreed by Leadership Team 18/10	
Customer Journey	CO.F5.2	Add new action: Workstream Plans agreed (timeline, cost and resource) for 5 workstreams (fix the backlog, fix the OSS, customer experience strategy, contact centre/community hubs approach, technology)	Director - Business Strat	Deputy Leader		Transformation Programme Manager		TBC					New Action Added		
Customer Journey	CO.F5.3	Add new action: Programme board in place and regular meetings scheduled (first programme board to involve ToR, scope of workstreams, nominations for resources for each workstream, and high level milestones)	Director - Business Strat	Deputy Leader		Transformation Programme Manager	Nov-22	Nov-22					New Action Added		

Theme 3 -Strategic Direction

Static data										Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		Change Control required
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October			
Strategy development and refresh	SD.A1.0	Regen Pipeline Development and Delivery	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth			Autumn 2021	Apr-27	Low Risk	Clear progress on key Pipeline projects; governance arrangements being finalised.	N/A	N/A	N/A	N/A				
Strategy development and refresh	SD.A1.1	Cabinet Approval of Regen Strategy and Pipeline 2022-27	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth				Complete	N/A	N/A	Complete	Complete	Complete	Complete				
Strategy development and refresh	SD.A1.2	Pipeline projects monitored on a 6-monthly basis	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth				Ongoing	N/A	N/A	On Track- little or no slippage	April- September update due. First update report across the 63 projects in the pipeline. Aiming for scrutiny and Cabinet in November/December	On Track- little or no slippage	April- September update due. First update report across the 63 projects in the pipeline. Aiming for scrutiny and Cabinet in November/December	Yes			
Strategy development and refresh	SD.A1.3	Internal infrastructure established for delivery.	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth			Mar-22	Mar-23	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	There are internal discussions about capacity and expertise to deliver the pipeline, these are not yet concluded.	Medium Progress- actual/ projected slippage of 1-2 months	There are internal discussions about capacity and expertise to deliver the pipeline, these are not yet concluded.				
Strategy development and refresh	SD.A1.3a	o Programme and Project Management Structures in place	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth				Complete	N/A	N/A	Complete	complete	Complete	complete				
Strategy development and refresh	SD.A1.3b	o Programme Management Software Procurement	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth				Apr-23	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Demonstration is occurring during October.	On Track- little or no slippage	Demonstration of VERTO has taken place (29/9/22); agreement in principle that this will be procured and piloted in Regen, Business Strategy & Change, Housing and Adult Social Care				
Strategy development and refresh	SD.A1.3c	o Project Management Software procurement	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth				Complete	N/A	N/A	Complete	complete	Complete	complete				
Strategy development and refresh	SD.A1.3d	o Microsite creation for information around priority projects for stakeholders	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth				Nov-22	N/A	N/A	On Track- little or no slippage	Website has been delivered, was due to go live this week (26/09) but has been postponed until November due to By-Election.	Complete	Website launched on 31 October after by-election ad featured in the Message to All Council Staff as an item.				
Strategy development and refresh	SD.A2.0	Corporate Asset Management Strategy Development	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth		Service Manager- Strategic Asset & Land	Autumn 2021	Sep-22	Medium Risk	If timescales are not met, there will be a period during which the Council will not have a fit-for-purpose asset database	N/A	N/A	N/A	N/A				
Strategy development and refresh	SD.A2.1	Work Place Vision	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth		Service Manager- Strategic Asset & Land		x	N/A	N/A	N/A	N/A	N/A	N/A				
Strategy development and refresh	SD.A2.2	Confirmation of funding for remaining Workplace Vision components	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth		Service Manager- Strategic Asset & Land		Autumn 22 linked to MTFP	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	No conclusion have yet been reached on this funding issue	Complete	Workplace vision has been closed. New corporate asset management strategy sets out the priorities.				
Strategy development and refresh	SD.A2.3	Transforming Local Services	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth		Service Manager- Strategic Asset & Land		x	N/A	N/A	N/A	N/A	N/A	N/A				
Strategy development and refresh	SD.A2.4	Cabinet Workshop to provide steer	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth		Service Manager- Strategic Asset & Land	Mar-22	Complete	N/A	N/A	Complete	Complete	Complete	Complete				

Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)/September 22	Status (October 2022)	Update (Initial and Date)/October 22	Change Control required
Strategy development and refresh	SD.A2.5	Options for hub locations identified	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth	Director - Housing (update required from both directors)	Service Manager- Strategic Asset & Land	Jun-22	Sep-22	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Cabinet workshop is concluded, options for (6) locations identified- agreed in principle by Cabinet. To go to Cabinet in November (delayed due to By Election)	Duplicate/ link to another action	The locations have been identified and agreed as per the Cabinet Workshop; report setting out this detail will formally be approved at 16 November Cabinet when this action can then be closed off. Action has now been incorporated within the Customer Journey Workstream and will be progressed through that programme (CO.D5)	
Strategy development and refresh	SD.A2.6	Asset Review	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth		Service Manager- Strategic Asset & Land		x	N/A	N/A	N/A	N/A	N/A	N/A	
Strategy development and refresh	SD.A2.7	Procurement of asset database	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth		Service Manager- Strategic Asset & Land		Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Strategy development and refresh	SD.A2.8	Implementation of new Asset Database	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth		Service Manager- Strategic Asset & Land	May-22	Dec-22	N/A	N/A	On Track- little or no slippage	On track for completion in December.	On Track- little or no slippage	Project is on track for completion in December.	
Strategy development and refresh	SD.A2.9	Surplus Assets & commercial estate	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth		Service Manager- Strategic Asset & Land			N/A	N/A	N/A		N/A		
Strategy development and refresh	SD.A2.10	Maximising Value out of surplus assets portfolio – Cabinet report	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth		Service Manager- Strategic Asset & Land		Sep-22	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	This will now be part taken to Cabinet in November (delay due to By-election)	Closed	The surplus assets report is incorporated within the Corporate Asset Management Strategy. (Action below)	
Strategy development and refresh	SD.A2.11	Corporate Asset Management Strategy Approved	Director-Regeneration & Growth	Cabinet Member for Regeneration and Growth		Service Manager- Strategic Asset & Land		Sep-22	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	This will now be part of cabinet in November (delay due to By-election)	Medium Progress- actual/ projected slippage of 1-2 months	This will now be part of cabinet in November (delay due to By-election)	Yes
Strategy development and refresh	SD.A3.0	Communications and Corporate Affairs Strategy Development and Delivery	Director - Business Strategy and Change	Leader of the Council			Autumn 2021	Ongoing	Low Risk	Failure to deliver against strategy	On Track- little or no slippage	NC 28/9/22: Presentation to Leadership Team on 20/9 around co-ordinating corporate affairs messaging, social media strategy and development of a corporate narrative. All proposals agreed and progressing	On Track- little or no slippage	Proposals from LT paper 20/09 progressing. Milestones around internal comms added to OCE.2	
Strategy development and refresh	SD.A3.1	Corporate Communications Strategy approved	Director - Business Strategy and Change	Leader of the Council				Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Strategy development and refresh	SD.A3.2	Communications Team restructure concluded to focus resources on key workstreams of Communications Strategy	Director - Business Strategy and Change	Leader of the Council				May-22	N/A	N/A	Complete	Complete	Complete	Complete	
Strategy development and refresh	SD.A4.0	Refresh and embed the Corporate Procurement Strategy	Director- Finance	Deputy Leader		Interim Procurement Strategy Manager	Autumn 2021	Jul-22	Low Risk		N/A	N/A	N/A	N/A	

Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		Change Control required
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October
Strategy development and refresh	SD.A4.1	Procurement & Contract Procedure Rules approved	Director- Finance	Deputy Leader		Interim Procurement Strategy Manager		May-22	N/A	N/A	Complete	complete	Complete	complete	
Strategy development and refresh	SD.A4.2	Training developed	Director- Finance	Deputy Leader		Interim Procurement Strategy Manager	Aug-22	Oct-22	N/A	N/A	On Track- little or no slippage	Training to be launched w/c 3rd October	Complete		
Strategy development and refresh	SD.A4.3	Training delivered	Director- Finance	Deputy Leader		Interim Procurement Strategy Manager	Autumn 22	Dec-22	N/A	N/A	On Track- little or no slippage	As above	On Track- little or no slippage	Training launched 3rd October consisting of initial introduction for managers. Further tailored training taking place for staff with procurement responsibilities.	
Strategy development and refresh	SD.A5.0	Develop and Implement the Commercial Strategy	Director- Finance	Deputy Leader			Autumn 2021	Jul-22	Medium Risk	Strategy has been drafted but limited opportunities for business streams have emerged. Training to be undertaken as next step to give relevant officers the appropriate skills and knowledge to review opportunities again	N/A	N/A	N/A	N/A	
Strategy development and refresh	SD.A5.1	Commercial Strategy Approved	Director- Finance	Deputy Leader				Oct-22	N/A	N/A	On Track- little or no slippage	Business Cases being developed and strategy will be updated at that point.	Medium Progress- actual/ projected slippage of 1-2 months	Commercial Opportunity Assessment Report received. Needs to be reviewed by Leadership Team and then Commercial Strategy can be updated to reflect opportunities to be taken forward.	Yes
Strategy development and refresh	SD.A5.2	Business Cases Presented for commercial workstreams	Director- Finance	Deputy Leader				Oct-22	N/A	N/A	On Track- little or no slippage	As above	Medium Progress- actual/ projected slippage of 1-2 months	As above	Yes
Strategy development and refresh	SD.A6.0	HRA 30 year Business Plan	Director- Housing	Cabinet Member for Housing	Assistant Directors - Housing Management and Asset Management		Autumn 2021	Apr-23	Low Risk	Plan is necessary for long term planning but delivery of asset improvements still continues without the plan	N/A	N/A	N/A	N/A	
Strategy development and refresh	SD.A6.1	Review of compliance and stock data	Director- Housing	Cabinet Member for Housing	AD, Asset Management and Improvement			May-22	N/A	N/A	closed	closed	closed	closed	
Strategy development and refresh	SD.A6.2	HRA Business Plan developed	Director- Housing	Cabinet Member for Housing	ADs		May-22	Mar-23	N/A	N/A	On Track- little or no slippage	GD 29/09: Draft plan has been received and shared with Lead Member. Data to be added and consultation started with key stakeholders	On Track- little or no slippage	Draft plan is due at Safer neighbourhoods and active communities Scrutiny Board on 1 Nov. On track for Cabinet in February.	
Strategy development and refresh	SD.A6.3	HRA Business Plan approved (in line with budget approval 2023-24)	Director- Housing	Cabinet Member for Housing				Apr-23	N/A	N/A	On Track- little or no slippage	As above	On Track- little or no slippage	as above	
Strategy development and refresh	SD.A6.4	Procurement of stock condition surveys	Director- Housing	Cabinet Member for Housing				Jun-23	N/A		On Track- little or no slippage	GD 29/09: Agreed by Cabinet 28/9 and now going out to tender.	On Track- little or no slippage	Due to go to tender in November 22	
Strategy development and refresh	SD.A7.0	Refresh the Early Help Strategy	Director- Children & Education	Cabinet Member for Children and Education			Autumn 2021	Mar-22	Low Risk	The strategy has been refreshed ahead of the launch in March 2022.	N/A	N/A	N/A	N/A	

Static data				Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	Change Control required	
Strategy development and refresh	SD.A7.1	Launch of Early Help Strategy	Director- Children & Education	Cabinet Member for Children and Education				Complete	N/A		Complete	Complete	Complete	Complete		
Strategy development and refresh	SD.A7.2	Early Help Strategy to be reviewed annually at the early help partnership board	Director- Children & Education	Cabinet Member for Children and Education			Apr-23	Annually	N/A		Not due to start		Assurance Action	new assurance action - to be agreed	yes	
Strategy development and refresh	SD.A8.0	Refresh Corporate Parenting Strategy	Director- Children & Education	Cabinet Member for Children and Education			Jan-22	Sep-22	Medium Risk	The Corporate Parenting Strategy Board are considering the refresh of the current strategy ahead of the implementation in September 2022.	N/A	N/A	N/A	N/A		
Strategy development and refresh	SD.A8.1	Re-focusing of strategic priorities	Director- Children & Education	Cabinet Member for Children and Education				Sep-22	N/A	N/A	On Track- little or no slippage	The Corporate Parenting Strategy Board are considering the refresh of the current strategy ahead of the implementation in September 2022.	Complete	The strategy has been circulated and agreed by corporate parenting board members		
Strategy development and refresh	SD.A8.2	Corporate Parenting Strategy approved	Director- Children & Education	Cabinet Member for Children and Education				Sep-22	N/A	N/A	On Track- little or no slippage	The Corporate Parenting Strategy Board are considering the refresh of the current strategy ahead of the implementation in September 2022.	Complete	The strategy has been circulated and agreed by corporate parenting board members- assurance action to be added to the improvement plan		
Strategy development and refresh	SD.A8.3	Corporate Parenting Strategy - yearly assurances provided to the Corporate Parenting Board	Director- Children & Education	Cabinet Member for Children and Education			Sep-23	Annually	N/A		Not due to start		Assurance Action	new assurance action - to be agreed	yes	
Equality and Diversity	SD.B1.0	Equality and Diversity	Director- Law & Governance	Leader of the Council			Autumn 2021	Ongoing	Medium Risk	If the Council does not comply with the Equality Act 2010 there is a risk of reputational damage.	N/A	N/A	N/A	N/A		
Equality and Diversity	SD.B1.1	Continue to embed Equality, Diversity and Inclusion (EDI) staff networks	Director- Law & Governance	Leader of the Council			Ongoing	Ongoing	N/A	N/A	On Track- little or no slippage	Ongoing. Work with staff networks is continuing. No issues arising	Medium Progress- actual/ projected slippage of 1-2 months	Ongoing. Legacy issues are resurfacing which is affecting the operation on the networks and level of engagement. Work is being undertaken to understand underlying reasons with a view to taking a report to Leadership Team in coming weeks.		
Equality and Diversity	SD.B1.2	Establish Women's network and Faith & Belief staff network	Director- Law & Governance	Leader of the Council			Jun-22	Dec-22	N/A	N/A	On Track- little or no slippage	Work underway and on track	On Track- little or no slippage	Connected to the action above		
Equality and Diversity	SD.B1.3	Continue to deliver on Equalities Commission Board priorities	Director- Law & Governance	Leader of the Council			Ongoing	Ongoing	N/A	N/A	On Track- little or no slippage	Ongoing. No issues arising	Medium Progress- actual/ projected slippage of 1-2 months	Ongoing. Some of the EDI issues that are emerging are impacting upon our ability to deliver the board priorities. Linked to update report to Lshp Team referenced above.		
Equality and Diversity	SD.B1.4	Equality Policy reviewed	Director- Law & Governance	Leader of the Council			May-22	Oct-22	N/A	N/A	Complete	Review took place	Complete	complete		
Equality and Diversity	SD.B1.5	Equality Policy approved	Director- Law & Governance	Leader of the Council			Jul-22	Oct-22	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Draft policy prepared. Con	Medium Progress- actual/ projected slippage of 1-2 months	Scheduled 16 Nov. Recommended for approval by scrutiny and the Equalities Commission Board.		

Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	Change Control required
Equality and Diversity	SD.B1.6	EDI Workforce action plan review	Director- Law & Governance	Leader of the Council			Jun-22	Dec-22	N/A	N/A	On Track- little or no slippage	Review will consider which actions can be implemented immediately and which will be reviewed as part of LGA Equalities Framework early next year	On Track- little or no slippage	Substantive actions within workforce plan will form part of the LGA equalities framework. Feedback will be considered by LT as part of overall report (as above)	
Equality and Diversity	SD.B1.7	Approval of EDI Workforce plan	Director- Law & Governance	Leader of the Council			Mar-23	Mar-23	N/A	N/A	Not due to start	Not due to start	Not due to start	Not due to start	
Equality and Diversity	SD.B1.8	Review approach to Equality Impact Assessments	Director- Law & Governance	Leader of the Council			Summer 2022	Autumn 2022	N/A	N/A	On Track- little or no slippage	Review completed and new advice and guidance to be issued to Officers.	Complete	Review completed. Guidance on EIAs has been updated on the intranet.	
Equality and Diversity	SD.B1.9	Review of Council EDI decision making process	Director- Law & Governance	Leader of the Council			Summer 2022	Autumn 2022	N/A	N/A	On Track- little or no slippage	Initial discussions have begun – linked to the EIA review, and decision making training.	Significant issues / actual/projected slippage- more than 2 months	This action will form part of the LGA equalities framework review. The approach will be set out in the report going to Cabinet (Nov) in relation to the Equality Policy Approval. Report seeks Cabinet approval to adopt LGA Equalities Framework	Yes
Equality and Diversity	SD.B1.10	Equality, Diversity and Inclusion Strategy approved	Director- Law & Governance	Leader of the Council			Autumn 2022	Autumn 2022	N/A	N/A	On Track- little or no slippage	Roadmap for EDI strategy will be achieved within the timeline. Strategy development will be a product of the LGA equalities framework review. End 2023 for strategy approval.	Significant issues / actual/projected slippage- more than 2 months	The approach will be set out in the report going to Cabinet (Nov) in relation to the Equality Policy Approval. Report seeks Cabinet approval to adopt LGA Equalities Framework. By adopting and following the framework, the outcome will be the production of an EDI strategy and revised equalities policy.	Yes
Equality and Diversity	SD.B1.11	Embed equalities, diversity and inclusion within Member and Officer Development Programmes	Director- Law & Governance	Leader of the Council			Early 2023	Early 2023	N/A	N/A	On Track- little or no slippage	Update as per last month	On Track- little or no slippage	Some training has already been provided. Further training planned as part of EDI agenda.	Yes
Locality Working	SD.C1.0	Developing a model for locality working	Director- Housing	Cabinet Member for Housing	Director – Business Strategy and Change		Mar-22	TBC	Medium Risk	Locality working model is linked to community hubs being progressed.	N/A	N/A	N/A	N/A	Yes
Locality Working	SD.C1.1	Cabinet Workshop to provide steer on community hubs model	Director- Housing	Cabinet Member for Housing	Director – Business Strategy and Change		Complete	Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Locality Working	SD.C1.2	Pilot of Town Co-ordinator role commences	Director- Housing	Cabinet Member for Housing	Director – Business Strategy and Change		Summer 2022	Summer 2022	N/A	N/A	Action on Hold	Pilot of town co-ordinator role was unsuccessful. Approach to locality working is now being considered by Cabinet and Leadership Team in conjunction with the Customer First priority. A set of new actions will be developed and included in the Improvement Plan which reflects this approach. Since last month, further sessions have been held by Leadership Team focusing on Customer First.	Action on Hold	Pilot of town co-ordinator role was unsuccessful. Approach to locality working is now being considered by Cabinet and Leadership Team in conjunction with the Customer First priority. A set of new actions has been included within the new customer journey workstream within corporate oversight theme	
Locality Working	SD.C1.3	Customer Access Strategy Development Commences Action to become main action SD.F1.0 within Customer Journey Workstream 'Customer Journey Strategy Approved'	Director- Housing	Cabinet Member for Housing	Director – Business Strategy and Change		Sep-22	Sep-22	N/A	N/A			On Track- little or no slippage	The development of the customer journey strategy has commenced and is incorporated within the customer journey programme (within Corporate Oversight theme). This action to be amended to become a main action 'Customer Journey Strategy'. Milestones tbc.	Yes

Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Progress against plan	Evidence of status rating	Change Control required
															October
Locality Working	SD.C1.4	Business Cases for hub locations progressed, as appropriate	Director- Housing	Cabinet Member for Housing	Director – Business Strategy and Change		Sep-22	Spring 2023	N/A	N/A	On Track- little or no slippage	See update on action SD.A2.5: Cabinet workshop to identify hub locations is concluded. options for (6) locations identified- agreed in principle by Cabinet. To go to Cabinet in November as part of Asset Management Strategy. Business Cases (as required) to be developed thereafter.	Duplicate/ link to another action	Not going to Cabinet in November as more work needs to be done as part of the customer journey programme. PMO comment: Incorporated within Customer Journey Workstream in Corporate Oversight Theme	
MTFP & Capital Strategy	SD.D1.0	Fundamental review of the Medium Term Financial Plan (MTFP) and Capital Strategy	Director- Finance	Deputy Leader			Jan-22	Autumn 2022	Low Risk	Risk of missed opportunities and inefficiencies	N/A	N/A	N/A	N/A	
MTFP & Capital Strategy	SD.D1.1	Review concluded	Director- Finance	Deputy Leader				Sep-22	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Will now be reported to November Cabinet due to by-election and pre election period	Complete	On track to go to November Cabinet - LT reviewed draft today - review complete.	
MTFP & Capital Strategy	SD.D1.2	Approval of MTFP and Capital Strategy	Director- Finance	Deputy Leader				Autumn 2022	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	As above	Medium Progress- actual/ projected slippage of 1-2 months	Will now be reported to November Cabinet due to by-election and pre election period	Yes
MTFP & Capital Strategy	SD.D1.3	New Assurance Action (strategy implemented through budget plans): Budget Report to Cabinet (2023-2026) reflects funding gaps identified in MTFP	Director- Finance	Deputy Leader			Feb-23	and annually thereafter					New Action Added		Yes
MTFP & Capital Strategy	SD.D1.4	New Assurance Action (embedding the approach): MTFP and Capital Strategy refreshed and approved in October each year	Director- Finance	Deputy Leader			October 2023	and annually thereafter					New Action Added		Yes
Consultation and Engagement	SD.E1.0	Public Consultation to be carried out as part of budget process for 2023/24	Director- Finance	Deputy Leader	Director Business Strategy and Change		Jan-22	Autumn 2022	Low Risk	Risk that budget decisions do not give consideration to residents views and priorities	N/A	N/A	N/A	N/A	
Consultation and Engagement	SD.E1.1	Procurement concluded to provide capacity for a regular Resident's Survey	Director- Finance	Deputy Leader	Director Business Strategy and Change			May-22	N/A	N/A	Complete	complete	Complete	complete	
Consultation and Engagement	SD.E1.2	Public Consultation undertaken	Director- Finance	Deputy Leader	Director Business Strategy and Change		Autumn 2022	Autumn 2022	N/A	N/A	On Track- little or no slippage	Consultation closed, feedback received and shared with LT and Cabinet.	Complete		
Consultation and Engagement	SD.E1.3	Public Consultation outcomes inform budget setting	Director- Finance	Deputy Leader	Director Business Strategy and Change			Autumn 2022	N/A	N/A	On Track- little or no slippage	As above	On Track- little or no slippage	Consultation closed, feedback received and shared with LT and Cabinet. Consideration of feedback will be included in MTFP (Nov) and Budget Setting (Feb 2023)	Yes
Consultation and Engagement	SD.E2.0	Incorporate Public Consultation Results into Performance Management Framework	Director - Business Strategy and Change	Leader of the Council			Autumn 2022	May-23	Medium Risk	Unable to secure representative sample of residents to respond to consultations and survey	N/A	N/A	N/A	N/A	
Consultation and Engagement	SD.E2.1	First Resident's Survey conducted	Director - Business Strategy and Change	Leader of the Council			Autumn 2022	Autumn 2022	N/A	N/A	Complete	28/9/22 NC: Findings presented at LT away day and to Cabinet	Complete		
Consultation and Engagement	SD.E2.2	First report from Resident's Survey	Director - Business Strategy and Change	Leader of the Council			Autumn 2022	Autumn 2022	N/A	N/A	On Track- little or no slippage	28/9/22 NC: Findings presented at LT away day and to Cabinet	Complete	complete	
Consultation and Engagement	SD.E2.3	Survey results embedded within PMF and used to inform insight into how the Council is performing	Director - Business Strategy and Change	Leader of the Council			Autumn 2022	May-23	N/A	N/A	On Track- little or no slippage	RI 29/09/22: Results from residents survey, budget report and SHAPE survey presented at LT away day and to Cabinet. Intelligence is being incorporated within business planning process for 2023 onwards, and being used to shape budget.	On Track- little or no slippage	RI 19.10.22: Residents' Survey Report will be included in Q2 Performance Report and will be shared with staff at an all staff briefing on 2nd November. Intelligence is being incorporated within business planning process for 2023 onwards, and being used to shape budget.	
Consultation and Engagement	SD.E2.4	New action: Proposal approved for the next phase of resident consultation and budget consultation	Director - Business Strategy and Change			Strategic Lead	October 2022	November 2022	N/A		Not due to start		New Action Added		yes
Consultation and Engagement	SD.E2.5	New action: Focus Groups held to explore responses to key areas raised in Residents Survey, Shape survey and budget consultation.	Director - Business Strategy and Change			Strategic Lead - Service Improvement							New Action Added		y
Customer Journey	SD.F1.0	New Main Action: Customer Journey Strategy	Director - Business Strategy and Change			Strategic Lead - Customer							New Action Added		

Theme 4 - Decision Making

										October Update Due					
Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating	Change Control required
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October
4 Yearly Election Cycle	DM.A1.0	Implement 4-yearly election cycle	Director- Law & Governance	Leader of the Council			May-22	Sep-23	Medium Risk	If we don't reach a decision in October, then there will be a reputational risk associated with delaying making a decision	N/A	N/A	N/A	N/A	
4 Yearly Election Cycle	DM.A1.1	Options Paper to Leadership Team	Director- Law & Governance	Leader of the Council				Jun-22	N/A	N/A	Complete	Complete	Complete	Complete	
4 Yearly Election Cycle	DM.A1.2	Council Decision to implement	Director- Law & Governance	Leader of the Council				TBC	N/A	N/A	On Track- little or no slippage	Now due at Council in November (slippage due to change of Council date). Consultation concluded. Report being prepared.	On Track- little or no slippage	On track for Nov Council.	
Constitution and Governance Framework	DM.B1.0	In-depth review and revision to Corporate Governance Documents	Director- Law & Governance	Leader of the Council			Dec-21	Oct-22	Medium Risk	If Corporate Governance Documents are not updated, then other improvement work with Members and Officers will be adversely impacted.	N/A	N/A	N/A	N/A	
Constitution and Governance Framework	DM.B1.1	Effective Decision Making Training	Director- Law & Governance	Leader of the Council			Jul-22	Sep-22	N/A	N/A	Medium Progress- actual/projected slippage of 1-2 months	Being prepared for Nov/Dec linked to Council date slippage to Nov. Centre for Governance and Scrutiny are providing training in Nov.	Medium Progress- actual/projected slippage of 1-2 months	Repeat of OC.B1.3: Guidance around decision making is being issued to Officers in October. Dates for training are being agreed. Training will take place Nov/Dec. Change control to amend delivery date to December 2022.	Yes
Constitution and Governance Framework	DM.B1.2	Revised Procurement and Contract Procedure Rules agreed	Director- Law & Governance	Leader of the Council				Jul-22	N/A	N/A	Complete	Complete	Complete	Complete	
Constitution and Governance Framework	DM.B1.3	Revised Financial Regs agreed	Director- Law & Governance	Leader of the Council				Oct-22	N/A	N/A	Medium Progress- actual/projected slippage of 1-2 months	The remaining areas of the Fin Regs that need reviewing will slip to December Council. As the key changes have already been approved the risk/impact of the slippage on the outstanding bits is very low.	Medium Progress- actual/projected slippage of 1-2 months	The remaining areas of the Fin Regs that need reviewing will slip to December Council. As the key changes have already been approved the risk/impact of the slippage on the outstanding bits is very low. Change Control- date change Oct. 22- Dec 22	Yes
Constitution and Governance Framework	DM.B1.4	Revised Council Procedure Rules	Director- Law & Governance	Leader of the Council				Jul-22	N/A	N/A	Significant issues / actual/projected slippage- more than 2 months	CPRs have been updated and will be presented to November Council. (Slippage from October due to change of Council date). <i>Note: July commentary and update was not correct (incorrectly stated that council procedure rules were approved at Council in July). Should have been included in August Change Control as a change from July to October. NB Action will therefore flag as red progress due to July date. Further impacted by by-election</i>	Significant issues / actual/projected slippage- more than 2 months	On track for Nov Council. <i>Note: July commentary and update was not correct (incorrectly stated that council procedure rules were approved at Council in July). Should have been included in August Change Control as a change from July to October. NB Action will therefore flag as red progress due to July date. Further impacted by by-election</i>	Yes

Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	Change Control required
Constitution and Governance Framework	DM.B1.5	Revised Sale of Land and Buildings Protocol	Director-Regeneration & Growth	Leader of the Council		Service Manager-Strategic Asset & Land		Aug-22	N/A	N/A	Complete	complete	Complete	complete	
Constitution and Governance Framework	DM.B1.6	Revised Scheme of Delegations agreed	Director- Law & Governance	Leader of the Council				Oct-22	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Due at November Council (slippage due to change of date for Council). Any sub-delegations required below Director-level can be authorised by Directors at any time. However, Democratic Services will be working with Directors to establish a sub-authorisation scheme related to the revised scheme of delegations.	Medium Progress- actual/ projected slippage of 1-2 months	On track for Nov Council.	Yes
Constitution and Governance Framework	DM.B2.0	Refresh existing arrangements for arms-length companies	Director- Law & Governance	Deputy Leader		Governance and Business Support Principal Lead & Solicitor	Jan-22	Jul-22	Low Risk	If we don't ensure that there is sufficient governance and oversight, it can lead to significant and/or unintended consequences for the organisation e.g. reputational issues, Council not discharging legal obligations.	N/A	N/A	N/A	N/A	Yes
Constitution and Governance Framework	DM.B2.1	Identify existing arms-length companies, company directors and company administration	Director- Law & Governance	Deputy Leader			Apr-22	Apr-22	N/A	N/A	Complete	Complete	Complete	Complete	
Constitution and Governance Framework	DM.B2.2	Conduct review to ensure appropriate resources are allocated to these organisations	Director- Law & Governance	Deputy Leader			May-22	Jul-22	N/A	N/A	Complete	Complete	Complete	Complete	
Constitution and Governance Framework	DM.B2.3	Implement annual reporting arrangements	Director- Law & Governance	Deputy Leader				Jul-22	N/A	N/A	Complete	Complete	Complete	Complete	
Role and Function of Scrutiny and Audit	DM.C1.0	Refresh decision making-arrangements including the role of Scrutiny	Director- Law & Governance	Leader of the Council			Dec-21	Jul-22	Medium Risk	If there isn't an effective overview and scrutiny function in place, then the Council decision-making will not be as effective as it can be.	N/A	N/A	N/A	N/A	
Role and Function of Scrutiny and Audit	DM.C1.1	Review of scrutiny arrangements	Director- Law & Governance	Leader of the Council				Oct-22	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Scrutiny Review was approved by scrutiny in September. Report due to Council in November. (slippage due to change of Council date). LGA have been very complimentary around scrutiny arrangements.	Medium Progress- actual/ projected slippage of 1-2 months	On track for Nov Council.	Yes
Role and Function of Scrutiny and Audit	DM.C1.2	Scrutiny Work Planning event	Director- Law & Governance	Leader of the Council				Jun-22	N/A	N/A	Complete	Complete	Complete	Complete	
Role and Function of Scrutiny and Audit	DM.C1.3	Approval of any changes to scrutiny (if required following review)	Director- Law & Governance	Leader of the Council			Oct-22	(specific timescale for implementation will be determined once review concluded)	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	As per DM.C.1.0	On Track- little or no slippage	Will follow DM.C1.1	
Role and Function of Scrutiny and Audit	DM.C.2.0	Implementation of Scrutiny Recommendations relating to key issues	Director- Law & Governance	Deputy Leader			Dec-21	Sep-22	Medium Risk	If we don't implement scrutiny recommendations, this undermines the Council's decision making and leaves the Council open to risk and challenge	N/A	N/A	N/A	N/A	

Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	Change Control required
Role and Function of Scrutiny and Audit	DM.C2.1	SEND Transport recommendations relating to procurement concluded	Director- Law & Governance	Deputy Leader	Director-Children & Education Scrutiny		Early 2022	Sep-22	N/A	N/A	On Track- little or no slippage	The new SEND procurement exercise has been undertaken, consistently with our contract procedure rules and recommendations from scrutiny.	On Track- little or no slippage	The recommendations from C&E Scrutiny Board are being monitored and will be updated at the next Scrutiny Board in XX.	
Role and Function of Scrutiny and Audit	DM.C2.2	Recommendations relating to Waste Contract concluded	Director- Borough Economy	Deputy Leader	Director- Law and Governance			Dec-22	N/A	N/A	On Track- little or no slippage	Scrutiny session delivered 31.08.22 relating to missed collections over Summer period 2022.	On Track- little or no slippage	AD Oct 22 Recommendations progress on track pending any changes relating to major contract scrutiny report	
Role and Function of Scrutiny and Audit	DM.C.3.0	Manage position on historic issues through work with ARAC chair	Director- Law & Governance	Deputy Leader			Dec-21	Ongoing	Low Risk	Risk of historic issues resurfacing through ARAC	On Track- little or no slippage	Meeting held with Chair in September around historic issues. Follow up discussion taking place with Leader taking place to deal with an outstanding ARAC resolution. Due in October	On Track- little or no slippage	Follow up discussion due to take place in October	
Role and Function of Scrutiny and Audit	DM.C4.0	ARAC report and recommendations in relation to SEND Transport	Director- Law & Governance	Deputy Leader			Dec-21	Oct-22	Medium Risk	If we don't implement ARAC recommendations, this undermines the Council's decision making and leaves the Council open to risk and challenge	N/A	N/A	N/A	N/A	
Role and Function of Scrutiny and Audit	DM.C4.1	Completion of report and recommendations	Director- Law & Governance	Deputy Leader		Group Head for Education Support Services		Oct-22	N/A	N/A	On Track- little or no slippage	Procurement exercise complete. Internal audit has included a review of compliance with contract procedure rules as part of their work programme. Contracts have gone live. As part of internal audit work programme there is a review of compliance with contract procedure rules and this will be undertaken this municipal year.	Complete	Procurement concluded. When subsequent internal audit report into SEND Transport Procurement is conducted (March 2023), this will be reported to ARAC as part of BAU reporting on audit work programme.	

Theme 5- Procurement & Commercial

Static data													October Update Due				
Workstream			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating	Change Control required		
Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October			
Waste Contract	PC.A1.0	Introduction of a more focused framework for contract monitoring	Director - Borough Economy	Cabinet Member for Environment Services			Autumn 2021	Aug-22	Medium Risk	Risk of service delivery being of a poor quality for waste collection / street cleansing. Risk that contract monitoring does not drive service performance	Complete	Contract monitoring approach in place	Complete	complete	Yes		
Waste Contract	PC.A1.1	Contract Monitoring Framework agreed	Director - Borough Economy	Cabinet Member for Environment Services				Complete	N/A	N/A	Complete	complete	Complete	complete			
Waste Contract	PC.A1.2	Contract Management framework in place and embedded in PMF reporting – (in line with Q1)	Director - Borough Economy	Cabinet Member for Environment Services				Aug-22	N/A	N/A	Complete	complete	Complete	complete			
Waste Contract	PC.A1.3	Assurance Action- Report provided to Officer Leadership on a quarterly basis. Regular reporting through PMF	Director - Borough Economy	Cabinet Member for Environment Services		Feb-22	quarterly	N/A	N/a	Not due to start	not due to start	New Action Added	assurance action	Yes			
Waste Contract	PC.A1.4	Assurance Action- Annual report on leisure and waste contracts going through to cabinet member	Director - Borough Economy	Cabinet Member for Environment Services		Nov-22	annually	N/A	N/a	Not due to start	not due to start	New Action Added	assurance action	yes			
Waste Contract	PC.A1.5	Assurance Action- The large contracts in BE for waste/street cleansing, and both leisure providers will be added to the Intend contract management module.	Director - Borough Economy	Cabinet Member for Environment Services		dates	dates	N/A	N/a	Not due to start	not due to start	New Action Added	assurance action	yes			
Waste Contract	PC.A2.0	Review of the contract to refocus our communications and contract monitoring in areas of poor performance and to ensure the council receives the full provisions within the contract from Serco	Director - Borough Economy	Cabinet Member for Environment Services		Autumn 2021	Jan-23	Low Risk	Service capacity to procure and manage contract review. Mitigated by appointment of interim waste manager from 11th July 2022	N/A	N/A	N/A	N/A				
Waste Contract	PC.A2.1	Procurement of support to review contract	Director - Borough Economy	Cabinet Member for Environment Services				May-22	N/A	N/A	Complete	complete	Complete	complete			
Waste Contract	PC.A2.2	Review of contract completed	Director - Borough Economy	Cabinet Member for Environment Services				Sep-22	N/A	N/A	On Track- little or no slippage	Frith contract review in progress supported by Serco & SMBC officers. First draft report SMBC comment provided 22.09.22	Complete	Initial review report received end sept 22			
Waste Contract	PC.A2.3	Recommendations reviewed	Director - Borough Economy	Cabinet Member for Environment Services				Oct-22	N/A	N/A	Not due to start	Not due to start	On Track- little or no slippage	Recommendations review is underway and briefing to cabinet member planned for early November 22			
Waste Contract	PC.A2.4	Recommendations adopted, as appropriate	Director - Borough Economy	Cabinet Member for Environment Services				Jan-23	N/A	N/A	Not due to start	Not due to start	Not due to start	Not due to start			
Waste Contract	PC.A2.5	Delivery of recommendations – as appropriate	Director - Borough Economy	Cabinet Member for Environment Services				TBC	N/A	N/A	Not due to start	Not due to start	Not due to start	Not due to start			
Waste Contract	PC.A3.0	Waste and Recycling Recovery Plan – completion and implementation	Director - Borough Economy	Cabinet Member for Environment Services					Low Risk	Risk that Serco did not improve	N/A	N/A	N/A	N/A			
Waste Contract	PC.A3.1	Implementation Complete	Director - Borough Economy	Cabinet Member for Environment Services				Jun-22	N/A	N/A	Complete	complete	Complete	complete			
Waste Contract	PC.A4.0	Street Cleansing Recovery Plan – completion and implementation	Director - Borough Economy	Cabinet Member for Environment Services		Autumn 2021	Mar-23	Medium Risk	Although an increase in complaints would be likely if performance for street cleansing is not improved, this would not have further more serious impact.	N/A		N/A		No			
Waste Contract	PC.A4.1	Recovery Plan approved by Waste Management Board	Director - Borough Economy	Cabinet Member for Environment Services				Jul-22	Low Risk	Risk of service delivery being of a poor quality for waste collection / street cleansing. Risk that contract monitoring does not drive service performance	Medium Progress- actual/ projected slippage of 1-2 months	Plan on track to presentation to October Waste Board. Revised plan following SMBC feedback to draft to be presented to Waste Board Oct 2022	Complete	Revised plan following SMBC feedback to be presented to Waste Board 19 Oct 2022			
Waste Contract	PC.A4.2	Recovery plan implemented	Director - Borough Economy	Cabinet Member for Environment Services				Mar-23	N/A	N/A	Not due to start	Not due to start	Not due to start	Not due to start			
Waste Contract	PC.A4.3	Assurance Action- Senior management meeting - annual plans requested- service delivery plan from SERCO is contractually compliant and includes elements of street cleansing.	Director - Borough Economy	Cabinet Member for Environment Services			quarterly review	quarterly			Not due to start	Not due to start	New Action Added	Yes			

Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		Change Control required
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October
Waste Contract	PC.A5.0	Manage the delayed Serco Fleet replacement programme in line with the requirements of the contract	Director - Borough Economy	Cabinet Member for Environment Services			Autumn 2021	Mid 2023	Medium Risk	May lead to some loss of service due to fleet unavailability	N/A		N/A		No
Waste Contract	PC.A5.1	Fleet replacement schedule in place	Director - Borough Economy	Cabinet Member for Environment Services				Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Waste Contract	PC.A5.2	Fleet replacement complete	Director - Borough Economy	Cabinet Member for Environment Services				Mid 2023	N/A	N/A	On Track- little or no slippage	Plan in delivery phase with dates into 2023	On Track- little or no slippage	AD Oct 2023 Plan in delivery phase with dates into 2023	
Waste Contract	PC.A5.3	Assurance Action- Monthly fleet steering group taking place where the documentation considered by the group is contractually compliant.	Director - Borough Economy	Cabinet Member for Environment Services					N/A	N/A			New Action Added		
SEND Transport	PC.B1.0	Plan in place to ensure new contract commences prior to expiry of current arrangements and appropriate records in place	Director- Finance	Dept Leader / Cabinet Member for Children and Education	Director – Children & Education		Jan-22	Sep-22	Low Risk	MI to review: Contracts commenced (pre-risk drafted as follows-On track-Tender-offer letters have been issued (10 day standstill period).	N/A	N/A	N/A	N/A	
SEND Transport	PC.B1.1	Cabinet approval	Director- Finance	Dept Leader / Cabinet Member for Children and Education	Director – Children & Education			Complete	N/A	N/A	Complete	Complete	Complete	Complete	
SEND Transport	PC.B1.2	Procurement commenced	Director- Finance	Dept Leader / Cabinet Member for Children and Education	Director – Children & Education			Complete	N/A	N/A	Complete	Complete	Complete	Complete	
SEND Transport	PC.B1.3	Procurement published for framework	Director- Finance	Dept Leader / Cabinet Member for Children and Education	Director – Children & Education			May-22	N/A	N/A	Complete	Complete	Complete	Complete	
SEND Transport	PC.B1.4	Expiry of current arrangements – end of 2021-22 Academic Year	Director- Finance	Dept Leader / Cabinet Member for Children and Education	Director – Children & Education			Jul-22	N/A	N/A	Complete	Complete	Complete	Complete	
SEND Transport	PC.B1.5	New contract in place	Director- Finance	Dept Leader / Cabinet Member for Children and Education	Director – Children & Education			Sep-22	N/A	N/A	On Track- little or no slippage	All new contracts issued and accepted by operators new framework commenced 1.9.22	Complete	All new contracts issued and accepted by operators new framework commenced 1.9.22	
SEND Transport	PC.B1.6	Contract Monitoring Arrangements in Place	Director- Finance	Dept Leader / Cabinet Member for Children and Education	Director – Children & Education			Sep-22	N/A	N/A	On Track- little or no slippage	All new contracts issued and accepted by operators new framework commenced 1.9.22	On Track- little or no slippage	Contracts are being monitored. Contract monitoring arrangements to be confirmed in Jan 23. Change control Seq 22 Jan 23	Yes
SEND Transport	PC.B2.0	Implementation of recommendations from Audit and Scrutiny in relation to SEND Transport	Director- Law & Governance	Dept Leader / Cabinet Member for Children and Education	Scrutiny Director – Children & Education		Autumn 2021	Sep-22	Medium Risk	If we don't implement scrutiny and ARAC recommendations, this undermines the Council's decision making and leaves the Council open to risk and challenge	N/A	N/A	N/A	N/A	
SEND Transport	PC.B2.1	Scrutiny Recommendations embedded in plans for new arrangements	Director- Law & Governance	Dept Leader / Cabinet Member for Children and Education	Scrutiny Director – Children & Education			Complete	N/A	N/A	Complete	Complete	Complete	Complete	
SEND Transport	PC.B2.2	Update to Education Scrutiny	Director- Law & Governance	Dept Leader / Cabinet Member for Children and Education	Scrutiny Director – Children & Education			Complete	N/A	N/A	Complete	Complete	Complete	Complete	

Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		Change Control required
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October
SEND Transport	PC.B2.3	Recommendations related to procurement embedded in procurement process	Director - Law & Governance	Dept Leader / Cabinet Member for Children and Education	Scrutiny Director – Children & Education			Sep-22	N/A	N/A	On Track- little or no slippage	On track to conclude procurement-related recommendations in line with the commencement of new contract from September 2022. Children and Education Scrutiny Board review a recommendation action tracker at each meeting and an update is due in October 2022.	Complete	The recommendations from C&E Scrutiny Board are being monitored and will be updated at the next Budget and Corporate Scrutiny Management Board meeting.	
SEND Transport	PC.B2.4	ARAC recommendations implemented	Director - Law & Governance	Dept Leader / Cabinet Member for Children and Education	Director – Children & Education ARAC			Oct-22	N/A	N/A	On Track- little or no slippage	Process is concluded and contracts have been issued to operators. Service effective from 1.9.22	Complete	Procurement concluded. When subsequent internal audit report into SEND Transport Procurement is conducted (March 2023), this will be reported to ARAC as part of BAU reporting on audit work programme.	
SEND Transport	PC.B3.0	Procurement of 2024 SEND Transport Contract	Director - Children and Education				Nov-22	Sep-24			Not due to start		New Action Added	new action	Yes
SEND Transport	PC.B3.1	Leadership review of lessons learnt from SEND 2	Director - Children and Education	Cabinet Member for Children and Education Dept Leader	Director - Law & Governance Director - Finance	Group Head - Education	Sep-22	Nov-22	N/A		Not due to start		New Action Added	new action	
SEND Transport	PC.B3.2	Mobilise project team and establish project governance	Director - Children and Education	Cabinet Member for Children and Education Dept Leader	Director - Law & Governance Director - Finance	Group Head - Education			N/A		Not due to start		New Action Added	new action	
SEND Transport	PC.B3.3	Commence Procurement	Director - Children and Education	Cabinet Member for Children and Education Dept Leader	Director - Law & Governance Director - Finance	Group Head - Education	Spring 2023		N/A		Not due to start		New Action Added	new action	
New System Procurement	PC.C1.0	Explore implementation of a corporate performance management system	Director- Business Strategy & Change	Deputy Leader			Jun-21		Low Risk	Not having the appropriate resource, both financial and employees, to support the implementation of new system	N/A	N/A	N/A	N/A	
New System Procurement	PC.C1.1	Options Appraisal	Director- Business Strategy & Change	Deputy Leader		Strategic Lead - Service Improvement		Sep-22	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	PM system is on hold – research/soft market testing being conducted, project management capacity to be identified within Transformation Team	Significant issues / actual/projected slippage- more than 2 months	Not progressed past soft market testing. Further demonstration with another provider. Size and scale of system to be considered for scope of project.	Yes
New System Procurement	PC.C1.2	Business Case and Implementation Plan Considered	Director- Business Strategy & Change	Deputy Leader		Strategic Lead - Service Improvement		TBC based on selected option	N/A	N/A	Not due to start	Not due to start	Not due to start	Not due to start	
New System Procurement	PC.C2.0	Procurement of new asset management system	Director – Regeneration & Growth	Cabinet Member for Regeneration and Growth			Autumn 2021	Dec-22	Low Risk	Procurement is on track but timetable is tight	N/A	N/A	N/A	N/A	
New System Procurement	PC.C2.1	Market Research	Director – Regeneration & Growth	Cabinet Member for Regeneration & Growth				Complete	N/A	N/A	Complete	Complete	Complete	Complete	
New System Procurement	PC.C2.2	Procurement Concluded	Director – Regeneration & Growth	Cabinet Member for Regeneration and Growth				Complete	N/A	N/A	Complete	Complete	Complete	Complete	

Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		Change Control required
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October
New System Procurement	PC.C2.3	Implementation	Director – Regeneration & Growth	Cabinet Member for Regeneration and Growth				Mar-23	N/A	N/A	On Track- little or no slippage	Implementation is on track as SD.A2.8	On Track- little or no slippage	Implementation is on track as SD.A2.8	
Lion farm	PC.D1.0	Action plan to agree way forward and resolve matter	Director – Regeneration & Growth	Cabinet Member for Regeneration and Growth			Dec-21	Dec-23	Medium Risk	Medium Risk as the issues are subject to an external Expert Determination Process on the Lion Farm Option Agreement	N/A	N/A	N/A	N/A	
Lion farm	PC.D1.1	Brief Cabinet on options	Director – Regeneration & Growth	Cabinet Member for Regeneration and Growth				Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Lion farm	PC.D1.2	Presentation of proposal by developer to Cabinet	Director – Regeneration & Growth	Cabinet Member for Regeneration and Growth				Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Lion farm	PC.D1.3	Options appraisal report to Cabinet for approval of way forward	Director – Regeneration & Growth	Cabinet Member for Regeneration and Growth				Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Lion farm	PC.D1.4	Implement approved way forward	Director – Regeneration & Growth	Cabinet Member for Regeneration and Growth			Feb-22	In progress	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Papers have been submitted to the external party that will conduct the expert determination.	Medium Progress- actual/ projected slippage of 1-2 months	Papers have been submitted to the external party that will conduct the expert determination. The date for Expert Determination is outside the hands of the Council and will be decided by a third party.	
Lion farm	PC.D1.5	Responsibilities of both council and developer clarified within action plan	Director – Regeneration & Growth	Cabinet Member for Regeneration and Growth				Est. Dec 2022	N/A	N/A	Complete	Formal document detailing the respective roles and responsibilities of Council and developer.	Complete	complete	
Leisure Contract	PC.E1.0	Governance arrangements to manage, develop and support the current and future delivery of leisure services across the borough, including the new Aquatic Centre	Director - Borough Economy	Cabinet Member for Leisure and Tourism			Autumn 2021	May-23	Medium Risk	Some risks remain pending the fully established new LATC to manage the leisure facilities	N/A	N/A	N/A	N/A	
Leisure Contract	PC.E1.1	Governance arrangements in place	Director - Borough Economy	Cabinet Member for Leisure and Tourism				Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Leisure Contract	PC.E1.2	Termination of existing Contract	Director - Borough Economy	Cabinet Member for Leisure and Tourism				Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Leisure Contract	PC.E1.3	Step-in provider in place	Director - Borough Economy	Cabinet Member for Leisure and Tourism				Complete	N/A	N/A	Complete	Complete	Complete	Complete	

Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		Change Control required
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October
Leisure Contract	PC.E14	Option appraisal for future facility management options– Cabinet report	Director - Borough Economy	Cabinet Member for Leisure and Tourism				Summer 2022	N/A	N/A	Complete	Complete	Complete	Complete	
Leisure Contract	PC.E15	Arrangement in place for future delivery of leisure facilities	Director - Borough Economy	Cabinet Member for Leisure and Tourism				May-23	Medium Risk	remain in relation to utility	On Track- little or no slippage	Cabinet Workshop for legal vehicle options consideration, specification, property and company name delivered 14.09.22.	On Track- little or no slippage	Chief Operating Officer recruitment in progress. Further legal vehicle structure session undertaken with Cabinet Member. Tax Advisors appointed.	No

Theme 6-Partnerships & Relationships

Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		Change Control required
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October
Sandwell Children's Trust	PR.A1.0	Continue with robust governance arrangements in place ensuring the accountability of SCT to deliver improved outcomes for children and young people in Sandwell in line with the contract	Director - Children and Education	Cabinet Member for Children and Education			Autumn 2021	Ongoing	Medium Risk	This is identified as a Corporate Risk - the contract between SCT and the Council is subject to review, the Council are embarking on a mid-point contract review with the Trust and the DfE - this will include revision on Key Performance indicators (KPIs) in line with approved government arrangements	N/A	N/A	N/A	N/A	
Sandwell Children's Trust	PR.A1.1	Performance reporting embedded within Council PMF	Director - Children and Education	Cabinet Member for Children and Education			Jan-22	Aug 2022 and then quarterly	N/A	N/A	On Track- little or no slippage	Completed - included in the PMF.	Complete	Completed - included in the PMF.	
Sandwell Children's Trust	PR.A1.2	KPI Suite reviewed	Director - Children and Education	Cabinet Member for Children and Education			Mar-22	Summer 2022	N/A	N/A	On Track- little or no slippage	This forms part of the contract review for implementation on 1.4.23	Medium Progress- actual/ projected slippage of 1-2 months	This forms part of the contract review for implementation on 1.4.23. KPI Suite review due to be complete by December .	yes
Sandwell Children's Trust	PR.A1.3	Revised KPI suite agreed	Director - Children and Education	Cabinet Member for Children and Education			Summer 2022	Summer 2022	N/A	N/A	On Track- little or no slippage	The KPIs are being confirmed between the Council and the Trust ahead of the implementation date 1.4.23	Medium Progress- actual/ projected slippage of 1-2 months	KPI suite will be agreed in December 22 for implementation on 1/4/23	yes
Sandwell Children's Trust	PR.A1.4	Review of Contract concludes	Director - Children and Education	Cabinet Member for Children and Education				Autumn 22	N/A	N/A	On Track- little or no slippage	The revised contract will commence on 1.4.23. Negotiations have commenced between the Council and the Trust and both parties have shared responses to the contract review. The Contract Sum negotiations commenced 26.9.22.	On Track- little or no slippage	The revised contract will commence on 1.4.23. Negotiations have commenced between the Council and the Trust and both parties have shared responses to the contract review. The Contract Sum negotiations commenced 26.9.22.	yes

Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	October Update Due		Change Control required
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October
Sandwell Children's Trust	PR.A1.5	Contract Review with DfE	Director - Children and Education	Cabinet Member for Children and Education	Director – Finance			Nov-22	N/A	N/A	On Track- little or no slippage	The contract review process is on schedule with revised date. The review team met 20 July 2022 to progress developments with a cross section of senior officers across the council, Trust and DfE. The review will focus on contract requirements, revised KPIs and governance arrangements as part of the DfE statutory direction. Change control to be put forward to adjust due date, as able to be flexible now Ofsted inspection has happened and do not propose to evoke the break clause.	On Track- little or no slippage	The contract review process is on schedule with revised date. The review team met 20 July 2022 to progress developments with a cross section of senior officers across the council, Trust and DfE. The review will focus on contract requirements, revised KPIs and governance arrangements as part of the DfE statutory direction. Change control to be put forward to adjust due date, as able to be flexible now Ofsted inspection has happened and do not propose to evoke the break clause.	Yes
Sandwell Children's Trust	PR.A3.0	Establish corporate approach to working with SCT on shared issues, such as corporate parenting and delivery of Early Help service	Director - Children and Education	Cabinet Member for Children and Education			Autumn 2021	Ongoing	Medium Risk	The realignment of the new Children & Families Strategic Partnership (CaFSP) has enabled shared priorities to be developed and integrated across the wider children's partnership - this has led to an improved understanding of strategic planning including, though not limited to, the launch of the Early Help and Corporate Parenting Strategies.	N/A	N/A	N/A	N/A	
Sandwell Children's Trust	PR.A3.1	Continuation of arrangements for strategic priorities to be shared across the partnership and include a series of joint work. Initial focus areas are corporate parenting and early help.	Director - Children and Education	Cabinet Member for Children and Education				Ongoing	N/A	N/A	On Track- little or no slippage	Completed. Strategic Priorities form part of the Children & Families Strategic Partnership (CaFSP) work programme.	Complete	All strategic priorities agreed and monitored through Children and Families strategic partnership	
Sandwell Children's Trust	PR.A3.2	Assurance that approach to working together is effective through regular programme of performance reports	Director - Children and Education	Cabinet Member for Children and Education				Aug 2022 and then ongoing	N/A	N/A	On Track- little or no slippage	This assurance is in place as part of the governance arrangements (as part of the contract) and include the Operational Partnership Board, Strategic Partnership Board, SCT Improvement Board and twice yearly updates to Children and Education Scrutiny Board.	Complete	This assurance is in place as part of the governance arrangements (as part of the contract) and include the Operational Partnership Board, Strategic Partnership Board, SCT Improvement Board and twice yearly updates to Children and Education Scrutiny Board.	
Regional and Sub-Regional presence	PR.B1.0	Continue to develop the relationship with and actively participate in regional and sub-regional bodies (e.g. WM Combined Authority, Black Country LEP) to maximise opportunities for Sandwell	Director-Regeneration & Growth	Leader of the Council / Cabinet Member for Regeneration and Growth	Cabinet Chief Executive		Jan-22		Medium Risk	Member input into key WMCA meetings needs to increase which is expected to with new Cabinet Member.	N/A	N/A	N/A	N/A	
Regional and Sub-Regional presence	PR.B1.1	Officer representation agreed to attend key meetings and a clear agenda set for each forum	Director-Regeneration & Growth	Leader of the Council / Cabinet Member for Regeneration and Growth	Cabinet Chief Executive			Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Regional and Sub-Regional presence	PR.B1.2	Sandwell asks of trailblazer devolution deal agreed	Director-Regeneration & Growth	Leader of the Council / Cabinet Member for Regeneration and Growth	Cabinet Chief Executive			Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Regional and Sub-Regional presence	PR.B1.3	Participation in Investor Conference	Director-Regeneration & Growth	Leader of the Council / Cabinet Member for Regeneration and Growth	Cabinet Chief Executive			Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Regional and Sub-Regional presence	PR.B1.4	CRSTS allocation (transport) approved by CA Board	Director-Regeneration & Growth	Leader of the Council / Cabinet Member for Regeneration and Growth	Cabinet Chief Executive			Complete	N/A	N/A	Complete	Complete	Complete	Complete	
Regional and Sub-Regional presence	PR.B1.5	Member representation to attend key meetings agreed and agenda for each forum shared	Director-Regeneration & Growth	Leader of the Council / Cabinet Member for Regeneration and Growth	Cabinet Chief Executive			Jun-22	N/A	N/A	Complete	Attendance from members at external partnership meetings is improved and ongoing. Assurance action required	Complete	Complete	

Static data			Owners				Dates		Main Action Risk		Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating	Change Control required
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Description	Status (September 2022)	Update (Initial and Date)(September 22)	Status (October 2022)	Update (Initial and Date)(October 22)	October
Regional and Sub-Regional presence	PR.B1.6	Assurance Action: Update provided on a 6 monthly basis by Director of Regen and Growth to confirm representation at key meetings continues and brings benefit to the council. Key meetings for Members to attend at sub regional and regional level are: ABCA Leaders; WMCA Board; WMCA Economic Growth Board; WMCA Housing and Land Board.	Director-Regeneration & Growth	Leader of the Council / Cabinet Member for Regeneration and Growth			Mar-23	6 monthly update	N/A	N/A	Not due to start	Not due to start	New Action Added	new assurance action	
Effective Local Structures	PR.C1.0	Review partnership structures within the 'People's sphere'	Director - Children and Education	Cabinet Member for Children and Education / Cabinet Member for Adults, Social Care and Health	Director-Adult Social Care Director- Public Health				Medium Risk	Work is underway to review the governance arrangements. The children's safeguarding arrangements have been refreshed and discussions are underway in relation to aligning children and adults safeguarding arrangements. Further consideration is being given to the strategic connection across the 4 Board governance arrangements.	N/A	N/A	N/A	N/A	
Effective Local Structures	PR.C1.1	Partnership structures in relation to transition from children's to adults in place	Director - Children and Education	Cabinet Member for Children and Education / Cabinet Member for Adults, Social Care and Health	Director-Adult Social Care Director- Public Health			In place	N/A	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Meeting booked for the 17 October 2022 to commence work on the reviewing and remodelling of the pathway. The Lead for the project from an Adults LD perspective has gained a new role in the council and we are going out to advert to gain a project lead for this work.	Medium Progress- actual/ projected slippage of 1-2 months	Meeting booked for November 22 to commence work on the reviewing and remodelling of the pathway. Following November meeting, actions to be decided and added to Improvement plan. The ASC restructure will add a Learning Disability Team to the ASC structure which will assist with building the offer around	yes
Effective Local Structures	PR.C1.2	Initial scoping of work with partners around partnership structures in the children's sphere	Director - Children and Education	Cabinet Member for Children and Education / Cabinet Member for Adults, Social Care and Health	Director-Adult Social Care Director- Public Health		Mar-22	Sep-22	N/A	N/A	On Track- little or no slippage	Wider discussions will take place to include Chair reps of the 4 Strategic Boards across the children's landscape.	Complete	Initial discussions with partnership has been completed. Now looking to extend discussion to include adults - new action to be added- PR.C1.5	
Effective Local Structures	PR.C1.3	Develop Health & Wellbeing Strategy that builds on existing whole system approach to addressing health inequalities	Director-Adult Social Care	Cabinet Member for Children and Education / Cabinet Member for Adults, Social Care and Health	Director- Public Health		Apr-22	Jul-22	N/A	N/A	Complete	Strategy complete and approved by both Health & Wellbeing Board.	Complete	Corporate Plan Monitoring within PMF is providing progress updates and is tracking outcomes achieved relating to health inequalities.	No
Effective Local Structures	PR.C1.4	Test adequacy of partnerships and integration through Health Outcomes Framework and system-wide thematic deep dives	Director-Adult Social Care	Cabinet Member for Children and Education / Cabinet Member for Adults, Social Care and Health	Director- Public Health		Apr-22	Jul-22	N/A	N/A	On Track- little or no slippage	Deep dives being completed as planned and on time. (PMO addition: Ongoing action. Initial set of actions achieved by due date)	Complete	Ongoing action. Mechanisms within the system are now in place - SHCP Board and Integrated Care Board are regularly reviewing the progress of deep-dives, the outcomes from them, and any follow up actions needed. Change proposed to close action and add a new assurance action to receive a quarterly update from DPH and DASC to provide assurance that governance remains in place and	Yes
VCS Relationships	PR.D1.0	Relationship with Voluntary & Community Sector (VCS) and Funding to Voluntary & Community Sector.	Leadership Team	Cabinet Member for Communities			Mar-22	Jul-05	Medium Risk	Missed opportunities around partnership and value for money: If the future relationship and the funding	N/A	N/A	N/A	N/A	
VCS Relationships	PR.D1.1	Corporate review of grant funding	Director - Housing	Cabinet Member for Communities			Mar-22	Sep-22	N/A	N/A	On Track- little or no slippage	Review of grants complete as per timeline and communication with organisations complete as well as a letter to the sector. Process to meet 2023/24 savings target agreed.	Complete	Action complete as per previous month update. Consider next steps in terms of developing VCS strategy and add once identified to the plan	
VCS Relationships	PR.D1.2	VCS Strategy formation commences	Leadership Team	Cabinet Member for Communities			2023	2023	N/A	N/A	Not due to start	Not due to start	On Track- little or no slippage	Work has commenced. Approach is for SCVO and the council to run a series of face to face focus groups with cross sections of Sandwell's VCS to explore a series of key themes. These will be used to draft the main elements of the strategy. Focus group pilot approach was held in September. Focus Groups due to take place from October onwards	

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Improvement Plan Theme Progress Summary October 2022

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
Organisational Culture	<p>Summary Statement:</p> <p>Progress is being made across all workstreams. Slippage is being experienced in a couple of areas that are classed as medium risk one of which is due to the impact of the by-election. In addition there is some slippage relating to the establishing the desired organisational culture (which is rated as a green risk).</p> <p>Of the 16 main action areas, there are:</p> <ul style="list-style-type: none"> • zero main actions with a red risk rating, • 7 main actions with an amber risk rating, • 9 main actions with a green risk rating. <p>Of the 7 actions with an amber risk rating:</p> <ul style="list-style-type: none"> • 3 live sub-actions to deliver the action are on track • 2 sub-action have or will experience medium slippage or issues. These actions relate to: <ul style="list-style-type: none"> ○ Create the right environment for that organisational culture to thrive <ul style="list-style-type: none"> ▪ Organisational Development Strategy and Plan Approved- being redefined as Workforce 	<p>October</p> <ul style="list-style-type: none"> • Member Development programme part of BAU • Final interview for CEx taken place <p>September:</p> <ul style="list-style-type: none"> • CEx long-list interviews undertaken • 4 sessions between Members and Officers with LGA have taken place <p>August:</p> <ul style="list-style-type: none"> • CEx recruitment out to advert • Training provider in place for Directorship 	<ul style="list-style-type: none"> • Part 2 engagement – determining desired culture - August – December 2022- Commenced • Corporate Governance Training Delivery - Autumn 2022 - Commenced • Approval of document / statement setting out desired organisational culture – On track for Jan 2023 • Organisational Development Strategy and Plan Approved – On track for March 2023

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<p>Strategy. This is dependent on the outcomes of the culture listening groups which will conclude in October.</p> <ul style="list-style-type: none"> ○ Design and deliver Corporate Governance Training for Members: <ul style="list-style-type: none"> ▪ *Effective decision-making training- (delay of Council date due to by-election) • 2 sub-actions have been marked completed this month. These actions relate to: <ul style="list-style-type: none"> ○ Ward and Casework <ul style="list-style-type: none"> ▪ Leadership Team conversation to identify mechanisms to embed and sustain the required approach and process forward and casework (linked to desired organisational culture) ○ Deliver Member Development Programme including Finance Training Programme <ul style="list-style-type: none"> ▪ Deliver Member Development Programme • 1 main action has been marked complete this month: <ul style="list-style-type: none"> ○ Actions to respond to employee survey outcomes to be identified and embedded in improvement plan • 2 sub-actions are not yet due to commence 	<p>and Trusteeship Training</p> <ul style="list-style-type: none"> • Organisational Culture Champion training commenced • Listening groups scheduled and invites to 460 employees issued 	<ul style="list-style-type: none"> • Appointment of Permanent Chief Executive- <i>On track for Nov 2023</i> <p>Complete:</p> <ul style="list-style-type: none"> • Budget Holder Role Profile Approved • Employee Engagement Survey Report • New Member Induction • Employee Engagement Survey Results • Meeting structures to support regular dialogue between Senior Leadership (Officer and Member) confirmed for new • Municipal Year-Part 1 Engagement – Starting the Conversation

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
			<ul style="list-style-type: none"> • Scope of Corporate Governance Training approved • Member Development Programme approved • Corporate Governance Training – Procurement for delivery partner
	<p>Organisational Culture Workstream Updates</p> <p>Establishing Organisational Culture</p> <ul style="list-style-type: none"> • Consultancy engaged. • Phase 1 engagement has been complete. Culture champions have been recruited and attended training. Listening sessions have been carried out. Survey to be issued October/November. • Outcome session to be held with LT November 22. Draft of document setting out the desired organisational culture will then be refined and work commence on workforce strategy. <p>Officer Learning and Development</p> <ul style="list-style-type: none"> • Preparatory discussions are taking place for the revision of corporate induction • Guidance around decision making is being issued to Officers in October. Dates for training are being agreed. 		

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> • Range of corporate governance training has been delivered linked to the constitutional approvals. <ul style="list-style-type: none"> ○ Effective decision-making training scheduled to commence late November linked to scheme of delegation approvals. ○ Procurement and Officer-Member behaviour training commenced as planned. • A broader Management Development Programme and revision to the Corporate Induction will be rolled out in 2023 following the approval of the OD Strategy and Plan. <p>Officer and Member Relationship</p> <ul style="list-style-type: none"> • Regular meetings with Whips are being diarised. • Regular meetings with Group Leaders have been taking place and these have been meeting needs. Regular meetings between Cabinet and Leadership Team in place for Municipal Year • 1 more session to take place with Officers (Nov) and there will then be a report produced by LGA, identifying any further actions required. <p>Member Learning and Development</p> <ul style="list-style-type: none"> • Member Development Programme in place and moved into regular business of the Ethical Standards and Member Development Committee. • Centre for Governance and Scrutiny are providing training on 28 Nov. • Effective decision-making training to be delivered in November/December to key officers (<i>delay due to Council date change</i>). • Annual refresher training of Corporate Governance training planned in November 22. • Forward Plan for All Member Briefings in place for new Municipal Year. Latest briefing took place 18 October • Leadership Team Review of All Member Briefings to ensure they are meeting needs. Briefing note will be compiled to report back on the last 12months as a closure report. <p>Internal Communications</p>		

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> Comms messages have taken place and training sessions held have reinforced the messages around the relationship. Director Live Events have taken place over Autumn. All Staff briefing taking place in November. Paper outlining comms on IP to date and future plans is being presented on 03/11 <p>Employee Engagement</p> <ul style="list-style-type: none"> Leadership Team considered action plan in response to Employee Engagement Survey 18/10. EES specific action plan in place containing corporate actions and Directorate-specific actions. Actions around staff conference and formal employee recognition scheme have been added to OC.E2. EES Action plan will be monitored twice a year. <p>Recruitment of Chief Executive</p> <ul style="list-style-type: none"> Final interviews with Chief Officer Terms and Conditions Committee took place 20 October 2022; council ratification due 8 November 		
Corporate Oversight	<p>Summary Statement: Progress is being made across all workstreams.</p> <p>Of the 11 main actions there is</p> <ul style="list-style-type: none"> 1 main action with a red risk rating, 4 main actions with an amber risk rating 6 actions with a green risk rating. <p>Of the 1 main action with a red risk rating:</p> <ul style="list-style-type: none"> All sub-actions are now complete with the Q1 report presented to Cabinet, Scrutiny and an All Member briefing. New actions are proposed for inclusion within this workstream. 	<p>October:</p> <ul style="list-style-type: none"> Q1 Performance Management Report made to Scrutiny and at an All Member Briefing. <p>September:</p> <ul style="list-style-type: none"> Q1 Performance Management Report made to Cabinet ERP Contract signing and mobilisation 	<ul style="list-style-type: none"> All Directorate-level restructuring completed- On track for December completion of AD level. Oracle Fusion Implemented- In progress

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<p>Of the 4 main actions with an amber risk rating:</p> <ul style="list-style-type: none"> • 2 live sub-actions to deliver the action are on track • 1 sub-action has or will experience medium slippage or issues. This action relates to: <ul style="list-style-type: none"> ○ Programme and Project Management: Programme and Project Management System Implementation <ul style="list-style-type: none"> ▪ Further exploration taking place of Verto system to fulfil transformation programme needs • Zero sub-actions have been completed this month. • Zero sub-actions are not yet due to commence 	<ul style="list-style-type: none"> • Project Management training rolled out to key project members for Oracle Fusion <p>August:</p> <ul style="list-style-type: none"> • ERP Contract Awarded • Financial Services new structure in place <p>July:</p> <ul style="list-style-type: none"> • Business process re-engineering resources have been approved. 	<p>Complete:</p> <ul style="list-style-type: none"> • Establish Performance Management Framework • Improvement Plan approved • Procure new support provider to deliver Oracle Fusion • First Performance Management Report
	<p>Corporate Oversight Workstream Updates</p> <p>ERP</p> <ul style="list-style-type: none"> • Key project members have received training. Ongoing training to be arranged as needed in the future. 		

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> • Procurement complete and contract awarded • Support provider in place • New milestones to be added to Improvement Plan <p>Improvement Planning, Monitoring and Learning</p> <ul style="list-style-type: none"> • Commissioners report prepared and submitted to Secretary of State – next submission due in December 2022. • Awaiting formal response from DLUHC. • Initial scoping of work has commenced for the Continuous Improvement plan <p>Performance Management</p> <ul style="list-style-type: none"> • Q1 report considered by Budget and Corporate Scrutiny Management Board 13/10/22, and an All Member briefing on Q1 report being held 18/10/22. • Preparations underway for Q2 report to Cabinet in December. • Monthly Budget monitoring is taking place and report received by leadership team monthly. <p>Organisational Structure and Enabling Corporate Core</p> <ul style="list-style-type: none"> • KPIs and standards developed for financial services section by November • Review of corporate debt recovery processes underway covering multiple teams- completion date December 22. • C.Co in place to support finance transactional processes. Series of back office process reviews are being progressed through the Fusion Programme. • Approach to transformation being considered by LT 03/11/22 <p>Programme and Project management</p> <ul style="list-style-type: none"> • Leadership Team approved governance and framework. 		

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> In Nov, Leadership Team will consider how we manage pipeline of business change projects, governance to manage approval and progress of projects, project and programme mgmt methodology, business analysis methodology, business change methodology, setting up PMO, managing benefits lifecycle. Verto system is being looked at further exploration needed with a view to a pilot. 		
Strategic Direction	<p>Summary Statement: Progress is being made, however some specific issues emerging around the EDI agenda along with the forthcoming decision to adopt the LGA equalities framework review are impacting on the ability to deliver on the actions to the original timescales. Slippage has also occurred against original timescales for the Commercial Strategy. Locality Working Workstream placed on hold and proposed creation of Customer Journey Workstream.</p> <p>Of the 13 main action areas, there are:</p> <ul style="list-style-type: none"> zero actions with a red risk rating, 6 actions with an amber risk rating, 7 actions with a green risk rating. <p>Of the 6 main actions with an amber risk rating:</p> <ul style="list-style-type: none"> 7 live sub-actions to deliver the action are on track 4 sub-actions have or will experience medium slippage or issues (two of which are related to delays due to the by-election). These actions relate to 	<p>October</p> <ul style="list-style-type: none"> Corporate Parenting Strategy Approved Review of MTFP concluded Microsite creation for information around priority projects for stakeholders launched <p>September:</p> <ul style="list-style-type: none"> Equality policy review complete First Resident's Survey completed 	<ul style="list-style-type: none"> Approval of Medium-Term Financial Plan and Capital Strategy- on track for November Cabinet Corporate Procurement Strategy – Commenced Commercial Strategy Commenced Regular Resident Survey in place- 2022 budget consultation and Residents' survey completed. Plans to sustain approach being developed

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> ○ Corporate Asset Management Strategy Development <ul style="list-style-type: none"> ▪ *Corporate Asset Management Strategy Approved (<i>delay due to by election</i>) ○ Develop and Implement the Commercial Strategy <ul style="list-style-type: none"> ▪ Commercial Strategy Approved ▪ Business Cases Presented <ul style="list-style-type: none"> • Commercial Opportunity Assessment report to be received by Leadership Team. ○ Equality and Diversity <ul style="list-style-type: none"> ▪ Continue to embed Equality, Diversity and Inclusion (EDI) staff networks ▪ Continue to deliver on Equalities Commission Board priorities ▪ *Equality Policy approved- Scheduled for Nov 22 (<i>delay due to by election</i>) <ul style="list-style-type: none"> • Two sub-actions have or will experience significant slippage or issues. <ul style="list-style-type: none"> ○ Equality and Diversity <ul style="list-style-type: none"> ▪ Review of Council EDI decision making process ▪ Equality, Diversity and Inclusion Strategy approved • 6 sub-actions have been marked complete this month 	<ul style="list-style-type: none"> • Budget Consultation Completed <p>July:</p> <ul style="list-style-type: none"> • Corporate Procurement Strategy approved • Budget Consultation Launched 	<ul style="list-style-type: none"> • Equalities Policy approved- on track for November approval • Equality, Diversity and Inclusion Strategy approved- Autumn 2023 • Corporate Asset Management Strategy Approved- On track for November Cabinet • HRA 30 Year Business Plan approved- On track for Spring 2023 • Model for Locality Working Approved- On hold and incorporation within Customer Journey Workstream. <p>Complete:</p>

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> ○ Corporate Asset Management Strategy Development <ul style="list-style-type: none"> ▪ Confirmation of funding for remaining Workplace Vision components ○ Refresh Corporate Parenting Strategy <ul style="list-style-type: none"> ▪ Re-focusing of strategic priorities ▪ Corporate Parenting Strategy approved ○ Equality and Diversity <ul style="list-style-type: none"> ▪ Review approach to Equality Impact Assessments ○ Incorporate Public Consultation Results into Performance Management Framework <ul style="list-style-type: none"> ▪ First report from Resident's Survey ○ Developing a model for locality working <ul style="list-style-type: none"> ▪ Customer Access Strategy Development Commences <ul style="list-style-type: none"> • 1 sub-actions are not yet due to commence <p>1 sub action has been placed on hold:</p> <ul style="list-style-type: none"> ○ Developing a model for locality working <ul style="list-style-type: none"> ▪ Pilot of Town Co-ordinator role commences 		<ul style="list-style-type: none"> • Approval of Communications and Corporate Affairs Strategy • Approval of Regeneration Strategy and Pipeline- • Early Help Strategy approved and launched • Public Consultation to be carried out as part of budget process • Corporate Parenting Strategy Refresh Approved
	<p>Strategic Direction Workstream Updates</p> <p>Strategy Development and Refresh</p>		

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> • Regen Strategy and Pipeline: First update report across the 63 projects in the pipeline being compiled. Aiming for scrutiny and Cabinet in November/December <ul style="list-style-type: none"> ○ Discussions ongoing around capacity and expertise to deliver pipeline. ○ Software procurement not taken place yet. Demonstration is due in October ○ Microsite created and launched at the end of October. • Corporate Asset Management Strategy: Workplace vision has been closed. New Corporate asset management strategy due to Cabinet in November (including surplus assets report). Options for hub locations actions has been incorporated within the customer Journey workstream. • Commercial Strategy: Assessment Report received. To be reviewed by Leadership Team and then Commercial Strategy can be updated to reflect opportunities to be taken forward. • Corporate Parenting: The strategy has been circulated and agreed by corporate parenting board members. • HRA Business Plan: Draft plan is due at Safer neighbourhoods and active communities Scrutiny Board on 1 Nov. On track for Cabinet in February. Procurement of stock condition surveys due to go to tender November 22 <p>Equality and Diversity.</p> <ul style="list-style-type: none"> • Review of council EDI decision making process – this focused on the EIA Review which has been completed and the updated EIA form and guidance is being uploaded onto the intranet • Approval of EDI strategy - Significant slippage in relation to two components of EDI workstream due to adoption of LGA Equalities Framework leading to pushing back original timescales. Timescales agreed to be reprofiled through October's change control. This is referenced in the report going to Cabinet seeking approval of the equalities policy – but also seek approval of using the LGA Equalities Framework. • Continue to embed Equality, Diversity and Inclusion (EDI) staff networks – Ongoing work – some networks are functioning better than others; • Continue to deliver on Equalities Commission Board priorities. EDI legacy issues are resurfacing which is impacting on operation of staff networks and delivery on Equalities Commission Board priorities. Report due to 		

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<p>Leadership Team in coming weeks. All these actions will be swept up as part of the LGA Equalities Framework.</p> <ul style="list-style-type: none"> *Equality Policy approved- Scheduled for Nov 22 (delay due to by election) <p>Locality Working</p> <ul style="list-style-type: none"> Workstream proposed to be closed and actions incorporated within Customer Journey Workstream. Pilot of town co-ordinator role was unsuccessful and placed on hold. <p>Medium Term Financial Plan & Capital Strategy</p> <ul style="list-style-type: none"> The Approval of MTFP and Capital Strategy has been pushed to the November Cabinet (delay due to by election). On track <p>Consultation and Engagement</p> <ul style="list-style-type: none"> Budget consultation, residents survey and SHAPE survey being used to inform business planning and budget setting. Proposal for regular surveys due in November 		
Decision Making	<p>Summary Statement: Progress is being made across all workstreams.</p> <p>Of the 7 main actions there are:</p> <ul style="list-style-type: none"> zero main actions with a red risk rating, 5 main actions with an amber risk rating, 2 main actions with a green risk rating. <p>Of the 5 main actions with an amber risk rating:</p> <ul style="list-style-type: none"> 4 live sub-actions to deliver the action are on track 	<p>October:</p> <ul style="list-style-type: none"> ARAC recommendations and report into SEND transport complete <p>September:</p> <ul style="list-style-type: none"> SEND procurement exercise undertaken in line 	<ul style="list-style-type: none"> Review of scrutiny arrangements- On track for Nov Council. Council Decision on options for alternative election cycle- Due Nov 2022 Revised Financial Regulations agreed-

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> • 4 sub-actions have or will experience medium slippage or issues. All bar one relate to delays due to the by-election: <ul style="list-style-type: none"> ○ In-depth review and revision to Corporate Governance Documents <ul style="list-style-type: none"> ▪ *Effective Decision-Making Training- (delay due to by election) ▪ *Revised Scheme of Delegations agreed- (delay due to by election) ▪ Revised Financial Regs agreed <ul style="list-style-type: none"> • Slippage relates to the remaining areas of the Financial Regulations that need reviewing. This will slip to December Council. As the key changes were approved in July, the risk and impact of the slippage of the outstanding bits is very low. ○ Refresh decision making-arrangements including the role of Scrutiny <ul style="list-style-type: none"> ▪ *Review of scrutiny arrangements- (delay due to by election) • 1 sub-action has or will experience significant slippage or issues. These actions relate to: <ul style="list-style-type: none"> ○ In-depth review and revision to Corporate Governance Documents <ul style="list-style-type: none"> ▪ Revised Council Procedure Rules. <i>This is Red rated due to an error in July's commentary and omission</i> 	<p>with contract procurement rules</p> <ul style="list-style-type: none"> • Contracts now live <p>August:</p> <ul style="list-style-type: none"> • Consultation launched re 4-yearly election cycle 	<p>On track for December</p> <ul style="list-style-type: none"> • Revised scheme of Delegations agreed- due for approval in November • Approval of any changes to scrutiny (if required following review)- From Nov <p>Complete:</p> <ul style="list-style-type: none"> • Options Paper to Leadership Team for 4 yearly election cycle • Scrutiny work planning event • Revised Procurement and Contract Procedure Rules agreed • Revised Council Procedure Rules • Revised Sale of Land and Buildings Protocol

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<p style="text-align: right;"><i>from change control. Due for Council approval in November/December.</i></p> <ul style="list-style-type: none"> • 1 sub-action is marked complete this month. This action relates to: <ul style="list-style-type: none"> ○ ARAC report and recommendations in relation to SEND Transport <ul style="list-style-type: none"> ▪ Completion of report and recommendations • zero sub-actions are not yet due to commence 		<ul style="list-style-type: none"> • Implementation of Scrutiny Recommendations for SEND (Special Educational Needs and Disability) Transport and Waste • Completion of ARAC report and recommendations in relation to governance issues raised (SEND Transport, Waste Contract)
	<p>Decision Making Workstream Summary</p> <ul style="list-style-type: none"> • 4 Yearly Election Cycle <ul style="list-style-type: none"> • Final decision report due at Council in November. (delay due to by election) • Constitution and Governance Framework <ul style="list-style-type: none"> • Training to be rolled our beginning of November/December 22 after approval at Council in November 22 of further constitutional changes. (delay due to by election) • Refresh of financial regulations will be presented to full Council in December. 		

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> Revised scheme of delegation being prepared for Council in November <p>Role and function of Scrutiny and Audit</p> <ul style="list-style-type: none"> Review of scrutiny arrangements are ongoing and due to be reported to full Council in November. LGA have been complimentary around scrutiny arrangements Scrutiny work plans have been agreed and workplans are in the process of being delivered. Follow up discussion due to take place in October to manage the position on historic issues with ARAC chair. Survey to Scrutiny and Audit Members, and Officers attending Committees conducted over September. Findings were reported to IPRM 6 October. Surveys will continue to be sent out after meetings and reported quarterly. 		
Procurement & Commercial	<p>Summary Statement: Progress is being made across all workstreams. Implementation of a corporate performance management system is rated as low risk but is experiencing a significant level of slippage.</p> <p>Of the 11 main actions there are:</p> <ul style="list-style-type: none"> zero actions with a red risk rating, 7 actions with an amber risk rating, 	<p>October:</p> <ul style="list-style-type: none"> Review of Serco Contract Complete Street Cleansing revised plan approved at Waste Board. 	<ul style="list-style-type: none"> SEND Transport Contract Monitoring arrangements in place- Due in January Arrangement in place for future delivery of leisure services- May 2023

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> • 4 actions with a green risk rating <p>Of the 7 actions with an amber risk rating:</p> <ul style="list-style-type: none"> • 3 live sub actions are on track • 1 sub-actions have or will experience medium slippage or issues. This action relate to: <ul style="list-style-type: none"> ○ Lion Farm Options Agreement: Implement approved way forward: <ul style="list-style-type: none"> ▪ Papers have been submitted to the external party that will conduct the expert determination. Update required at IPRM • 1 action with a green risk rating is experiencing a significant level of slippage: <ul style="list-style-type: none"> ○ Corporate Performance Management System – not progressed past soft market testing due to project management capacity. <ul style="list-style-type: none"> • 4 sub actions have been completed this month. These relates to <ul style="list-style-type: none"> ○ Review of the Serco contract ○ Street Cleansing Recovery Plan approved by Waste Management Board ○ Implementation of recommendations from Audit and Scrutiny in relation to SEND Transport: Recommendations related to procurement embedded in procurement process, and ARAC recommendations implemented <ul style="list-style-type: none"> • Zero sub-actions have not yet been rated. 	<ul style="list-style-type: none"> • LATC Chief Officer recruitment underway <p>September:</p> <ul style="list-style-type: none"> • Lion Farm: Responsibilities of both council and developer clarified within formal documentation • SEND Transport Contract has gone live <p>July:</p> <ul style="list-style-type: none"> • SEND contract awarded • Cabinet decision on future delivery of leisure services 	<ul style="list-style-type: none"> • Fleet replacement complete- Mid 2023 • Implementation of Asset Management System- On track for December completion • Lion Farm report to Cabinet on determination of position of developer- date tbc as part of the ED process <p>Complete:</p> <ul style="list-style-type: none"> • Termination notice for SLT contract approved by Cabinet • Revised contract governance arrangements in place for Serco contract • Asset Management System Procured

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> 3 sub actions are not due to start 		<ul style="list-style-type: none"> SEND Transport procurement published Waste and Recycling recovery plan implementation Option appraisal for future leisure management options Street Cleansing Recovery Plan Approved Serco contract performance reporting embedded in PMF Review of Serco contract completed New SEND Transport contract in place
	<p>Procurement and Commercial Workstream Summary</p> <p>Waste Contract:</p> <ul style="list-style-type: none"> Frith contract review in progress supported by Serco & SMBC officers. 		

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> • Recommendations review is underway and briefing to Cabinet member planned for early November 2022. • Street Cleansing Recovery plan presented to Waste Board 19 October 2022 • Fleet replacement programme is in delivery phase with dates into 2023. <p>SEND Transport:</p> <ul style="list-style-type: none"> • All new contracts issued and accepted by operators new framework commenced 1.9.22 • Contract monitoring arrangements to be confirmed in January 2023 • Recommendations from Children & Education Scrutiny Board are being monitored • When subsequent internal audit report into SEND Transport Procurement is conducted (March 2023), this will be reported to ARAC as part of BAU reporting on audit work programme. • Lessons Learnt from SEND Transport procurement 2 being captured. <p>New System Procurement:</p> <ul style="list-style-type: none"> • Initial market testing for Performance Management System and demonstration complete. Not progressed past soft market testing. Size and scale of system to be considered. • Asset Management System is procured and implementation is on track for December 2022. <p>Lion Farm:</p> <ul style="list-style-type: none"> • Approved way forward is being implemented, papers have been submitted to the external party that will conduct the expert determination. • Formal document detailing the respective roles and responsibilities of Council and developer. <p>Leisure Contract:</p> <ul style="list-style-type: none"> • Decision made by Cabinet to transfer services to LATC (Local Authority Trading Company) • Implementation phase has commenced. • Chief Operating Officer recruitment in progress. • Further legal vehicle structure session undertaken with Cabinet Member. 		

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> Tax Advisors appointed. 		
Partnerships & Relationships	<p>Summary Statement: Progress is being made across workstreams with some slippage in relation to the SCT KPI review, partnership structures around transition from children's to adult's</p> <p>6 sub actions have been closed this month</p> <p>Of the 6 main action areas, there are:</p> <ul style="list-style-type: none"> zero actions with a red risk rating, 5 actions with an amber risk rating, 1 action with a green risk rating. <p>Of the 4 actions with an amber risk rating:</p> <ul style="list-style-type: none"> 2 live sub-actions to deliver the action are on track 3 sub-actions have or will experience medium slippage or issues. These actions relate to: <ul style="list-style-type: none"> Continue with robust governance arrangements in place ensuring the accountability of SCT to deliver improved outcomes for children and young people in Sandwell in line with the contract 	<p>October</p> <ul style="list-style-type: none"> SCT contract performance embedded within PMF <p>September:</p> <ul style="list-style-type: none"> Strategic Priorities form part of the Children & Families Strategic Partnership (CaFSP) work programme. Health and Wellbeing Strategy approved Review of Grants completed 	<ul style="list-style-type: none"> Review of SCT Contract concludes- due Autumn 2022 for commencement from April 2023. <p>Complete:</p> <ul style="list-style-type: none"> Regular cross-SMBC/SCT Leadership meetings City Region Sustainable Transport Scheme approved by CA Board Sandwell asks of trailblazer devolution deal agreed Officer & Member representation agreed to key regional and sub-

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> <ul style="list-style-type: none"> ▪ KPI Suite reviewed and agreed - due to be complete December 2022 for implementation in April 2023. ○ Review partnership structures within the 'People's sphere' <ul style="list-style-type: none"> ▪ Partnership structures in relation to transition from children's to adult's services - review due to commence in November on the reviewing and remodelling of the pathway.. ● 6 sub-action has been completed this month <ul style="list-style-type: none"> ○ SCT Performance reporting embedded within Council PMF ○ Establish corporate approach to working with SCT on shared issues, such as corporate parenting and delivery of Early Help service ○ Review partnership structures within the 'People's sphere' <ul style="list-style-type: none"> ▪ Initial scoping of work with partners around partnership structures in the children's sphere ▪ Test adequacy of partnerships and integration through Health Outcomes Framework and system-wide thematic deep dives 		<ul style="list-style-type: none"> regional meetings and clear ● VCS Grants review update report to Leadership Team ● Health and Wellbeing Strategy ● SCT Contract performance reporting embedded within Council PMF- ● Quarterly system-wide deep dives conducted for health inequality ● VCS Strategy formation commences

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> ○ Relationship with Voluntary & Community Sector (VCS) and Funding to Voluntary & Community Sector. <ul style="list-style-type: none"> ▪ Corporate review of grant funding • 1 sub-actions is not yet due to commence 		
	<p>Partnerships and Relationships Workstream Summary</p> <p>Sandwell Children's Trust</p> <ul style="list-style-type: none"> • Performance reporting embedded within Council PMF • KPI Suite reviewed and agreed between Council and Trust by December 2022 ahead of implementation date 1/4/23. • Revised contract will commence on 1/4/23. Negotiations have commenced between the Council and the Trust. • Contract review DFE- The review will focus on contract requirements, revised KPIs and governance arrangements as part of the DfE statutory direction. • Assurance that approach to working together is effective is being supplied through the inclusion at Operational Partnership Board, Strategic Partnership Board, SCT Improvement Board and twice yearly updates to Children and Education Scrutiny Board. <p>Regional and Sub Regional Presence</p> <ul style="list-style-type: none"> • A number of actions complete • Attendance at and engagement within agenda issues at WMCA, ABCA and BCLEP is much improved and ongoing. <p>Effective Local Structures</p>		

Theme	Summary	Achievements this period (Aug-Oct)	Key Milestones
	<ul style="list-style-type: none"> • Transition from children to adult services -Meeting booked for November 22 to commence work on the reviewing and remodelling of the pathway. Going out to advert for a project lead. Following November meeting, actions to be decided and added to Improvement plan. ASC restructure will add a Learning Disability Team to the ASC structure which will assist with building the offer around transition for people with LD. • Health and Wellbeing Strategy complete and approved by both Health & Wellbeing Board. • Deep Dives are being completed as planned and on time. SHCP Board and Integrated Care Board are regularly reviewing the progress of deep-dives, the outcomes from them, and any follow up actions needed <p>VCS (Voluntary and Community Sector) Relationship</p> <ul style="list-style-type: none"> • Review of grants complete as per timeline. Process to meet 2023/24 savings target agreed. • Strategy formation work has commenced 		

Appendix 3a – Audit Recommendation Status Summary October 2022

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Grant Thornton Recommendation for Audit	Summary
<p>Key Recommendation 7: Members in key statutory roles, in particular in relation to Cabinet, scrutiny, standards and audit, need to be provided with effective development training and support. The Member Development Programme should be reviewed to ensure corporate governance forms part of the training for members with governance roles</p>	<p>Within the organisational culture theme of the Improvement Plan, the workstream on Member Learning and Development incorporates the Member Development Programme (MDP) which is addressing training needs for Members.</p> <p>A revised MDP was agreed at the start of the Municipal Year and is kept under regular review by the Ethical Standards and Member Development Committee.</p> <p>As part of the corporate governance offer for all Members that commenced in Autumn 2022, the following sessions have been offered to all Members:</p> <ul style="list-style-type: none"> • An introduction to Local Government Finance - to sessions were conducted in June 2022. The main focus of these sessions were to give Members greater awareness and understanding of the basics of local government finance and develop better knowledge of the financial implications of forthcoming changes by the government. An introduction session was aimed at new Members of the Council, and another session was aimed at all Members as a refresher. • An introduction to Internal Audit, Counter Fraud and Risk Management -June 2022. 40% of Councillors attended. This training covered a background to internal audit and internal control; what internal audit is and is not; a brief guide to the role of an Audit Committee; fraud prevention and detection within the local authority sector and the legal framework it operates within; an update on money laundering and housing related fraud; existing and emerging fraud risks; and risk management – key risk the Council faces.

- Sessions on Effective Member and Officer Relationships took place in September 2022. Two sessions were conducted and a turnout of 76% Members attended. This was delivered by the LGA.

All Members have been invited to training around the Corporate Governance Framework in November 2022. This session will be delivered by CIPFA. It includes exploring the standards of governance that are expected of the Council and the principles in practice and will explain the purpose of key elements, including the local code and the annual governance statements. It will also identify the key points Members should look out for.

Specific training for ARAC Members is planned on the following areas:

- The role of External Audit
- The annual statement of accounts
- Audit committees – January & February 2023

ARAC Members also receive a copy of the regular CIPFA Updates produced for audit committee members in the public sector.

Elected Members have Personal Development Plans in place identifying individual learning needs. Officers have created a key skills checklist for any aspiring members wishing to become a member of ARAC, as well as current Independent Members, and, following the publication of updated CIPFA guidance for audit committees, will be incorporating CIPFA's Knowledge and Skills framework to measure members knowledge and skills against what is required

ARAC Members' learning needs remain under review by the Chair of ARAC together with supporting Officers. In addition, the regular survey to Audit and Scrutiny Members includes

	<p>questions around Learning and Development received and any new needs arising to help ensure that the Member Development Programme is flexible to meet emerging needs.</p>
<p>Improvement Recommendation 12: Officer and Member Relationships – There is a need to ensure that members of scrutiny and audit committees are aware of their governance roles including how to interrogate reports and the right questions</p>	<p>As above.</p> <p>Informal feedback in relation to ARAC indicates that the committee is working more effectively and that Members are interrogating reports well and asking appropriate questions.</p> <p>The Chair has also recently introduced pre meetings for all members of A&RAC to ensure that key lines of questioning are discussed in advance of the committee meeting.</p> <p>Views from the follow-up reviews conducted by Grant Thornton and the LGA in Autumn 2022 will provide an external perspective on the effectiveness of A&RAC. The regular survey of Officers and Members attending A&RAC will continue to provide insight into the Committee’s development.</p>
<p>Improvement Recommendation I4: Officer and Member Relationships – the forward plan of the Cabinet should be shared with the Audit Committee and Scrutiny Board to help structure their agenda planning .</p>	<p>The forward plan is shared with Audit and Risk Assurance Committee at every meeting to assist with the Committee’s work planning.</p>

Improvement

Recommendation I34: Audit Committee – now that the Audit and Risk Assurance Committee has agreed the action to bring this long-standing matter to resolution [review into the Wragge Report], it will be important that – as the Audit and Governance Panel recognised – the Council manages its position so that the matter does not resurface, so that it can move on and focus on its corporate objectives

ARAC agreed their work programme at the start of the Municipal Year and this is refreshed and reviewed regularly. The issue referred to has been resolved so is not required to feature in the work programme.

Regular agenda planning meetings are in place between the Chair of ARAC and Officers which serve as a point to discuss the approach to any emerging or historic issues should they arise.

Appendix 3 – Statutory Recommendation Status Summary October 2022

Statutory Recommendation	Summary	Achievements this month	Milestones
<p>Page 87</p> <p>S1 - It is imperative that senior officers and senior members take effective corporate grip of long-standing service issues highlighted by the findings in this report (including SLT, SCT, the waste service, the ERP system, and Lion Farm) and prioritise corporate effort in managing the issues identified and embed the solutions into the Council</p>	<p><u>Organisational Culture</u> No actions in this theme</p> <p><u>Corporate Oversight</u> ERP</p> <ul style="list-style-type: none"> • Key project members have received training. Ongoing training to be arranged as needed in the future. • Procurement complete and contract awarded • Support provider in place <p><u>Strategic Direction</u> Strategy Development and Refresh</p> <ul style="list-style-type: none"> • Regen Strategy and Pipeline: April- September update due. First update report across the 63 projects in the pipeline is aiming for scrutiny and Cabinet in November/December. Software procurement not taken place yet. Demonstration of VERTO has taken place. Microsite created and launched- 31 October 2022 • The Corporate Parenting Strategy has been circulated and agreed by Corporate Parenting Board members. <p><u>Decision Making</u> Role and function of Scrutiny and Audit</p> <ul style="list-style-type: none"> • Review of scrutiny arrangements are ongoing and due to be reported to full Council in November. LGA (Local Government Association) have been complimentary around scrutiny arrangements 	<ul style="list-style-type: none"> • Microsite created for information around priority regeneration projects for stakeholders- launched • Corporate Parenting strategy circulated and agreed by Corporate Parenting Board • ARAC recommendations and report into SEND transport complete • Review of Serco Contract Complete • Street Cleansing revised plan approved at Waste Board. • LATC Chief Officer recruitment underway • SCT contract performance embedded within PMF 	<ul style="list-style-type: none"> • Oracle Fusion Implemented- In progress • Review of scrutiny arrangements- On track for Nov Council. • Approval of any changes to scrutiny (if required following review)- From Nov • Review of SCT Contract concludes- due Autumn 2022 for commencement from April 2023. <p>Completed milestones:</p> <ul style="list-style-type: none"> • Termination notice for SLT contract approved by Cabinet- complete • Revised contract governance arrangements in place for Serco contract- complete

- Scrutiny work plans have been agreed and workplans are in the process of being delivered.
- Scrutiny session delivered on 31/08/22 relating to missed bin collection over Summer 2022
- New SEND Transport procurement exercise has been undertaken- consistent with contact procurement rules and recommendations from scrutiny.
- Internal audit has included a review of compliance with contract procedure rules as part of their work programme and will be undertaken this municipal year.
- Survey to Scrutiny and Audit Members, and Officers attending Committees conducted over September. Findings reported to IPRM 06/10 and shared with Members. Link for further feedback surveys will be shared after each meeting.

Procurement & Commercial

Waste Contract:

- Frith contract review in progress supported by Serco & SMBC officers. Initial review report received end of Sept 22.
- Monitoring framework progressing well with an agreed framework in place. Q1 performance reported alongside PMF (Performance Management Framework) report to Cabinet and reported to Officer leadership and will continue as part of quarterly PMF reports.
- Street Cleansing Recovery Plan presented to Waste Board in October.
- Fleet replacement programme is in delivery phase with dates into 2023.
- SERCO fleet replacement on track.

- Waste and Recycling Recovery Plan Implementation - **Complete**
- Street Cleansing Recovery Plan approval – Resubmission to Waste Management Board in - **Complete**
- SERCO contract performance reporting embedded in Performance Management Framework - **Complete**
- Option appraisal for future leisure management options – **Complete**
- Scrutiny work Planning event - **Complete**
- Procure new support provider to deliver Oracle Fusion- **complete**
- Approval of Regeneration Strategy and Pipeline- **Complete**

	<p>SEND Transport:</p> <ul style="list-style-type: none"> • All new contracts issued and accepted by operator's new framework commenced 1.9.22 • Procurement-related recommendations from Audit and Scrutiny fulfilled in line with new contract from September 22. • Lessons Learnt from SEND Transport procurement 2 being captured. <p>New System Procurement:</p> <ul style="list-style-type: none"> • Performance Management System - Not progressed past soft market testing- further demonstration with another provider. Size and scale of system to be considered for scope of project. • Asset Management System is procured, and implementation is on track <p>Lion Farm:</p> <ul style="list-style-type: none"> • Action plan being implemented, however, there has been some slippage due to legal representatives of both sides taking longer than expected. • Papers have been submitted to the external party that will conduct the expert determination. • The date for Expert Determination is outside the hands of the Council and will be decided by a third party. • Formal document detailing the respective roles and responsibilities of Council and developer complete. <p>Leisure Contract:</p> <ul style="list-style-type: none"> • Decision made by Cabinet to transfer services to LATC (Local Authority Trading Company) • Implementation phase has commenced. 		<ul style="list-style-type: none"> • Early Help Strategy approved and launched- Complete • Corporate Parenting Strategy Refresh Approved- Complete • SEND Transport procurement published- complete • SMBC/SCT Leadership meetings - Complete • SCT Contract performance reporting embedded within Council PMF- Complete
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	<ul style="list-style-type: none">• Cabinet Workshop for legal vehicle options consideration, specification, property, and company name delivered 14.09.22• Chief Operating Officer recruitment in progress.• Further legal vehicle structure session undertaken with Cabinet Member.• Tax Advisors appointed.• <p><u>Partnerships & Relationships</u></p> <p><u>Sandwell Children's Trust</u></p> <ul style="list-style-type: none">• Performance reporting embedded within Council PMF• KPI (Key Performance Indicators) Suite reviewed and being confirmed between Council and Trust ahead of implementation date 1/4/23. Suite due to be complete by December• Revised contract will commence on 1/4/23. Contract Sum negotiations commenced 26/9/22.• Contract review DfE (Department for Education)- The review will focus on contract requirements, revised KPIs and governance arrangements as part of the DfE statutory direction.• Meetings in place with Trust, SMBC and Councillor Hackett - Lead Member• All strategic priorities agreed and monitored through Children and Families strategic partnership		
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<p>S2 - The Council must ensure that the learning in relation to commercial decisions, procurement and contract management highlighted in this report are understood through the organisation</p>	<p>Organisational Culture</p> <p>Officer Learning and Development</p> <ul style="list-style-type: none"> • Range of corporate governance training has been delivered linked to the constitutional approvals. • Effective decision-making training scheduled to commence late November linked to scheme of delegation approvals. Guidance around decision making is being issued to Officers in October. • Procurement and Officer-Member behaviour training commenced as planned. • A broader Management Development Programme and revision to the Corporate Induction will be rolled out in 2023 following the approval of the OD Strategy and Plan. <p>Member Learning and Development</p> <ul style="list-style-type: none"> • Member Development Programme in place and will be regularly reviewed. • Effective decision-making training to be delivered in November/December to key officers (<i>delay due to Council date change</i>). • Annual refresher training of Corporate Governance training planned in November 22. • Training delivered ahead of interviews for CEx (on the specific processes relating to that appointment). • Forward Plan for All Member Briefings in place for new Municipal Year <p>Corporate Oversight</p> <p>Performance Management</p>	<ul style="list-style-type: none"> • Q1 Performance Management Report made to Scrutiny and at an All Member Briefing. • Procurement and Contract Procedures Rules training launched • Member Development programme part of BAU 	<ul style="list-style-type: none"> • Regular Resident Survey in place – budget consultation and Residents’ survey completed. Plans to sustain approach being developed • Commercial Strategy approved – Slippage • Revised Financial Regs – slippage to December for final component • Revised Scheme of Delegation – due for Council approval in November • Corporate Governance Training Delivery -Commenced • Corporate Asset Management Strategy Approved- On track for November Cabinet • HRA 30 Year Business Plan approved- On track for Spring 2023 • Implementation of Asset Management System- On track for December completion <p>Completed milestones</p>
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- Q1 report considered by Budget and Corporate Scrutiny Management Board 13/10/22.
- All Member briefing on Q1 report held 18/10/22.
- Preparations being made for Q2 report to Cabinet in December.
- Monthly Budget monitoring is taking place and report received by leadership team monthly

Strategic Direction

Strategy Development and Refresh

- **Corporate Asset Management Strategy:** Workplace vision has been closed. New corporate asset management strategy sets out the priorities. Options for hub locations were identified – the action has now been incorporated within the Customer Journey Workstream and will be progressed through that programme. Implementation of new asset database is on track. Surplus assets portfolio has been delayed but it scheduled for Cabinet in November as part of the Corporate Asset Management Strategy.
- **Procurement and Contract Procedure Rules** approved in July. Training launched 3rd October consisting of initial introduction for managers. Further tailored training taking place for staff with procurement responsibilities.
- **Commercial Strategy:** Commercial Opportunity Assessment Report received. Needs to be reviewed by Leadership Team and then Commercial Strategy can be updated to reflect opportunities to be taken forward.
- **HRA Business Plan:** Draft Plan has been received and shared with Lead Member. Data to be added and

- Budget Holder Role Profile agreed - **Complete**
- Establish Performance Management Framework – **Complete**
- First Performance Management Report - **Complete**
- Revised PCR, and Sale of Land and Buildings Protocol – **Complete**
- New Member Induction- **Complete**
- Member Development Programme - **Complete and BAU**
- Asset Management System Procured- **complete**

	<p>consultation started with key stakeholders. Going out to tender on stock condition surveys</p> <p><u>Decision Making</u></p> <p><u>Constitution and Governance Framework</u></p> <ul style="list-style-type: none"> • Council on 26th July approved revised procurement and contract procedure rules--Training to be rolled out beginning of November/December 22 after approval at Council in November 22 of further constitutional changes. (delay due to by election) • Refresh of financial regulations will be presented to full Council in December. • Revised scheme of delegation being prepared for Council in November <p><u>Procurement & Commercial</u></p> <p><u>New System Procurement:</u></p> <ul style="list-style-type: none"> • Asset Management System is procured, and implementation is on track <p><u>Partnerships & Relationships</u></p> <p>No actions in this theme</p>		
<p>S3 - Senior leadership, both officers and members, must demonstrate that they can continue to work together effectively, that they operate in line with</p>	<p><u>Organisational Culture</u></p> <p><u>Establishing Organisational Culture</u></p> <ul style="list-style-type: none"> • Consultancy Engaged. Phase 1 is complete and included the initial scoping of the approach to be taken to determining the desired organisational culture and initial communication and engagement with staff ahead of Phase 2 (detailed engagement). • Phase 2 commenced with the listening group exercises. Drop in sessions planned for front line workers. 	<ul style="list-style-type: none"> • 4 sessions between Members and Officers with LGA have taken place. • Member Development Programme in place and will be regularly reviewed. 	<ul style="list-style-type: none"> • Organisational Culture - Part 2 engagement – determining desired culture - Commenced • Approval of document / statement setting out desired organisational culture – ‘Our Values:

<p>the Council's values, codes, policies, and procedures, and that there is zero tolerance to inappropriate behaviours. This includes changing the organisational culture in relation to complaints so that they restore balance and proportionality.</p>	<ul style="list-style-type: none"> • Culture champions recruited, trained, and listening sessions carried out. • Phase 2 final listening groups taking place in October. Survey issued in Oct. Plan to present the outcomes of the sessions/surveys to LT on 22 November. <p>Officer Learning and Development</p> <ul style="list-style-type: none"> • Range of corporate governance training has been delivered linked to the constitutional approvals. • Effective decision-making training scheduled to commence late November linked to scheme of delegation approvals. Guidance around decision making is being issued to Officers in October. • Procurement and Officer-Member behaviour training commenced as planned. • A broader Management Development Programme and revision to the Corporate Induction will be rolled out in 2023 following the approval of the OD Strategy and Plan. <p>Officer and Member Relationship</p> <ul style="list-style-type: none"> • Regular meetings with Whips are being diarised. • Regular meetings with Group Leaders have been taking place and these have been meeting needs. Regular meetings between Cabinet and Leadership Team in place for Municipal Year • 4 sessions between Members and Officers with LGA have taken place. 1 more session to take place with Officers (Nov) and there will then be a report produced by LGA, identifying any further actions required. 		<p>Our Behaviours'- On track for Jan 2023</p> <ul style="list-style-type: none"> • Organisational Development Strategy and Plan Approved – On track for March 2023 <p>Completed milestones</p> <ul style="list-style-type: none"> • Organisational Culture - Part 1 Engagement – Starting the Conversation- Complete • New Member Induction - Complete • Meeting structures to support Senior Leadership (Officer and Member) – Complete • Member Development Programme approved- Complete
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- A review of all member enquiries is being undertaken- including member portal. Awaiting LGA report to identify next steps.

Member Learning and Development

- Member Development Programme in place and will be regularly reviewed.

Corporate Oversight

No Actions in Theme

Strategic Direction

No actions in Theme

Decision Making

No actions in Theme

Procurement & Commercial

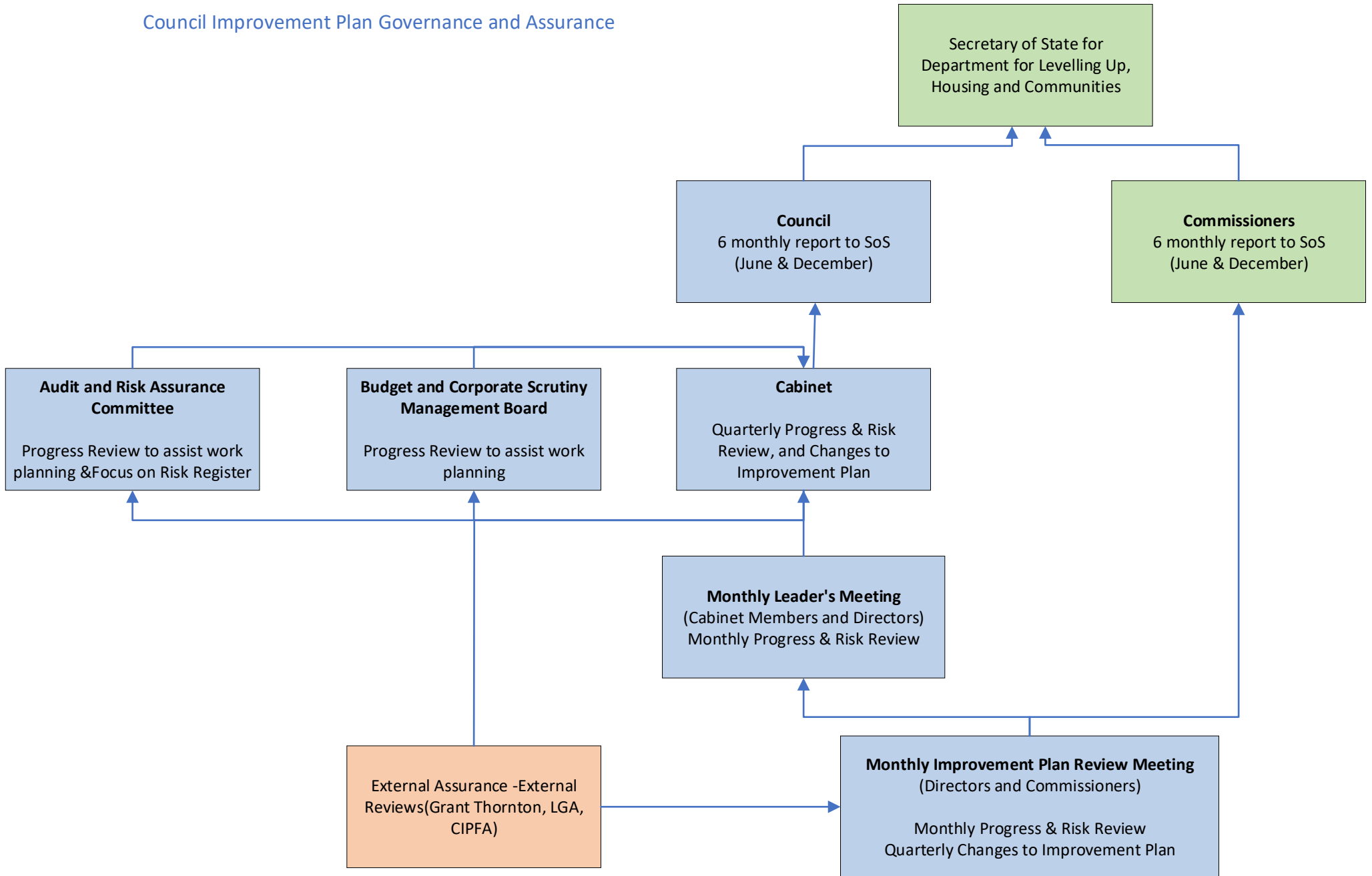
No actions in Theme

Partnerships & Relationships

No actions in Theme

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Council Improvement Plan Governance and Assurance



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Improvement Plan Risk Register

October 2022



1. Best start in life for children and young people



2. People live well and age well



3. Strong resilient communities




4. Quality homes in thriving neighbourhoods





5. A strong and inclusive economy





6. A connected and accessible Sandwell


Risk Ref	Risk Title and Description	Previous Risk Score (Jul 22)	Current Risk Score (Oct 22)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)	Key Sources of Assurance
IP1	<p>Improvement Plan objectives and member / officer engagement in those objectives</p> <p>If programme objectives are not clearly defined to ensure they are within scope, deliverable, understood and agreed then the programme will proceed with no clear direction and may become unmanageable and/or scope creep may take place.</p>	6 (Green)	6 (Green)	3 (Green)		<p>Current and Ongoing Controls</p> <ul style="list-style-type: none"> Engagement as part of the development of the Improvement Plan - sharing themes and workstreams with staff and members Communications Plan implemented for governance review, CPC and Statutory Notice Communications Approach set out in Draft Improvement Plan Objectives for each Theme within the Improvement Plan identified Set of key messages for stakeholders in place and issued to all Directors Council approval of Improvement Plan All Member briefing held (incl. newly elected Members) Regular informal reporting to Cabinet in place on IP progress Regular Staff communications on progress of Improvement Plan Reporting approach to ARAC and B&CSM agreed, with quarterly report in September 22 Change control approach agreed to ensure updates to plan are appropriate and in line with agreed objectives <p>Further Actions</p> <ul style="list-style-type: none"> Communications Plan delivered Staff and member engagement through Organisational Culture change programme 	<p>Across all risks, sources of assurance are:</p> <ul style="list-style-type: none"> Leadership Team Improvement Review Meetings Cabinet Audit and Risk Assurance Committee Scrutiny Commissioners PMF indicators External Assurance – Grant Thornton, CIPFA, LGA Peer Challenge


Risk Ref	Risk Title and Description	Previous Risk Score (Jul 22)	Current Risk Score (Oct 22)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)	Key Sources of Assurance
						<ul style="list-style-type: none">All staff briefing in November with update on IP	

Risk Ref	Risk Title and Description	Previous Risk Score (Jul 22)	Current Risk Score (Oct 22)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)	Key Sources of Assurance
IP2	<p>Programme management arrangements</p> <p>If appropriate programme management arrangements are not put in place then there is a risk that:</p> <ul style="list-style-type: none"> The project will not be delivered to scope The required improvements will not be made within the necessary timescales The government may lose confidence in the council's ability to improve and intervention may be extended The borough's residents may lose confidence in the council ability to deliver effective services Inefficient use of limited resources Continued reputational damage 	8 (Amber)	8 (Amber)	4 (green)		<p>Current and Ongoing Controls</p> <ul style="list-style-type: none"> Improvement Plan approved by Council 07/06/22 PMO support being provided by existing experienced resources within Service Improvement Processes around progress monitoring and change control established for Governance Improvement Plan Risk register in place and will be reported to Leadership Team monthly and Cabinet quarterly Establishment of PMO Teams Site for collation of programme documents and evidence Approach and process for change control and issues in place Exception reporting format confirmed via highlight report standard template Terms of Reference for internal Improvement Plan Review Meeting updated to reflect government intervention, single Improvement Plan and assurance framework <p>Further Actions</p> <ul style="list-style-type: none"> Establishment of dedicated Programme Management Office - dependent upon appointment of dedicated Corporate Performance Management posts 	As above
IP3	<p>Allocation of sufficient resources to project management and project delivery/ maintaining Business as Usual while</p>	8 (Amber)	8 (Amber)	4 (green)		<p>Current and Ongoing Controls</p> <ul style="list-style-type: none"> PMO support being provided by existing experienced resources within Service Improvement 	As above


Risk Ref	Risk Title and Description	Previous Risk Score (Jul 22)	Current Risk Score (Oct 22)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)	Key Sources of Assurance
	<p>delivering the Improvement plan</p> <p>If sufficient resources (capacity and capability) and where necessary additional resources are not allocated to the management and delivery of the improvement plan then this may result in officer fatigue, loss of motivation and the programme will fail to deliver all of its objectives.</p>					<ul style="list-style-type: none"> Resource gaps / pressures associated with actions within the Improvement Plan have been identified Council on 07/06/22 approved Use of Improvement & Capacity Reserve and 2021/22 underspend allocated to Improvement Plan actions Resource issues and risks associated with the Improvement Plan to reviewed monthly by Leadership Team and Register maintained Appointment of interim corporate transformation capacity to establish programme and project management governance arrangements, as well as moving forward key transformational activity <p>Further Actions</p> <ul style="list-style-type: none"> Establishment of dedicated Programme Management Office Recruitment to posts following allocation of funding 	
IP4	<p>Project and risk governance assurance arrangements</p> <p>If a robust assurance framework is not put in place to in respect of project assurance, including detailing roles and responsibilities of various stakeholders (eg Cabinet, Scrutiny, ARAC, partners, IB, etc) then the council may be unable to effectively monitor and evidence the improvement required.</p>	6 Green	6 Green	3 (green)		<p>Current and Ongoing Controls</p> <ul style="list-style-type: none"> Terms of Reference for Improvement Plan Review Meeting in place Governance approach included within Council report 07/06/22 Risk identification has taken place Agreement for Grant Thornton, LGA and CIPFA to review progress regularly Improvement Plan Risk Register in place Terms of Reference for internal Improvement Plan Review Meeting 	As above


Risk Ref	Risk Title and Description	Previous Risk Score (Jul 22)	Current Risk Score (Oct 22)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)	Key Sources of Assurance
						<p>updated to reflect government intervention, single Improvement Plan and assurance framework including role of Scrutiny and Audit Committees.</p> <ul style="list-style-type: none"> • Roles of Cabinet, Scrutiny and Audit agreed with Chairs • Quarterly reports to Cabinet, Audit and Scrutiny presented in September. <p>Further Actions</p> <ul style="list-style-type: none"> • Quarterly Reports to Scrutiny, Audit and Cabinet in December 2022 • Review update visits by CIPFA arranged for November 2022 • Quarterly Report to Scrutiny to focus on Culture Theme and provide assurance on council's approach to engaging 'hard to reach' staff • Review update visits by GT and LGA in September/October 2022 	
IP5	<p>Communication Strategy If a robust communications strategy is not put in place detailing how, when and what information is shared with the various internal and external stakeholders, then not everyone will be aware of their respective roles and responsibilities for delivering the improvement plan and effective service delivery. In addition, the DLUHC may lose confidence in the council's ability to improve resulting in extended/ additional intervention.</p>	8 (Amber)	8 (Amber)	4 (green)		<p>Current and Ongoing Controls</p> <ul style="list-style-type: none"> • Communications Approach set out in Improvement Plan approved by Council 07/06/22 • Key messages document for stakeholders in place • Regular PMO/Communications meetings to ensure key messages are embedded within internal and external communications <p>Further Actions</p> <ul style="list-style-type: none"> • Communications plan prepared including specific activities e.g. Live event, Improvement Plan briefings 	As above

Risk Ref	Risk Title and Description	Previous Risk Score (Jul 22)	Current Risk Score (Oct 22)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)	Key Sources of Assurance
						<ul style="list-style-type: none"> Communication with stakeholders to share details of Improvement Plan All staff briefing in November with update on IP 	
IP6	<p>Investment and Financial Resources</p> <p>If sufficient/ additional financial resources are not made available, and the IP is expected to be delivered from existing budgets then the IP may not be delivered within the necessary timescales or to scope.</p>	12 (Red)	8 (Amber)	8 (Amber)		<p>Current and Ongoing Controls</p> <ul style="list-style-type: none"> Resource gaps / pressures associated with actions within the Improvement Plan identified Council on 07/06/22 approved use of Improvement & Capacity Reserve and 2021/22 underspend allocated to Improvement Plan actions Resource issues and risks associated with the Improvement Plan reviewed monthly by Leadership Team Appointment of interim corporate transformation capacity to establish programme and project management governance arrangements, as well as moving forward key transformational activity Regular monitoring of improvement plan is in place and key milestones are being delivered <p>Further Actions</p> <ul style="list-style-type: none"> Recruitment to posts following allocation of funding Review resource allocation to deliver the Improvement Plan and determine if there are any gaps Identify additional resources or reprioritise activity following identification of resource gaps 	As above

Risk Ref	Risk Title and Description	Previous Risk Score (Jul 22)	Current Risk Score (Oct 22)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)	Key Sources of Assurance
IP7	<p>Organisational Culture</p> <p>If the organisational culture does not change including improvement of member and officer relationships and political relationships, then this will impact the delivery of the IP objectives and the timescales within which delivery is achieved and may result in extended government intervention.</p>	8 (Amber)	8 (Amber)	4 (green)		<p>Current and Ongoing Controls</p> <ul style="list-style-type: none"> • Specific theme in place within Improvement Plan • Corporate Governance Theme timescales revised to allow for additional engagement activity around Corporate Governance changes • Regular meetings in place between senior members and officers to develop positive working relationships and information sharing • LGA training on officer/member relationships delivered in September 2022. • External consultant engaged to support development of desired values and behaviours, providing independent facilitation • Employee Engagement Survey results disseminated and discussed at DMTs and team meetings - action plans developed and monitored at LT <p>Further Actions</p> <ul style="list-style-type: none"> • Actions agreed for organisational culture theme following outcome of staff listening groups 	As above plus Employee Engagement Survey

Risk Ref	Risk Title and Description	Previous Risk Score (Jul 22)	Current Risk Score (Oct 22)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)	Key Sources of Assurance
						<ul style="list-style-type: none"> External Reviews to provide assurance 	
IP8	<p>Impact of Covid 19 on the Project Resources</p> <p>If there is a continued impact of Covid 19 on resource availability, then this will impact the programme delivery plan.</p>	6 (Green)	6 (Green)	3 (green)	↔	<p>Current and Ongoing Controls</p> <ul style="list-style-type: none"> PMO resourcing in place from within Service Improvement Resource gaps / pressures associated with actions within the Improvement Plan are being identified Regular monitoring of improvement plan is in place and key milestones are being delivered <p>Further Actions</p> <ul style="list-style-type: none"> Single dependencies to be identified within resourcing plan 	As above
IP9	<p>Constitutional Changes</p> <p>If key governance documents and procedures (such as the Financial Regulations, Land and Asset Disposal Policy, Procurement and Contract Procedure Rules, Scheme of Delegation, Code of Corporate Governance, etc) are not reviewed and updated to reflect the changes required then foundations for change will not</p>	9 (Amber)	9 (Amber)	3 (green)	↔	<p>Current and Ongoing Controls</p> <ul style="list-style-type: none"> Key corporate Governance Documents are being reviewed and are scheduled for approval in July 2022 and Autumn 2022 Engagement with Constitutional Working Group established as part of changes to governance arrangements Alignment of workstream with organisational culture theme through Officer participation 	As above

Risk Ref	Risk Title and Description	Previous Risk Score (Jul 22)	Current Risk Score (Oct 22)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)	Key Sources of Assurance
	be in place and progress will be limited.					<ul style="list-style-type: none"> Land and Asset Disposal Policy, Procurement & Contract Procedure Rules and Key Decision Thresholds approved by Council in July 2022 <p>Further Actions</p> <ul style="list-style-type: none"> Continued engagement with Members around proposed changes Approval of Corporate Governance Changes (including Scheme of Delegation and Financial Regulations) 	
IP10	<p>Performance Management Framework (PMF) and Data Quality</p> <p>If a robust PMF is not put in place and appropriate quality data captured then the council will be unable to effectively monitor and evidence improvement, delivery of the Improvement Plan and delivery of the Corporate Plan resulting in a failure to achieve the Council's objectives.</p>	12 (Red)	12 (Red)	8 (amber)		<p>Current and Ongoing Controls</p> <ul style="list-style-type: none"> Performance Management Framework approved in April 2022 Evidence of success outlined within each of the Improvement Plan themes focusing on outcomes for each theme Improvement Plan Monitoring approach approved by Council and regular monitoring in place Resources approved by Council to address staffing resources required to sustain PMF 2022/23 Quarter 1 Corporate Performance Report presented to Cabinet in September 2022 and Scrutiny in October 2022 Residents Survey and Budget Consultation exercise conducted in Summer 2022 to feed into PMF and 2023/24 service and financial planning Process in place for monthly and quarterly monitoring at corporate level 	As above

Risk Ref	Risk Title and Description	Previous Risk Score (Jul 22)	Current Risk Score (Oct 22)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)	Key Sources of Assurance
						Further Actions <ul style="list-style-type: none"> Evidence framework to be produced to support IP Agree corporate approach to consultation and engagement with residents, including regular residents survey. Report to Leadership Team due end November 2022 Recruitment to dedicated Corporate Performance Management posts 2022/23 Q2 Corporate Performance Report to include data on wider range of KPIs within the Corporate Plan PMF Development of customer experience metrics as part of Customer Journey Transformation Programme Performance Management System options appraisal and procurement to provide capability for performance management 	
IP11	Continued focus and resources allocated to historic issues If the council does not focus on the Improvement plan and corporate plan priorities and continues to focus and allocate resources on historic issues, then this will impact the timely delivery of both the Improvement Plan and Corporate Plan.	8 (Amber)	8 (Amber)	4 (green)		Current and Ongoing Controls <ul style="list-style-type: none"> Improvement Plan contains activity to be concluded, and lessons learnt embedding from historic issues Cabinet and Leadership Team approach to historic issues Regular monitoring of improvement plan is in place Progress on GT recommendations specifically related to the proper functioning of Scrutiny and Audit Committees. Further Actions	As above

Risk Ref	Risk Title and Description	Previous Risk Score (Jul 22)	Current Risk Score (Oct 22)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)	Key Sources of Assurance
						<ul style="list-style-type: none"> Grant Thornton review of progress against historical issues Lessons learnt framework to be introduced as part of continuous improvement plan. Lessons learnt to be collated relating to historic issues and shared across organisation 	
IP12	<p>Risk approach and progress monitoring (optimism bias):</p> <p>If the approach taken to risk scoring and/or progress monitoring against the delivery plans is unrealistic (e.g. being overly optimistic around progress and timescales or likelihood and severity of a risk) then there will be a failure to appropriately manage the programme and a loss of confidence in its delivery.</p>	9 (Amber)	9 (Amber)	6 (Green)	↔	<p>Current and Ongoing Controls</p> <ul style="list-style-type: none"> Corporate risk scoring definitions applied Definition in place for progress monitoring Red/Amber/Green progress monitoring for Improvement Plan Roles of Scrutiny and Audit confirmed Reports to Scrutiny and Audit Committees presented in September 2022 PMO reviewed use of RAG ratings for consistency and to ensure that progress monitoring is presenting a realistic view and reflecting risk associated with actions as well as progress against plans (September 2022). <p>Further Actions</p> <ul style="list-style-type: none"> External Reviews to provide assurance 	As above

Summary of Changes to the Improvement Plan – October 2022

1. The Improvement Plan is intended to be a live document updated to take account of progress and relevant changes. Changes are considered by Leadership Team on a quarterly basis. The October Improvement Plan Review Meeting included consideration of changes to the Improvement Plan.
2. The list of all changes is provided in Appendix 6b. Where new actions have been added to the Improvement Plan, these are displayed within the monitoring tool (Appendix 1) with green font colour.
3. The changes agreed are summarised as follow:
 - 3 changes made to descriptions of actions
 - 42 changes made to action delivery timescales
 - 1 new workstream has been added to reflect the priority of customer journey
 - 6 main-actions have been added
 - 29 sub-actions have been added
 - 28 assurance actions have been added to ensure that an approach / action is becoming embedded in the organisation
 - 8 actions were agreed as closed (see below)
4. The actions closed along with the rationale are as follows:

Change Ref	Action Title	Rationale for closure
81	Continue to adopt star chamber approach for Cabinet Members and Chief Officers as part of budget setting approach	Star Chambers all completed by 28th September. Approach will be used for future budget setting.
82	Ward and Casework Management	Main action to be incorporated within the new workstream focusing on customer experience
83	Deliver Member Development Programme including Finance Training Programme	This has moved into regular business of the Ethical Standards and Member Development Committee. Immediate requirements have been met for the purposes of the IP. ES&MDC review MDP on a regular basis.

86	Actions to respond to employee survey outcomes to be identified and embedded in improvement plan	Main action to close and new main action (to monitor Employee Engagement Survey Action Plan) will be added to Corporate Oversight- IP workstream.
87	A clear and joint message from Chief Executive and Leader regarding Officer and Elected Member relationship delivered	Comms messages have taken place and training sessions held have reinforced the messages around the relationship. Approach to action has been different to how drafted. Attendance records and engagement with training help demonstrate that message has been delivered.
119	Developing a model for locality working	Closure of main action to incorporate into 'Customer Journey Programme'
131	Refresh existing arrangements for arms-length companies	Workstream closure – only arms-length company is SCT and covered with contract mgmt arrangements. These are reported through PMF.

October All change control									
Change Number	Theme	Action reference	Action Title	Owner	Date Raised	Type of Change	If date change is required		Change/ Impact of change (incl. any dependencies)/ Reason for change
							Change date from	Change date to	
27	Decision Making	DM.B1.4	Revised Council Procedure Rules	Director - Law and Governance	8/15/2022 Updated 24/10/22	Change to delivery timescales (actions and milestones)	Jul-22	Nov-22	This item was missed from the July Change Control approvals and should have been put forward as a date change to October 2022. Further impacted by by-election, so revised end date is November 2022.
28	Partnership & Relationships	PR.C1.3	Develop Health & Wellbeing Strategy that builds on existing whole system approach to addressing health inequalities	Director - Adult Social Care	18/08/2022	Change of Delivery Lead(s)	N/A	N/A	Director of Adult Services requested that lead director be changed to Director of Public Health. Discussed and agreed with Director of Public Health on 18.8.22
29	Partnership & Relationships	PR.C1.4	Test adequacy of partnerships and integration through Health Outcomes Framework and system-wide thematic deep dives	Director - Adult Social Care	18/08/2033	Change of Delivery Lead(s)	N/A	N/A	Director of Adult Services requested that lead director be changed to Director of Public Health. Discussed and agreed with Director of Public Health on 18.8.22
30	Procurement & Commercial	PC.A4.1	Recovery Plan approved by Waste Management Board	Director - Borough Economy	25/08/2022	Change to delivery timescales (actions and milestones)	Jul-22	Oct-22	Resubmission to October waste Board is required due to further comments made on integrated street cleansing recovery plan within Service Delivery Plan
31	Corporate Oversight	CO.D2.4	KPIs and standards developed for financial services section	Director- Finance	16/09/2022	Change to delivery timescales (actions and milestones)	Aug-22	Oct-22	Some KPI's have been developed but these will be reviewed once Budget Holder survey is completed and results analysed. Likely to be in place by October.
32	Strategic Decision	SD.C1.2	Pilot of Town Co-ordinator role commences	Director- Housing	16/09/2022	Changes to objectives and deliverables	N/A	N/A	on hold - pending community hubs model. A revised set of actions will be required for this workstream (to be considered at next change control).
33	Partnership & Relationships	PR.D1.1	Corporate review of grant funding	Director- Housing	16/09/2022	Add - New Sub Actions	N/A	N/A	Revised set of actions will be required within next change control
34	Decision Making	DMA1.2	Council Decision to Implement 4-yearly election cycle	Director- Law & Governance	10/04/2022	Change to delivery timescales (actions and milestones)	N/a	November	Accurate monitoring of progress by date being included
35	Corporate Oversight	CO.B2.0	Single Improvement Plan Phase 2	Leadership Team	10/10/2022	Change to delivery timescales (actions and milestones)	June 22 - Jan 23	Start Dec 22 - March 23 for Council approval alongside quarterly monitoring	Phase 2 Plan to be informed by findings of External Reviews and SoS letter
36	Corporate Oversight	CO.C2.0	Budget Monitoring	Director- Finance	17/10/22	Add- New Assurance Action			Assurance Actions required to ensure approach embedded and that any issues are being addressed. Proposed actions: CO.C2.4 and CO.C2.5 (Quarterly Budget Monitoring Reports made to Leadership Team, Cabinet and Scrutiny; and Where budget pressures identified, assurance provided that action has/is being taken (monthly summary comment from S151 Officer / raise issues)
37	Corporate Oversight	CO.D2.3	Workforce development plan implemented for financial services section	Director- Finance	17/10/22	Change to delivery timescales (actions and milestones)			Slippage in delivery. Due to be completed in October, and therefore change control may not be required.
38	Corporate Oversight	CO.D3.3	Review of corporate debt recovery processes completed	Director- Finance	27/10/2022	Change to delivery timescales (actions and milestones)	Oct-22	01-Dec	Review underway but significant piece of work covering multiple teams so completion date now December 2022.

October All change control									
							If date change is required		
39	Corporate Oversight	CO.D2.5	Embed Finance Business Partner Role	Director- Finance	17/10/22	Add- New Assurance Action		Quarterly monitoring	Assurance action required to ensure that Business Partner Role is having a positive impact. Assurance Action: Performance against KPIs for financial services section - quarterly comment
40	Corporate Oversight	CO.D3.5	Implementation of Recommendations from CIPFa in relation to internal charges	Director- Finance	17/10/22	Change to delivery timescales (actions and milestones)	Start date from Aug 22. End date from Oct 22	Start date to: Oct 22 End Date to: TBC	Report not yet received from CIPFa.
41	Corporate Oversight	CO.D4.4	Resolve issues relating to completion and sign-off of accounts	Director- Finance	17/10/22	Add- New Assurance Action	Dates to be populated		Assurance that work undertaken to prepare for completion of accounts has helped resolve issues raised by GT. Assurance action proposed: GT sign-off of 2020/21 Accounts (assurance that previous issues raised have been resolved)
42	Corporate Oversight	CO.D4.5	Resolve issues relating to completion and sign-off of accounts	Director- Finance	17/10/22	Add- New Assurance Action	Dates to be populated		Assurance that processes for completion of accounts are becoming embedded. Assurance action proposed: Preparation of Draft Accounts for 2021/2022
43	Corporate Oversight	CO.D4.6	Resolve issues relating to completion and sign-off of accounts	Director- Finance	17/10/22	Add- New Assurance Action	Dates to be populated		Assurance that any new issues raised are resolved. Assurance action proposed: GT sign-off of 2021/22 Accounts
44	Strategic Decision	SD.D1.1	Review concluded: Review of MTFP	Director- Finance	17/10/22	Change to delivery timescales (actions and milestones)	October 2022	Nov 2022	Later Cabinet Date due to by-election
45	Strategic Decision	SD.D1.2	Approval of MTFP and Capital Strategy	Director- Finance	17/10/22	Change to delivery timescales (actions and milestones)	Oct 2022	Nov 2022	Later Cabinet Date due to by-election
46	Strategic Decision	SD.D1.3	Approval of MTFP and Capital Strategy	Director- Finance	17/10/22	Add- New Assurance Action	Feb-23	and annually thereafter	Assurance action proposed: Budget Report to Cabinet (2023-2026) reflects funding gaps identified in MTFP
47	Strategic Decision	SD.D1.4	Approval of MTFP and Capital Strategy	Director- Finance	17/10/22	Add- New Assurance Action	October 2023	and annually thereafter	Assurance action proposed: MTFP and Capital Strategy refreshed and approved in October each year
48	Strategic Decision	SD.E1.3	Public Consultation outcomes inform budget setting	Director- Finance	17/10/22	Change to delivery timescales (actions and milestones)	Autumn 2022	Mar-23	Autumn date captures how consultation is used to inform MTFP. The consideration of the outcomes also need to be reflected in the Spring budget setting report
49	Strategic Decision	SD.E2.4	Public Consultation	Director - Business Strategy and Change	17/10/22	Add - New Sub Actions			New action to ensure surveys are resourced and repeated so that they become an embedded part of the strategic planning framework 'Proposal agreed for the future of resident consultation and engagement'
50	Strategic Decision	SD.E2.5	Public Consultation	Director - Business Strategy and Change	17/10/22	Add - New Sub Actions			New action to reflect focus group work following survey responses: 'Focus Groups held'
51	Organisational Culture	OCA1.3	Approval of document setting out the desired organisational culture	Director - Business Strategy and Change	17/10/22	Change to delivery timescales (actions and milestones)	Autumn 2022	Jan-23	Additional time for Lshp Team to comment on first draft (which will be presented in November) and refine.
52	Organisational Culture	OC.A2.1	Organisational Development Strategy and Plan Approved	Director - Business Strategy and Change	17/10/22	Change to action description			Action wording to change from 'Organisational Development Strategy' to 'Workforce Strategy approved'
53	Organisational Culture	OC.A2.1	Organisational Development Strategy and Plan Approved	Director - Business Strategy and Change	17/10/22	Change to delivery timescales (actions and milestones)	Start: tbc End: 2022	Start: Dec 2022 End: March 2023	Action dependent on establishing desired organisational culture which is proposed through change control to be re-profiled to January completion.

October All change control									
							If date change is required		
54	Organisational Culture	OC.B1.3	Effective decision-making training	Director - Law and Governance	19/10/22	Change to delivery timescales (actions and milestones)	Sep-22	Dec-22	Slippage in delivery of effective decision making training linked to the constitutional approvals being presented to Council in November.
55	Organisational Culture	OC.B1.7	Delivery of Directorship and Trusteeship Training	Director - Law and Governance	19/10/22	Add - New Sub Actions			New action required to reflect delivery of training. Existing action relates to procurement of training provider.
56	Organisational Culture	OC.B2.1	Management Development Programme Designed	Director - Business Strategy and Change	17/10/22	Change to action description			Action wording to change to 'Management and Development Programme Scope, Content and Budget agreed'
57	Organisational Culture	OC.B2.1	Management Development Programme Designed	Director - Business Strategy and Change	17/10/22	Change to delivery timescales (actions and milestones)	Start: Aug 2022 End: Dec 2022	Start: Oct 2022 End: April 2023	Broader management development programme needs to align to the Workforce Strategy (due for approval March 2023)
58	Organisational Culture	OC.B2.4	Management Development Programme Delivery	Director - Business Strategy and Change	17/10/22	Change to delivery timescales (actions and milestones)	Start: 2023 End: 2023	Start: April 2023 End: TBC	Provide a firmer start date. Was expressed as 2023.
59	Corporate Oversight	CO.D5.0				Add - New Main Action			Addition of New Workstream to reflect priority of Customer First and Customer Experience
60		OC.C1.1							
61	Partnership & Relationships	PRC1.1	Partnership structures in relation to transition from children's to adults in place	Director- Children and Education	20/10/22	Change to delivery timescales (actions and milestones)	in place	December	To reflect that sub-actions are being developed
62	Partnership & Relationships	PR.C1.6	Effective local structures: System-wide deep dives	Director - Adult Social Care	20/10/22	Add- New Assurance Action			To reflect that governance in place through HWB and Health Outcomes Framework. 'Receive a quarterly update from DPH and DAS to provide assurance that governance remains in place to test adequacy of partnerships through system-wide thematic deep dives and that any issues are being addressed by the partnership'
63	Strategic Decision	SD.A7.2	Early Help Strategy to be reviewed annually at the early help partnership board	Director- Children and Education	27/10/2022	Add- New Assurance Action			New assurance action proposed: Early Help Strategy to be reviewed annually at the early help partnership board- SD April 23 and annually
64	Strategic Decision	SD.A8.3	Parenting Strategy - yearly assurances provided to the Corporate Parenting Board	Director- Children and Education	27/10/2022	Add- New Assurance Action			New assurance action proposed: Corporate Parenting Strategy - yearly assurances provided to the Corporate Parenting Board. SD- Sept 23 and annually
65	Procurement & Commercial	PC.B3.0	Procurement of 2024 SEND Transport Contract	Director- Children and Education	20/10/22	Add- New Main Action			New main action- Procurement of 2024 SEND Transport Contract . SD Nov 22 ED Sept 24
66	Procurement & Commercial	PC.B3.1	Leadership review of lessons learnt from SEND 2	Director- Children and Education	20/10/22	Add - New Sub Actions			Leadership review of lessons learnt from SEND 2- Nov 22
67	Procurement & Commercial	PC.B3.2	Mobilise project team and establish project governance	Director- Children and Education	20/10/22	Add - New Sub Actions			Mobilise project team and establish project governance
68	Procurement & Commercial	PC.B3.3	Commence Procurement	Director- Children and Education	20/10/22	Add - New Sub Actions			Commence Procurement. sd- Spring 23
69	Partnership & Relationships	PR.A1.2	KPI Suite reviewed	Director- Children and Education	20/10/22	Change to delivery timescales (actions and milestones)	Summer 22	22-Dec	This forms part of the contract review for implementation on 1.4.23. KPI Suite review due to be complete by December .
70	Partnership & Relationships	PR.A1.3	Revised KPI suite agreed	Director- Children and Education	20/10/22	Change to delivery timescales (actions and milestones)	Summer 22	22-Dec	KPI suite will be agreed in December 22 for implmentation on 1/4/23
71	Partnership & Relationships	PR.A1.4	Review of Contract concludes	Director- Children and Education	20/10/22	Change to delivery timescales (actions and milestones)	Autumn 22	22-Dec	The revised contract will commence on 1.4.23. Negotiations have commenced between the Council and the Trust and both parties have shared responses to the contract review. The Contract Sum negotiations commenced 26.9.22.

October All change control									
							If date change is required		
72	Partnership & Relationships	PR.A1.5	Contract Review with DfE	Director- Children and Education	20/10/22	Change to delivery timescales (actions and milestones)	22-Nov	Spring 23	Change control to be put forward to adjust due date, as able to be flexible now Ofsted inspection has happened and do not propose to evoke the break clause.
73	Partnership & Relationships	PR.A1.6	Contract commences	Director- Children and Education	20/10/22	Add - New Sub Actions	n/a	n/a	Contract commences SD- april 23 ED april 23
74	Partnership & Relationships	PR.A1.7	New KPIs reported through PMF	Director- Children and Education	20/10/22	Add - New Sub Actions			New KPIs reported through PMF SD aug 23- ED Sept 23
75	Partnership & Relationships	PR.A2.3	Feedback provided on a 6 monthly basis on the continuation of regular cross - SMBC/SCT leadership team meetings.	Director- Children and Education	20/10/22	Add- New Assurance Action			Assurance action proposed: Feedback provided on a 6 monthly basis on the continuation of regular cross - SMBC/SCT leadership team meetings.
76	Partnership & Relationships	PR.A3.3	Twice yearly performance reports tabled at Children and Education Scrutiny Board	Director- Children and Education	20/10/22	Add- New Assurance Action			Assurance action proposed: Twice yearly performance reports tabled at Children and Education Scrutiny Board SD April 23- every 6 months (oct)
77	Partnership & Relationships	PR.C1.2 b	To broaden scope of partnership structures to explore the integration of adult services where appropriate	Director- Children and Education	20/10/22	Add - New Sub Actions			To broaden scope of partnership structures to explore the integration of adult services where appropriate- April 23 date
78	Decision Making	DM.B1.6	Revised Scheme of Delegations agreed	Director- Law & Governance	17/10/22	Change to delivery timescales (actions and milestones)	Oct-22	Nov-22	By-election has led to date being pushed back for Council
79	Decision Making	DM.C1.1	Review of scrutiny arrangements	Director- Law & Governance	17/10/22	Change to delivery timescales (actions and milestones)	22-Oct	22-Nov	By-election has led to date being pushed back for Council
80	Organisational Culture	OC.C1.1	Regular meetings of Commissioners, Monitoring Officer, Section 151 Officer and Chief Whips commence	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)	May-22	Nov-22	Delay to diarising meetings with the Whips
81	Organisational Culture	OC.C2.0	Continue to adopt star chamber approach for Cabinet Members and Chief Officers as part of budget setting approach	Director- Finance	27/10/2022	Closure of Main Action			Star Chambers all completed by 28th September. Approach will be used for future budget setting.
82	Organisational Culture	OC.C4.0	Ward and Casework Management	Director- Law & Governance	27/10/2022	Closure of Main Action			Main action to be incorporated within the new workstream focusing on customer experience
83	Organisational Culture	OC.D1.0	Deliver Member Development Programme including Finance Training Programme	Director- Law & Governance	27/10/2022	Closure of Main Action			main action to be closed. This has moved into regular business of the Ethical Standards and Member Development Committee. They review the MDP. Immediate requirements have been met for the purposes of the IP. ES&MDC review on a regular basis.
84	Organisational Culture	OC.D2.2	Effective decision-making training	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)	Sep-22	Dec-22	Being prepared for Nov/Dec linked to Council date slippage to Nov. Centre for Governance and Scrutiny are providing training in Nov.
85	Organisational Culture	OC.D2.5	Annual Refresher and inclusion in new Member induction	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)	Start : sep 22 End: Nov 22	Start: March 23 End:Summer 23	This action will commence in line with annual refresher of MDP. Change control- Change to Start: March 2023 for delivery following Annual Council: Summer 2023
86	Organisational Culture	OC.F1.0	Actions to respond to employee survey outcomes to be identified and embedded in improvement plan	Director - Business Strategy and Change	27/10/2022	Closure of Main Action			Main action to close and new main action will be added to Coporate Oversight- IP workstream.
87	Organisational Culture	OC.E1.0	A clear and joint message from Chief Executive and Leader regarding Officer and Elected Member relationship delivered	Director- Law & Governance	27/10/2022	Closure of Main Action			Comms messages have taken place and training sessions held have reinforced the messages around the relationship. Approach to action has been different to how drafted. Attendance records and engagement with training help demonstrate that message has been delivered.

October All change control									
							If date change is required		
88	Organisational Culture	OC.E2.1	Add new action: Internal comms channels used to deliver comms messages on an ongoing basis including: - All staff briefing - Team Talk Leadership Updates - Member bulletin - Director live events - Bostin People e-bulletin	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions			
89	Organisational Culture	OC.E2.2	Add new action: Chief Executive's 100 day Comms Plan launched	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions			
90	Organisational Culture	OC.E2.3	Add new action: Develop proposal for all staff conference	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions			
91	Organisational Culture	OC.E2.4	Add new action: Formal Employee Recognition Scheme - approach and resources identified	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions			
92	Organisational Culture	OC.E2.5	Add new action: Continuous feedback on effectiveness of internal comms	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions			
93	Corporate Oversight	CO.B1.4	New Action Added: Ongoing Monitoring of Improvement Plan (Monthly Monitoring by Leadership Team, Quarterly Monitoring by Cabinet, ARAC regular review of IP and IP Risk Register, Scrutiny regular review of IP)	Leadership team	27/10/2022	Add - New Sub Actions			
94	Corporate Oversight	CO.B1.5	New Action Added: 6 monthly report to Secretary of State	Leadership team	27/10/2022	Add - New Sub Actions			
95	Corporate Oversight	CO.B1.6	New main action: Employee Engagement Survey Action Plan monitored and reviewed by Leadership Team	Leadership team	27/10/2022	Add- New Main Action			
96	Corporate Oversight	CO.C1.3	New Action Added: Quarterly Performance Reports made to Cabinet	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions			
97	Corporate Oversight	CO.C1.4	New Action Added: Review Corporate KPIs for organisational health to reflect workforce strategy	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions			
98	Corporate Oversight	CO.C1.5	New Action Added: Review Corporate KPIs for customer experience to reflect customer experience programme	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions			
99	Corporate Oversight	CO.C2.4	New Assurance action Added: Quarterly Budget Monitoring Reports made to Leadership Team, Cabinet and Scrutiny	Director- Finance	27/10/2022	Add- New Assurance Action			
100	Corporate Oversight	CO.C2.5	New assurance action added: Where budget pressures identified, assurance provided that action has/is being taken (monthly summary comment from S151 Officer / raise issues)	Director- Finance	27/10/2022	Add- New Assurance Action			

October All change control									
							If date change is required		
101	Corporate Oversight	Co.D1.2	New action: Review of spans and layers across Council's managerial structures in line with LGA Guidance (likely to be incorporated within Target Operating Model Programme in due course)	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions			
102	Corporate Oversight	CO.D2.3	Workforce development plan implemented for financial services section	Director- Finance	27/10/2022	Change to delivery timescales (actions and milestones)	Sep-22	Nov-22	Slight slippage due to delay in interim resources starting.
103	Corporate Oversight	CO.D4.4	New assurance Action: GT sign-off of 2020/21 Accounts (assurance that previous issues raised have been resolved)	Director- Finance	27/10/2022	Add- New Assurance Action			one of milestone
104	Corporate Oversight	CO.D4.5	New assurance Action: Preparation of Draft Accounts for 2021/2022 (assurance that approach to completion and sign-off of final accounts is becoming embedded)	Director- Finance	27/10/2022	Add- New Assurance Action			one of milestone
105	Corporate Oversight	CO.E1.4	Programme and Project Management System Implementation	Director - Business Strategy and Change	27/10/2022	Change to delivery timescales (actions and milestones)	Late 22	Feb-23	Further exploration needed with a view to a pilot. End Date to be adjusted to Feb 2023 for implementation.
106	Corporate Oversight	CO.F5.0	Add new Main Action: Customer Journey Programme	Director - Business Strategy and Change	27/10/2022	Add- New Main Action			
107	Corporate Oversight	CO.F5.1	Add new action: Structure and Governance for Customer Experience Programme approved	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions			
108	Corporate Oversight	CO.F5.2	Add new action: Workstream Plans agreed (timeline, cost and resource) for 5 workstreams (fix the backlog, fix the OSS, customer experience strategy, contact centre/community hubs approach, technology)	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions			
109	Corporate Oversight	CO.F5.3	Add new action: Programme board in place (first programme board to involve ToR, scope of workstreams, nominations for resources for each workstream, and high level milestones)	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions			
110	Strategic Decision	SD.A1.2	Pipeline projects monitored on a 6-monthly basis	Director-Regeneration and Growth	27/10/2022	Add- New Assurance Action			Change actino to an assurance action to be monitred on a 6 montly basis
111	Strategic Decision	SD.A2.11	Corporate Asset Management Strategy Approved	Director-Regeneration and Growth	27/10/2022	Change to delivery timescales (actions and milestones)	Sep-22	Nov-22	Delay due to by-election
112	Strategic Decision	SD.A5.1	Commercial Strategy Approved	Director- Finance	27/10/2022	Change to delivery timescales (actions and milestones)	Oct	??	
113	Strategic Decision	SD.A5.2	Business Cases Presented for commercial workstreams	Director- Finance	27/10/2022	Change to delivery timescales (actions and milestones)			
114	Strategic Decision	SD.A7.2	Early Help Strategy to be reviewed annually at the early help partnership board	Director- Children and Education	27/10/2022	Add- New Assurance Action			
115	Strategic Decision	SD.A8.3	Corporate Parenting Strategy - yearly assurances provided to the Corporate Parenting Board	Director- Children and Education	27/10/2022	Add- New Assurance Action			

October All change control									
							If date change is required		
116	Strategic Decision	SD.B1.9	Review of Council EDI decision making process	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)	Autumn 22	Autumn 23	
117	Strategic Decision	SD.B1.10	Equality, Diversity and Inclusion Strategy approved	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)	Autumn 22	Autumn 23	
118	Strategic Decision	SD.B1.11	Embed equalities, diversity and inclusion within Member and Officer Development Programmes	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)	Early 23	Mar-24	
119	Strategic Decision	SD.C1.0	Developing a model for locality working	Director- Housing	27/10/2022	Closure of Main Action			Closurere of main action to incoproparate in to 'Customer Journey Programme'
120	Strategic Decision	SD.C1.3	Customer Access Strategy Development Commences	Director- Housing	27/10/2022	Add- New Main Action			Action to become main action SD.F1.0 within Customer Journey Workstream 'Customer Journey Strategy Approved'
121	Strategic Decision	SD.D1.2	Approval of MTFP and Capital Strategy	Director- Finance	27/10/2022	Change to delivery timescales (actions and milestones)	Autumn 22	Nov-22	date change due to by-election
122	Strategic Decision	SD.D1.3	New Assurance Action (strategy implemented through budget plans): Budget Report to Cabinet (2023-2026) reflects funding gaps identified in MTFP	Director- Finance	27/10/2022	Add- New Assurance Action			
123	Strategic Decision	SD.D1.4	New Assurance Action (embedding the approach): MTFP and Capital Strategy refreshed and approved in October each year	Director- Finance	27/10/2022	Add- New Assurance Action			
124	Strategic Decision	SD.E1.3	Public Consultation outcomes inform budget setting	Director- Finance	27/10/2022	Change to delivery timescales (actions and milestones)	Autumn 22	Feb-23	Date change to reflect Feb 2023 Budget Report needing to reflect consideration of consultation outcomes
125	Strategic Decision	SD.E2.4	New action: Proposal approved for the next phase of resident consultation and engagement and budget consultation	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions			
126	Strategic Decision	SD.E2.5	New action: Focus Groups held to explore responses to key areas raised in Residents Survey, Shape survey and budget consultation.	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions			
127	Strategic Decision	SD.F1.0	New Main Action: Customer Journey Strategy	Director - Business Strategy and Change	27/10/2022	Add- New Main Action			
128	Decision Making	DM.B1.1	Effective Decision Making Training	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)	Sep-22	Dec-22	Training will take place Nov/Dec. Change control to amend delivery date to December 2022.
129	Decision Making	DM.B1.3	Revised Financial Regs agreed	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)	Oct-22	Dec-22	The remaining areas of the Fin Regs that need reviewing will slip to December Council. As the key changes have already been approved the risk/impact of the slippage on the outstanding bits is very low.
130	Decision Making	DM.B1.6	Revised Scheme of Delegations agreed	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)	Oct-22	Nov-22	Due at November Council (slippage due to change of date for Council)
131	Decision Making	DM.B2.0	Refresh existing arrangements for arms-length companies	Director- Law & Governance	27/10/2022	Closure of Main Action			Wokstream closure - only one is SCT and covered with contract mgmt
132	Decision Making	DM.C1.1	Review of scrutiny arrangements	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)	Oct-22	Nov-22	Slippage due to by-election. Scrutiny Review was approved by scrutiny in September. Report due to Council in November.
133	Decision Making	DM.C4.0	ARAC report and recommendations in relation to SEND Transport	Director- Law & Governance	27/10/2022	Closure of Main Action			closed on basis that recommendations fulfilled through procurement and contracts that went live in Sep. Workstream is also contained within procurement and commercial for ongoing milestones for next procurement

Change to Action Description							
Change Number	Theme	Action reference	Action Title	Owner	Date Raised	Type of Change	Change/ Impact of change (incl. any dependencies)/ Reason for change
32	Strategic Decision	SD.C1.2	Pilot of Town Co-ordinator role commences	Director Housing	16/09/2022	Changes to objectives and deliverables	on hold - pending community hubs model. A revised set of actions will be required for this workstream (to be considered at next change control).
52	Organisational Culture	OC.A2.1	Organisational Development Strategy and Plan Approved	Director - Business Strategy and Change	17/10/22	Change to action description	Action wording to change from 'Organisational Development Strategy' to 'Workforce Strategy approved'
56	Organisational Culture	OC.B2.1	Management Development Programme Designed	Director - Business Strategy and Change	17/10/22	Change to action description	Action wording to change to 'Management and Development Programme Scope, Content and Budget agreed'

Change to Delivery Date									
Change Number	Theme	Action reference	Action Title	Owner	Date Raised	Type of Change	Change date from	Change date to	Change/ Impact of change (incl. any dependencies)/ Reason for change
27	Decision Making	DM.B1.4	Revised Council Procedure Rules	Director Law and Governance	8/15/2022 Updated 24/10/22	Change to delivery timescales (actions and milestones)	Jul-22	Nov-22	This item was missed from the July Change Control approvals and should have been put forward as a date change to October 2022. Further impacted by by-election, so revised end date is November 2022.
30	Procurement & Commercial	PC.A4.1	Recovery Plan approved by Waste Management Board	Director Borough Economy	25/08/2022	Change to delivery timescales (actions and milestones)	Jul-22	Oct-22	Resubmission to October waste Board is required due to further comments made on integrated street cleansing recovery plan within Service Delivery Plan
31	Corporate Oversight	CO.D2.4	KPIs and standards developed for financial services section	Director Finance	16/09/2022	Change to delivery timescales (actions and milestones)	Aug-22	Oct-22	Some KPI's have been developed but these will be reviewed once Budget Holder survey is completed and results analysed. Likely to be in place by October.
34	Decision Making	DMA1.2	Council Decision to Implement 4-yearly election cycle	Director Law and Governance	10/04/2022	Change to delivery timescales (actions and milestones)	N/a	November	Accurate monitoring of progress by date being included
35	Corporate Oversight	CO.B2.0	Single Improvement Plan Phase 2	Leadership Team	10/10/2022	Change to delivery timescales (actions and milestones)	June 22 - Jan 23	Start Dec 22 March 23 for Council approval alongside quarterly monitoring	Phase 2 Plan to be informed by findings of External Reviews and SoS letter
37	Corporate Oversight	CO.D2.3	Workforce development plan implemented for financial services section	Director - Finance	17/10/22	Change to delivery timescales (actions and milestones)			Slippage in delivery. Due to be completed in October, and therefore change control may not be required.
38	Corporate Oversight	CO.D3.3	Review of corporate debt recovery processes completed	Director- Finance	27/10/2022	Change to delivery timescales (actions and milestones)	Oct-22	01-Dec	Review underway but significant piece of work covering multiple teams so completion date now December 2022.
40	Corporate Oversight	CO.D3.5	Implementation of Recommendations from CIP	Director - Finance	17/10/22	Change to delivery timescales (actions and milestones)	Start date from Aug 22. End date from Oct 22	Start date to: Oct 22 End Date to: TBC	Report not yet received from CIPFa.
44	Strategic Decision	SD.D1.1	Review concluded: Review of MTFP	Director - Finance	17/10/22	Change to delivery timescales (actions and milestones)	October 2022	Nov 2022	Later Cabinet Date due to by-election
45	Strategic Decision	SD.D1.2	Approval of MTFP and Capital Strategy	Director - Finance	17/10/22	Change to delivery timescales (actions and milestones)	Oct 2022	Nov 2022	Later Cabinet Date due to by-election
48	Strategic Decision	SD.E1.3	Public Consultation outcomes inform budget set	Director - Finance	17/10/22	Change to delivery timescales (actions and milestones)	Autumn 2022	Mar-23	Autumn date captures how consultation is used to inform MTFP. The consideration of the outcomes also need to be reflected in the Spring budget setting report
51	Organisational Culture	OCA1.3	Approval of document setting out the desired organisational culture	Director - Business Strategy and Change	17/10/22	Change to delivery timescales (actions and milestones)	Autumn 2022	Jan-23	Additional time for Lshp Team to comment on first draft (which will be presented in November) and refine.
53	Organisational Culture	OC.A2.1	Organisational Development Strategy and Plan Approved	Director - Business Strategy and Change	17/10/22	Change to delivery timescales (actions and milestones)	Start: tbc End: 2022	Start: Dec 2022 End: March 2023	Action dependent on establishing desired organisational culture which is proposed through change control to be re-profiled to January completion.
54	Organisational Culture	OC.B1.3	Effective decision-making training	Director - Law and Governance	19/10/22	Change to delivery timescales (actions and milestones)	Sep-22	Dec-22	Slippage in delivery of effective decision making training linked to the constitutional approvals being presented to Council in November.

Change to Delivery Date										
Change Number	Theme	Action reference	Action Title	Owner	Date Raised	Type of Change	If date change is required please state from and to	Change date from	Change date to	Change/ Impact of change (incl. any dependencies)/ Reason for change
57	Organisational Culture	OC.B2.1	Management Development Programme Designed	Director - Business Strategy and Change	17/10/22	Change to delivery timescales (actions and milestones)	Start: Aug 2022 End: Dec 2022	Start: Oct 2022 End: April 2023		Broader management development programme needs to align to the Workforce Strategy (due for approval March 2023)
58	Organisational Culture	OC.B2.4	Management Development Programme Delivery	Director - Business Strategy and Change	17/10/22	Change to delivery timescales (actions and milestones)	Start: 2023 End: 2023	Start: April 2023 End: TBC		Provide a firmer start date. Was expressed as 2023.
61	Partnership & Relationships	PRC1.1	Partnership structures in relation to transition from children's to adults in place	Director- Children and Education	20/10/22	Change to delivery timescales (actions and milestones)	in place	December		To reflect that sub-actions are being developed
69	Partnership & Relationships	PR.A1.2	KPI Suite reviewed	Director- Children and Education	20/10/22	Change to delivery timescales (actions and milestones)	Summer 22	22-Dec		This forms part of the contract review for implementation on 1.4.23. KPI Suite review due to be complete by December .
70	Partnership & Relationships	PR.A1.3	Revised KPI suite agreed	Director- Children and Education	20/10/22	Change to delivery timescales (actions and milestones)	Summer 22	22-Dec		KPI suite will be agreed in December 22 for implementation on 1/4/23
71	Partnership & Relationships	PR.A1.4	Review of Contract concludes	Director- Children and Education	20/10/22	Change to delivery timescales (actions and milestones)	Autumn 22	22-Dec		The revised contract will commence on 1.4.23. Negotiations have commenced between the Council and the Trust and both parties have shared responses to the contract review. The Contract Sum negotiations commenced 26.9.22.
72	Partnership & Relationships	PR.A1.5	Contract Review with DfE	Director- Children and Education	20/10/22	Change to delivery timescales (actions and milestones)	22-Nov	Spring 23		Change control to be put forward to adjust due date, as able to be flexible now Ofsted inspection has happened and do not propose to evoke the break clause.
78	Decision Making	DM.B1.6	Revised Scheme of Delegations agreed	Director- Law & Governance	17/10/22	Change to delivery timescales (actions and milestones)	Oct-22	Nov-22		By-election has led to date being pushed back for Council
79	Decision Making	DM.C1.1	Review of scrutiny arrangements	Director- Law & Governance	17/10/22	Change to delivery timescales (actions and milestones)	22-Oct	Nov-22		By-election has led to date being pushed back for Council
80	Organisational Culture	OC.C1.1	Regular meetings of Commissioners, Monitoring Officer, Section 151 Officer and Chief Whips commence	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)	May-22	Nov-22		Delay to diarising meetings with the Whips
84	Organisational Culture	OC.D2.2	Effective decision-making training	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)	Sep-22	Dec-22		Being prepared for Nov/Dec linked to Council date slippage to Nov. Centre for Governance and Scrutiny are providing training in Nov.
85	Organisational Culture	OC.D2.5	Annual Refresher and inclusion in new Member induction	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)	Start : sep 22 End: Nov 22	Start: March 23 End:Summer 23		This action will commence in line with annual refresher of MDP. Change control- Change to Start: March 2023 for delivery following Annual Council: Summer 2023
102	Corporate Oversight	CO.D2.3	Workforce development plan implemented for financial services section	Director- Finance	27/10/2022	Change to delivery timescales (actions and milestones)	Sep-22	Nov-22		Slight slippage due to delay in interim resources starting.
105	Corporate Oversight	CO.E1.4	Programme and Project Management System	Director- Business Strategy & Change	27/10/2022	Change to delivery timescales (actions and milestones)	Late 22	Feb-23		Further exploration needed with a view to a pilot. End Date to be adjusted to Feb 2023 for implementation.
111	Strategic Decision	SD.A2.11	Corporate Asset Management Strategy Approved	Director- Regeneration and Growth	27/10/2022	Change to delivery timescales (actions and milestones)	Sep-22	Nov-22		Delay due to by-election
112	Strategic Decision	SD.A5.1	Commercial Strategy Approved	Director- Finance	27/10/2022	Change to delivery timescales (actions and milestones)	Oct	tbc		
113	Strategic Decision	SD.A5.2	Business Cases Presented for commercial workstreams	Director- Finance	27/10/2022	Change to delivery timescales (actions and milestones)		tbc		
116	Strategic Decision	SD.B1.9	Review of Council EDI decision making process	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)	Autumn 22	Autumn 23		

Change to Delivery Date										
Change Number	Theme	Action reference	Action Title	Owner	Date Raised	Type of Change	If date change is required please state from and to	Change date from	Change date to	Change/ Impact of change (incl. any dependencies)/ Reason for change
117	Strategic Decision	SD.B1.10	Equality, Diversity and Inclusion Strategy approved	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)		Autumn 22	Autumn 23	
118	Strategic Decision	SD.B1.11	Embed equalities, diversity and inclusion within Member and Officer Development Programmes	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)		Early 23	Mar-24	
121	Strategic Decision	SD.D1.2	Approval of MTFP and Capital Strategy	Director- Finance	27/10/2022	Change to delivery timescales (actions and milestones)		Autumn 22	Nov-22	date change due to by-election
124	Strategic Decision	SD.E1.3	Public Consultation outcomes inform budget setting	Director- Finance	27/10/2022	Change to delivery timescales (actions and milestones)		Autumn 22	Nov-22	Date change to reflect Feb 2023 Budget Report needing to reflect consideration of consultation outcomes
128	Decision Making	DM.B1.1	Effective Decision Making Training	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)		Sep-22	Dec-22	Training will take place Nov/Dec. Change control to amend delivery date to December 2022.
129	Decision Making	DM.B1.3	Revised Financial Regs agreed	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)		Oct-22	Dec-22	The remaining areas of the Fin Regs that need reviewing will slip to December Council. As the key changes have already been approved the risk/impact of the slippage on the outstanding bits is very low.
130	Decision Making	DM.B1.6	Revised Scheme of Delegations agreed	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)		Oct-22	Nov-22	Due at November Council (slippage due to change of date for Council)
132	Decision Making	DM.C1.1	Review of scrutiny arrangements	Director- Law & Governance	27/10/2022	Change to delivery timescales (actions and milestones)		Oct-22	Nov-22	Scrutiny Review was approved by scrutiny in September. Report due to Council in November. (slippage due to by-election)
139	Procurement & Commercial	PC.B1.6	Contract Monitoring Arrangements in Place	Director- Finance	27/10/2022	Change to delivery timescales (actions and milestones)		Sep-22	Jan-23	Contracts are being monitored. Contract monitoring arrangements to be confirmed in Jan 23
144	Procurement & Commercial	PC.C1.1	Options Appraisal	"Director- Business Strategy & Change"	27/10/2022	Change to delivery timescales (actions and milestones)		Sep-22	Mar-23	Not progressed past soft market testing of performance management system- further demonstration with another provider. Size and scale of system to be considered for scope of project.

Actions Proposed for Closure							
Change Number	Theme	Action reference	Action Title	Owner	Date Raised	Type of Change	Change/ Impact of change (incl. any dependencies)/ Reason for change
81	Organisational Culture	OC.C2.0	Continue to adopt star chamber approach for Cabinet Members and Chief Officers as part of budget setting approach	Director- Finance	27/10/2022	Closure of Main Action	Star Chambers all completed by 28th September. Approach will be used for future budget setting.
82	Organisational Culture	OC.C4.0	Ward and Casework Management	Director- Law & Governance	27/10/2022	Closure of Main Action	Main action to be incorporated within the new workstream focusing on customer experience
83	Organisational Culture	OC.D1.0	Deliver Member Development Programme including Finance Training Programme	Director- Law & Governance	27/10/2022	Closure of Main Action	main action to be closed. This has moved into regular business of the Ethical Standards and Member Development Committee. They review the MDP. Immediate requirements have been met for the purposes of the IP. ES&MDC review on a regular basis.
86	Organisational Culture	OC.F1.0	Actions to respond to employee survey outcomes to be identified and embedded in improvement plan	Director - Business Strategy and Change	27/10/2022	Closure of Main Action	Main action to close and new main action will be added to Coporate Oversight- IP workstream.
87	Organisational Culture	OC.E1.0	A clear and joint message from Chief Executive and Leader regarding Officer and Elected Member relationship delivered	Director- Law & Governance	27/10/2022	Closure of Main Action	Comms messages have taken place and training sessions held have reinforced the messages around the relationship. Approach to action has been different to how drafted. Attendance records and engagement with training help demonstrate that message has been delivered.
119	Strategic Decision	SD.C1.0	Developing a model for locality working	Director- Housing	27/10/2022	Closure of Main Action	Closurer of main action to incopporate in to 'Customer Journey Programme'
131	Decision Making	DM.B2.0	Refresh existing arrangements for arms-length companies	Director- Law & Governance	27/10/2022	Closure of Main Action	Wokstream closure - only one is SCT and covered with contract mgmt
133	Decision Making	DM.C4.0	ARAC report and recommendations in relation to SEND Transport	Director- Law & Governance	27/10/2022	Closure of Main Action	closed on basis that recommendations fulfilled through 2022 procurement and contract go live from Sep. Ongoing actions contained within workstream within procurement and commercial

Add Main, Sub & Assurance Actions							
Change Number	Theme	Action reference	Action Title	Owner	Date Raised	Type of Change	Change/ Impact of change (incl. any dependencies)/ Reason for change
33	Partnership & Relationships	PR.D1.1	Corporate review of grant funding	Director Housing	16/09/2022	Add - New Sub Actions	Revised set of actions will be required within next change control
36	Corporate Oversight	CO.C2.0	Budget Monitoring	Director - Finance	17/10/22	Add- New Assurance Action	Assurance Actions required to ensure approach embedded and that any issues are being addressed. Proposed actions: CO.C2.4 and CO.C2.5 (Quarterly Budget Monitoring Reports made to Leadership Team, Cabinet and Scrutiny; and Where budget pressures identified, assurance provided that action has/is being taken (monthly summary comment from S151 Officer / raise issues)
39	Corporate Oversight	CO.D2.5	Embed Finance Business Partner Role	Director - Finance	17/10/22	Add- New Assurance Action	Assurance action required to ensure that Business Partner Role is having a positive impact. Assurance Action: Performance against KPIs for financial services section - quarterly comment
41	Corporate Oversight	CO.D4.4	Resolve issues relating to completion and sign-off of accounts	Director - Finance	17/10/22	Add- New Assurance Action	Assurance that work undertaken to prepare for completion of accounts has helped resolve issues raised by GT. Assurance action proposed: GT sign-off of 2020/21 Accounts (assurance that previous issues raised have been resolved)
42	Corporate Oversight	CO.D4.5	Resolve issues relating to completion and sign-off of accounts	Director - Finance	17/10/22	Add- New Assurance Action	Assurance that processes for completion of accounts are becoming embedded. Assurance action proposed: Preparation of Draft Accounts for 2021/2022
43	Corporate Oversight	CO.D4.6	Resolve issues relating to completion and sign-off of accounts	Director - Finance	17/10/22	Add- New Assurance Action	Assurance that any new issues raised are resolved. Assurance action proposed: GT sign-off of 2021/22 Accounts
46	Strategic Decision	SD.D1.3	Approval of MTFP and Capital Strategy	Director - Finance	17/10/22	Add- New Assurance Action	Assurance action proposed: Budget Report to Cabinet (2023-2026) reflects funding gaps identified in MTFP
47	Strategic Decision	SD.D1.4	Approval of MTFP and Capital Strategy	Director - Finance	17/10/22	Add- New Assurance Action	Assurance action proposed: MTFP and Capital Strategy refreshed and approved in October each year
49	Strategic Decision	SD.E2.4	Public Consultation	Director - Business Strategy and Change	17/10/22	Add - New Sub Actions	New action to ensure surveys are resourced and repeated so that they become an embedded part of the strategic planning framework 'Proposal agreed for the future of resident consultation and engagement'
50	Strategic Decision	SD.E2.5	Public Consultation	Director - Business Strategy and Change	17/10/22	Add - New Sub Actions	New action to reflect focus group work following survey responses: 'Focus Groups held'

Add Main, Sub & Assurance Actions							
Change Number	Theme	Action reference	Action Title	Owner	Date Raised	Type of Change	Change/ Impact of change (incl. any dependencies)/ Reason for change
55	Organisational Culture	OC.B1.7	Delivery of Directorship and Trusteeship Training	Director - Law and Governance	19/10/22	Add - New Sub Actions	New action required to reflect delivery of training. Existing action relates to procurement of training provider.
62	Partnership & Relationships	PR.C1.6	Effective local structures: System-wide deep dives	Director - Adult Social Care	20/10/22	Add- New Assurance Action	To reflect that governance in place through HWB and Health Outcomes Framework. 'Receive a quarterly update from DPH and DAS to provide assurance that governance remains in place to test adequacy of partnerships through system-wide thematic deep dives and that any issues are being addressed by the partnership'
63	Strategic Decision	SD.A7.2	Early Help Strategy to be reviewed annually at the early help partnership board	Director- Children and Education	27/10/2022	Add- New Assurance Action	New assurance action proposed: Early Help Strategy to be reviewed annually at the early help partnership board- SD April 23 and annually
64	Strategic Decision	SD.A8.3	Parenting Strategy - yearly assurances provided to the Corporate Parenting Board	Director- Children and Education	27/10/2022	Add- New Assurance Action	New assurance action proposed: Corporate Parenting Strategy - yearly assurances provided to the Corporate Parenting Board. SD- Sept 23 and annually
65	Procurement & Commercial	PC.B3.0	Procurement of 2024 SEND Transport Contract	Director- Children and Education	20/10/22	Add- New Main Action	New main action- Procurement of 2024 SEND Transport Contract . SD Nov 22 ED Sept 24
66	Procurement & Commercial	PC.B3.1	Leadership review of lessons learnt from SEND 2	Director- Children and Education	20/10/22	Add - New Sub Actions	Leadership review of lessons learnt from SEND 2- Nov 22
67	Procurement & Commercial	PC.B3.2	Mobilise project team and establish project governance	Director- Children and Education	20/10/22	Add - New Sub Actions	Mobilise project team and establish project governance
68	Procurement & Commercial	PC.B3.3	Commence Procurement	Director- Children and Education	20/10/22	Add - New Sub Actions	Commence Procurement. sd- Spring 23
73	Partnership & Relationships	PR.A1.6	Contract commences	Director- Children and Education	20/10/22	Add - New Sub Actions	Contract commences SD- april 23 ED april 23
74	Partnership & Relationships	PR.A1.7	New KPIs reported through PMF	Director- Children and Education	20/10/22	Add - New Sub Actions	New KPIs reported through PMF SD aug 23- ED Sept 23
75	Partnership & Relationships	PR.A2.3	Feedback provided on a 6 monthly basis on the continuation of regular cross - SMBC/SCT leadership team meetings.	Director- Children and Education	20/10/22	Add- New Assurance Action	Assurance action proposed: Feedback provided on a 6 monthly basis on the continuation of regular cross - SMBC/SCT leadership team meetings.
76	Partnership & Relationships	PR.A3.3	Twice yearly performance reports tabled at Children and Education Scrutiny Board	Director- Children and Education	20/10/22	Add- New Assurance Action	Assurance action proposed: Twice yearly performance reports tabled at Children and Education Scrutiny Board SD April 23- every 6 months (oct)
77	Partnership & Relationships	PR.C1.2 b	To broaden scope of partnership structures to explore the integration of adult services where appropriate	Director- Children and Education	20/10/22	Add - New Sub Actions	To broaden scope of partnership structures to explore the integration of adult services where appropriate- April 23 date

Add Main, Sub & Assurance Actions							
Change Number	Theme	Action reference	Action Title	Owner	Date Raised	Type of Change	Change/ Impact of change (incl. any dependencies)/ Reason for change
88	Organisational Culture	OC.E2.1	Add new action: Internal comms channels used to deliver comms messages on an ongoing basis including: - All staff briefing - Team Talk Leadership Updates - Member bulletin - Director live events - Bostin People e-bulletin	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions	
89	Organisational Culture	OC.E2.2	Add new action: Chief Executive's 100 day Comms Plan launched	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions	
90	Organisational Culture	OC.E2.3	Add new action: Develop proposal for all staff conference	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions	
91	Organisational Culture	OC.E2.4	Add new action: Formal Employee Recognition Scheme - approach and resources identified	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions	
92	Organisational Culture	OC.E2.5	Add new action: Continuous feedback on effectiveness of internal comms	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions	
93	Corporate Oversight	CO.B1.4	New Action Added: Ongoing Monitoring of Improvement Plan (Monthly Monitoring by Leadership Team, Quarterly Monitoring by Cabinet, ARAC regular review of IP and IP Risk Register, Scrutiny regular review of IP)	Leadership team	27/10/2022	Add - New Sub Actions	
94	Corporate Oversight	CO.B1.5	New Action Added: 6 monthly report to Secretary of State	Leadership team	27/10/2022	Add - New Sub Actions	
95	Corporate Oversight	CO.B1.6	New main action: Employee Engagement Survey Action Plan monitored and reviewed by Leadership Team	Leadership team	27/10/2022	Add- New Main Action	
96	Corporate Oversight	CO.C1.3	New Action Added: Quarterly Performance Reports made to Cabinet	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions	
97	Corporate Oversight	CO.C1.4	New Action Added: Review Corporate KPIs for organisational health to reflect workforce strategy	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions	
98	Corporate Oversight	CO.C1.5	New Action Added: Review Corporate KPIs for customer experience to reflect customer experience programme	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions	

Add Main, Sub & Assurance Actions							
Change Number	Theme	Action reference	Action Title	Owner	Date Raised	Type of Change	Change/ Impact of change (incl. any dependencies)/ Reason for change
99	Corporate Oversight	CO.C2.4	New Assurance action Added: Quarterly Budget Monitoring Reports made to Leadership Team, Cabinet and Scrutiny	Director- Finance	27/10/2022	Add- New Assurance Action	
100	Corporate Oversight	CO.C2.5	New assurance action added: Where budget pressures identified, assurance provided that action has/is being taken (monthly summary comment from S151 Officer / raise issues)	Director- Finance	27/10/2022	Add- New Assurance Action	
101	Corporate Oversight	Co.D1.2	New action: Review of spans and layers across Council's managerial structures in line with LGA Guidance (likely to be incorporated within Target Operating Model Programme in due course)	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions	
103	Corporate Oversight	CO.D4.4	New assurance Action: GT sign-off of 2020/21 Accounts (assurance that previous issues raised have been resolved)	Director- Finance	27/10/2022	Add- New Assurance Action	one off milestone
104	Corporate Oversight	CO.D4.5	New assurance Action: Preparation of Draft Accounts for 2021/2022 (assurance that approach to completion and sign-off of final accounts is becoming embedded)	Director- Finance	27/10/2022	Add- New Assurance Action	one off milestone
106	Corporate Oversight	CO.F5.0	Add new Main Action: Customer Journey Programme	Director - Business Strategy and Change	27/10/2022	Add- New Main Action	
107	Corporate Oversight	CO.F5.1	Add new action: Structure and Governance for Customer Experience Programme approved	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions	
108	Corporate Oversight	CO.F5.2	Add new action: Workstream Plans agreed (timeline, cost and resource) for 5 workstreams (fix the backlog, fix the OSS, customer experience strategy, contact centre/community hubs approach, technology)	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions	
109	Corporate Oversight	CO.F5.3	Add new action: Programme board in place (first programme board to involve ToR, scope of workstreams, nominations for resources for each workstream, and high level milestones)	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions	
110	Strategic Decision	SD.A1.2	Pipeline projects monitored on a 6-monthly basis	Director-Regeneration and Growth	27/10/2022	Add- New Assurance Action	Change action to an assurance action to be monitored on a 6 monthly basis

Add Main, Sub & Assurance Actions							
Change Number	Theme	Action reference	Action Title	Owner	Date Raised	Type of Change	Change/ Impact of change (incl. any dependencies)/ Reason for change
114	Strategic Decision	SD.A7.2	Early Help Strategy to be reviewed annually at the early help partnership board	Director- Children and Education	27/10/2022	Add- New Assurance Action	
115	Strategic Decision	SD.A8.3	Corporate Parenting Strategy - yearly assurances provided to the Corporate Parenting Board	Director- Children and Education	27/10/2022	Add- New Assurance Action	
120	Strategic Decision	SD.C1.3	Customer Access Strategy Development Commences	Director Housing	27/10/2022	Add- New Main Action	Action to become main action SD.F1.0 within Customer Journey Workstream 'Customer Journey Strategy Approved'
122	Strategic Decision	SD.D1.3	New Assurance Action (strategy implemented through budget plans): Budget Report to Cabinet (2023-2026) reflects funding gaps identified in MTFP	Director- Finance	27/10/2022	Add- New Assurance Action	
123	Strategic Decision	SD.D1.4	New Assurance Action (embedding the approach): MTFP and Capital Strategy refreshed and approved in October each year	Director- Finance	27/10/2022	Add- New Assurance Action	
125	Strategic Decision	SD.E2.4	New action: Proposal approved for the next phase of resident consultation and engagement and budget consultation	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions	
126	Strategic Decision	SD.E2.5	New action: Focus Groups held to explore responses to key areas raised in Residents Survey, Shape survey and budget consultation.	Director - Business Strategy and Change	27/10/2022	Add - New Sub Actions	
127	Strategic Decision	SD.F1.0	New Main Action: Customer Journey Strategy	Director - Business Strategy and Change	27/10/2022	Add- New Main Action	
134	Procurement & Commercial	PC.A1.3	Assurance Action- Report provided to Officer Leadership on a quarterly basis. regular reporting through PMF	Director - Borough Economy	27/10/2022	Add- New Assurance Action	assurance action for action PC.A1.0- Introduction of a more focused framework for contract monitoring.
135	Procurement & Commercial	PC.A1.4	Assurance Action- Annual report on leisure and waste contracts going through to cabinet member	Director - Borough Economy	27/10/2022	Add- New Assurance Action	assurance action for action PC.A1.0- Introduction of a more focused framework for contract monitoring.
136	Procurement & Commercial	PC.A1.5	Assurance Action- The large contracts in BE for waste/street cleansing, and both leisure providers will be added to the Intend contract management module.	Director - Borough Economy	27/10/2022	Add- New Assurance Action	assurance action for action PC.A1.0- Introduction of a more focused framework for contract monitoring.- dates to be agreed
137	Procurement & Commercial	PC.A4.3	Assurance Action- Senior management meeting - annual plans requested- service delivery plan from SERCO is contractually compliant and includes elements of street cleansing.	Director - Borough Economy	27/10/2022	Add- New Assurance Action	assurance action for main action PC.A4.0- Street Cleansing Recovery Plan – completion and implementation
138	Procurement & Commercial	PC.A5.3	Assurance Action- Monthly fleet steering group taking place where the documentation considered by the group is contractually compliant.	Director - Borough Economy	27/10/2022	Add- New Assurance Action	assurance action for main action PC.A5.0- Manage the delayed Serco Fleet replacement programme in line with the requirements of the contract- dates to be agreed
139	Procurement &	PC.B1.6	Contract Monitoring Arrangements in Place	Director- Finance	27/10/2022	Change to delivery timescales (actions	Contracts are being monitored. Contract

Add Main, Sub & Assurance Actions							
Change Number	Theme	Action reference	Action Title	Owner	Date Raised	Type of Change	Change/ Impact of change (incl. any dependencies)/ Reason for change
140	Procurement & Commercial	PC.B3.0	Procurement of 2024 SEND transport contract	Director- Children and Education	27/10/2022	Add- New Main Action	
141	Procurement & Commercial	PC.B3.1	Leadership review of lessons learnt from SEND 2	Director- Children and Education	27/10/2022	Add - New Sub Actions	
142	Procurement & Commercial	PC.B3.2	Mobilise project team and establish project governance	Director- Children and Education	27/10/2022	Add - New Sub Actions	
143	Procurement & Commercial	PC.B3.3	Commence Procurement	Director- Children and Education	27/10/2022	Add - New Sub Actions	
145	Partnership & Relationships	PR.C1.5	Assurance action: Receive a quarterly update from DPH and DAS to provide assurance that governance remains in place to test adequacy of partnerships through system-wide thematic deep dives and that any issues are being addressed by the partnership.	Director - Adult Social Care Director - Public Health	27/10/2022	Add- New Assurance Action	
146	Partnership & Relationships	PR.B1.6	Assurance Action: Update provided on a 6 monthly basis by Director of Regen and Growth to confirm representation at key meetings continues and brings benefit to the council. Key meetings for Members to attend at sub regional and regional level are: ABCA Leaders; WMCA Board; WMCA Economic Growth Board; WMCA Housing and Land Board.	Director-Regeneration and Growth	11/02/2022	Add- New Assurance Action	Add new assurance for action PR.B1.0- Continue to develop the relationship with and actively participate in regional and sub-regional bodies (e.g. WM Combined Authority, Black Country LEP) to maximise opportunities for Sandwell

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Internal Audit Progress Report as at 30 September 2022



1 *Introduction*

The purpose of this report is to bring the Audit and Risk Assurance Committee up to date with the progress made against the delivery of the 2022/23 Internal Audit Plan.

The information included in this progress report will feed into and inform our overall opinion in our Internal Audit Annual Report issued at the year end. Where appropriate each report we issue during the year is given an overall opinion based on the following criteria:

No Assurance	Limited	Reasonable	Substantial
Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.	A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.

This is based upon the number and type of recommendations we make in each report. Each recommendation is categorised in line with the following:

Fundamental	Action is imperative to ensure that the objectives for the area under review are met.
Significant	Requires action to avoid exposure to significant risks in achieving the objectives for the area under review.
Merits attention	Action advised to enhance control or improve operational efficiency.

[ILO: UNCLASSIFIED]

For school reviews, the overall opinion is based on the following criteria to match the assurance categories awarded by Ofsted:

Inadequate	<ul style="list-style-type: none">• Risk of objectives not being achieved due to the absence of key internal controls, with significant breakdown in the application of controls.
Satisfactory	<ul style="list-style-type: none">• Reasonable framework of key controls exists, but could be stronger to support achievement of objectives, with occasional breakdown in the application of controls.
Good	<ul style="list-style-type: none">• Effective framework of key controls ensures objectives are likely to be achieved and controls are applied but with some minor lapses.
Outstanding	<ul style="list-style-type: none">• Robust framework of key controls ensures objectives should be achieved and controls are applied continuously.

The overall opinion for each of the school reviews is based upon the number and type of recommendations we make in each report, in line with the recommendation classifications for non-schools, i.e. fundamental, significant and merits attention.

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2 Summary of work completed between 1 April and 30 September 2022

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AAN	Assessment of Assurance Need Rating (High/Medium risk).
*	Awaiting Response (all longstanding responses will be brought to the attention of the committee throughout the year for monitoring purposes).
N/A	Not Applicable, review outside of normal risk-based auditing approach/customer request/grant claim.

Auditable Area	AAN rating	Recommendations			Total	Number accepted	Level of Assurance
		Fundamental	Significant	Merits attention			
Governance, Housing	High	-	4	4	8	8	Reasonable
Budgetary Control	High	-	2	1	3	3	Reasonable
Disabled Facility Grant	Medium	-	4	5	9	9	Limited
Prevention and Promotion Fund for Better Mental Health Grant 2021/22	N/A	-	-	-	-	-	N/A
Universal Drug Treatment 2021/22 Grant	N/A	-	-	-	-	-	N/A
Local Authority Test and Trace Contain Outbreak Management Fund Grant	N/A	-	-	-	-	-	N/A
Schools Financial Value Standard	N/A	-	-	-	-	-	N/A
Council Complaints follow up	N/A	-	1	1	2	2	N/A
Riverside Rents	Medium	-	4	-	4	4	Reasonable
Cash Handling	Medium	-	3	1	4	4	Reasonable
School audits							
Hamstead Infant School	Medium	-	1	3	4	4	Good
Oakham Primary School	Medium	-	-	6	6	6	Good
Brickhouse Primary School	Medium	-	3	5	8	*	Satisfactory

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Audits underway as at 31 October 2022

• Events Governance
• Waste Services
• Treasury Management
• Main Accounting System
• Accounts Receivable
• Benefits
• Riverside, Planned Maintenance
• National Non-Domestic Rates
• Boscobel Repairs
• Hargate Primary
• Albert Pritchard Infant School
• The Orchard School
• Riverside, leaseholders follow up
• Riverside method statements review

3 *Issues to bring to the committee's attention for the period April to September 2022*

Grant Funding 2021/22

We undertook three reviews to confirm that the information contained in each of the grant returns was in accordance with the Acts specified in the guidance notes for each alongside the relevant regulations, determinations, circular notes, instructions and other agreed arrangements. No issues were identified which prevented submission of any of the three claims and it was determined that in all significant respects, the conditions attached to the use of the grants had been complied with.

Schools Financial Value Standard 2021/22

The Schools Financial Value Standard (SFVS) is applicable to all maintained schools and is a mandatory self-assessment exercise that must be completed annually. The standard is a tool to help schools and local authorities meet basic standards for good financial health and resource management. We are responsible for administering the completion and submission of the self-assessments and for informing the Department for Education of the submission rate. For 2021/22, all maintained schools in Sandwell completed and submitted the self-assessment.

School Audits

Following the Covid-19 related lockdown we have now re-commenced our annual school audit programme, and three such reviews have been undertaken in order to assess whether they had adequate governance, risk management and control processes in place to ensure that financial management and governance arrangements were satisfactory. Two schools received good assurance and one school satisfactory.

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Council Complaints, follow up

In our previous review of the Council's complaints process, we made a recommendation that Investigating Officers retain documentary evidence of when the initial contact took place, and that a full written response needed to be issued to the customer which addressed all concerns. It was noted that work had been undertaken to implement the recommendation. However, it was found that due to the limitations of the system, some complaints could be updated by other teams without the Customer Feedback Team's knowledge, and as such not every complaint may be appropriately monitored. Therefore, a further recommendation has been made with respect to this.

It was also noted that since the initial review took place a new comprehensive customer feedback guide was introduced in January 2021. However, the document available on the Council's website was still the previous version. This has now been updated.

Riverside, Rents

Riverside manage a proportion of the councils housing stock under a PFI agreement. The housing rents section at Riverside is responsible for collecting rent, the recovery of rent arrears and former tenants' arrears. A review was undertaken which included following up the previous year's recommendations to ensure they had been implemented, and we identified the following areas where improvements could be made, two of which remained outstanding from the previous year:

- It was noted that at least three cases had increased due to a Malware incident on the Riverside system, which for a period of 10 weeks prevented arrears being adequately monitored. It was requested that a risk assessment and ICT business continuity arrangements needed to be updated to ensure there are alternative ways for the arrears/payments to be monitored and chased during any future major disruption.
- The property extract reconciliation (rent variation spreadsheet) which provides evidence of the housing stock had been updated to address the six properties from the previous audit report. However, a property sold in October 2021 had not been included within the current reconciliations and therefore the recommendation was reapplied to ensure that properties sold under the right to buy scheme have been removed prior to submitting the data to the Council.
- Arrears have continued to increase for a fourth year running. It was noted that Riverside have worked with the Councils Welfare Rights team over the last few years to obtain back payments for tenants to help in some cases with the ongoing delays in universal payments. We are also aware that this was compounded when evictions were suspended by the Government until 31 May 2021. However, due to the contract held it was considered that Riverside needed to explore what options are available to them to obtaining extra resource in this area to ensure the trend can be mitigated as much as possible.

Governance, Housing

An audit of the Governance Arrangements within the Housing Directorate was undertaken at the request of the Director for Housing. The objective of the audit was to provide assurance that governance activities within Housing were operating effectively and providing a strategic focus and direction on the services delivered.

Recommendations were made highlighting that not all of the regular formal group meetings had a Terms of Reference clearly defining their purpose and objectives, there was an absence of quorum numbers within Housing meetings, declaration of interests were not included as a standard agenda item and although risk management processes were taking place, improvements were needed to fully embed the process.

It was noted that work was ongoing under the new director in order to make improvements to the governance structure within Housing, including a framework to engage with tenants now taking place with the new Tenant and Leaseholder Strategy Group, and the creation of a new Tenant Liaison Officer post to help focus and drive improvements forward. Furthermore, Housing has adopted the Council's Corporate Plan strategic outcomes to give the directorate a clear and consistent picture of its guiding principles.

Disabled Facility Grant

The Disabled Facilities Grant (DFG) is part of the Better Care Fund; a pooled budget seeking to integrate health, social care and, through the DFG, housing services. The purpose of the fund is to provide adaptations to help increase or maintain the functional independence of people with permanent or substantial disabilities. The planning of the adaptations should take account of the person's current needs and also give consideration to the likely needs of the client in the medium to long term. Our review highlighted four areas where improvements could be made, arising from the following:

- A potential data breach with grant documentation being emailed from what appeared to be a personal email account to a council email account. This was reported to the Information Governance Team for further review.
- The DFG policies and procedures used by officers to administer the grant and therefore provide staff with assistance, needed to be reviewed and updated. In reference to the above potential data breach, it was also recommended that the procedures include guidance on managing data security and ensuring compliance with UK Data Protection Regulations whilst processing service user's personal information.
- There was a lack of clear and readily available financial reports and monitoring information regarding the overall spend and position of the DFG. It was acknowledged that the monitoring of the grant was impacted by the move of the service area from Adults to Housing, thereby highlighting the service within Finance to be monitored between three areas of Capital, Adults and Housing. With insufficient financial monitoring information being received by the service area it was recommended that a more joined up approach be established, allowing a full overview of the spend.
- At the time of our review there was a backlog of completed DFG funded improvement works yet to be invoiced or issued completion certificates by the Contractor. This was not only causing a delay for the payment of the works undertaken but was also creating an expanding budget liability due to invoices not being submitted for payment. It was

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recommended that the contractor be required to provide a remediation plan regarding the situation regarding the invoicing for completed works.

Cash Handling

In recent years the Council has significantly reduced the amount of cash that it handles. The bulk of the Council's cash is generated from cash payments made from the services the Council provides. The largest areas where cash is collected is Oldbury Cashiers and Highways car parking contract with APCOA. However, a number of other areas retain a cash payment facility for services such as Markets, Registrars and Meals on Wheels. The Council also operates a petty cash facility for reimbursement of minor expenditure and Cashiers provide a cheque encashment facility at Sandwell Council House for this service.

During our review we noted that there were no up to date cash and banking procedures for officers to operate or refer to, and as such variations to how cash is dealt with across the Council may have developed over time. It was acknowledged that the development of new procedures was in progress and since our review was finalised, the new procedures have been presented to the Leadership Team for the agreed roll out.

We also recommended that a wider review of the petty cash balances held across the borough be undertaken in order to establish that (i) they were still required and (ii) where they were, appropriate sums were held.

Budgetary Control

The General Fund Revenue Budget for the Council is held on the General Ledger module of the Oracle Financial system. Central control of the budget is managed by the Council's Strategic Finance team.

CIPFA were recently commissioned to undertake a review of the financial management and governance arrangements by the Council using the Financial Management Model. The outcome of their review is being used to drive the development of the Council's financial management operation and arrangements. It assessed the Council's financial management capability, its internal processes, and operations. It also examined how the Council plans its future financial management. The report contained a series of recommendations, from which an action plan has been developed. Following which, amongst others, benchmarking data on unit costs and fees and charges has been used in the 2022/23 budget process, and the leadership team now receive monthly budget monitoring information.

Therefore, to avoid duplication, our review focussed upon our previous recommendations in this area, and which continue to form part of the ongoing improvement processes put in place, including seeking to significantly reduce the number of journals that are used and working towards the finalisation of the 2020/21, and then the 2021/22 Statement of Accounts.

Procurement

We have been working closely with the Procurement team with regards to the roll-out of the enhanced use of the In-Tend system, ensuring that previous procurement related recommendations have been implemented, and that the updated Contract Procedure Rules are being complied with. We will report back upon this where appropriate, later in the year.

4 *Other activities undertaken by Audit Services*

CIPFA – Audit Committee Updates

We continue to present the regular CIPFA Audit Committee Updates to the committee as and when they are published.

Audit and Risk Assurance Committee – Terms of Reference

We continue to review and update the Audit and Risk Assurance Committee Terms of Reference on an annual, basis.

Internal Audit Plan

The Internal Audit annual plan for 2022/23 was submitted to the Audit and Risk Assurance Committee for approval.

Audit and Risk Assurance Committee Annual Report

Assistance was provided in the preparation of the Annual Report on the work of the Audit and Risk Assurance Committee.

Internal Audit's role in investigating allegations of Fraud

We continue to take part in investigations into allegations of potential fraud and where appropriate these are reported separately to the committee.

Annual Governance Statement

We play a key role in the preparation of the Annual Governance Statement which forms part of the annual published Statement of Accounts.

Advice and Guidance

We provide on-going advice and guidance to the council to assist with the continuous improvement of the overall control environment and to ensure compliance with relevant new legislation.

Liaising with the External Auditors

Where required, we continue to work with and assist the Council's External Auditors.

Wider Client base

The Council's internal auditors also provide the internal audit service to Sandwell Children's Trust, Sandwell Leisure Trust and the West Midlands Fire Service, and reports directly to these organisations audit committee, or equivalent, as appropriate. Through a shared service arrangement, it also provides the Head of Audit role to the City of Wolverhampton Council.

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Report to Audit and Risk Assurance Committee

15 November 2022

Subject:	Internal Audit Progress Report
Director:	Simone Hines Director of Finance and Section 151 Officer
Contact Officer:	Peter Farrow Audit Services and Risk Management Manager, peter_farrow@sandwell.gov.uk

1 Recommendation

1.1 Review and comment upon the Internal Audit Progress Report.

2 Reasons for Recommendation

2.1 To inform the committee of details of the matters arising from internal audit work undertaken between April and September 2022.



3 How does this deliver objectives of the Corporate Plan?

Internal Audit operates across the council and helps it accomplish its objectives by bringing a systematic, disciplined approach to evaluating and improving the effectiveness of risk management, control and governance processes.

4 Context and Key Issues

4.1 The Internal Audit Progress Report contains details of the matters arising from internal audit work undertaken between April and September 2022.

4.2 The purpose of the report is to bring the Audit and Risk Assurance Committee up to date with the progress made against the delivery of the 2022/23 Internal Audit Plan. The information included in the progress report will feed into and inform the overall opinion in the Internal Audit Annual Report issued at the year end.

4.3 It summarises the audit work undertaken between April and September 2022, this includes:

- the areas subject to review (auditable area)
- the level of audit need assigned to each auditable area (high, medium or low)
- the number and type of recommendations made as a result of each audit review.
- the number of recommendations accepted by management.
- the level of assurance given to each system under review.
- details of any key issues arising from the above.

4.4 It also highlights any key changes to the initial Internal Audit Plan.

5 Alternative Options

5.1 The purpose of the report is to inform the Audit and Risk Assurance Committee on progress against the 2022/23 Internal Audit Plan. As such, there is no alternative option.



6 Implications

Resources:	There are no direct resource implications arising from this report.
Legal and Governance:	Internal audit is a statutory service in the context of the Local Government Accounts and Audit Regulations (Amendment)(England) 2015. The Act states that: <i>“A relevant authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance”</i> . These Standards have been adopted by the council’s internal audit section.
Risk:	The agreed actions detailed in Internal Audit reports are designed to mitigate risks.
Equality:	It was not necessary to undertake an Equality Impact Assessment.
Health and Wellbeing:	There are no direct health and wellbeing implications from this report.
Social Value	There are no direct social value implications from this report.

7. Appendices

Appendix 1 – Internal Audit Progress Report as at 30 September 2022

8. Background Papers

Internal Audit Progress Report



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Report to Audit and Risk Assurance Committee

15 November 2022

Subject:	Internal Audit Charter
Director:	Simone Hines Director of Finance and Section 151 Officer
Contact Officer:	Peter Farrow Audit Services and Risk Management Manager, peter_farrow@sandwell.gov.uk

1 Recommendation

1.1 Review and approve the Internal Audit Charter.

2 Reasons for Recommendation

2.1 For the Audit and Risk Assurance Committee to perform an annual review of, and approve the Internal Audit Charter.

3 How does this deliver objectives of the Corporate Plan?

Internal Audit operates across the council and helps it accomplish its objectives by bringing a systematic, disciplined approach to evaluating and improving the effectiveness of risk management, control and governance processes.

4 Context and Key Issues

4.1 There is a statutory requirement for internal audit to work in accordance with the 'proper audit practices'. These 'proper audit practices' are in effect the 'Public Sector Internal Audit Standards' and the council's Internal Audit Charter reflects this. The Charter was originally approved by the Audit and Risk Assurance Committee in September 2013, has been reviewed by the committee annually since, and is now due for its latest review.

4.2 There have been no changes since the Charter was last reviewed.

5 Alternative Options

5.1 The purpose of the report is to inform committee of the latest Internal Audit Charter. As such, there is no alternative option.

6 Implications

Resources:	There are no direct resource implications arising from this report.
Legal and Governance:	Internal audit is a statutory service in the context of the Local Government Accounts and Audit Regulations (Amendment)(England) 2015. The Act states that: " <i>A relevant authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance</i> ". These Standards have been adopted by the council's internal audit section.

Risk:	The agreed actions detailed in Internal Audit reports are designed to mitigate risks.
Equality:	It was not necessary to undertake an Equality Impact Assessment.
Health and Wellbeing:	There are no direct health and wellbeing implications from this report.
Social Value	There are no direct social value implications from this report.

7. Appendices

There are no appendices.

8. Background Papers

None.

Definition of internal auditing

Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.

Mission of internal audit

To enhance and protect organisational value by providing risk-based and objective assurance, advice and insight.

Core Principles for the Professional Practice of Internal Auditing

- Demonstrates integrity.
- Demonstrates competence and due professional care.
- Is objective and free from undue influence (independent).
- Aligns with the strategies, objectives, and risks of the organisation.
- Is appropriately positioned and adequately resourced.
- Demonstrates quality and continuous improvement.
- Communicates effectively.
- Provides risk-based assurance.
- Is insightful, proactive, and future-focused.
- Promotes organisational improvement

Authority and standards

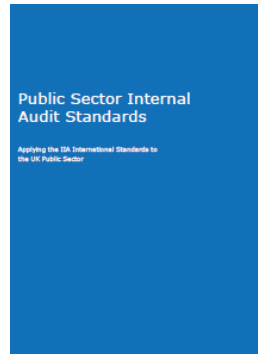
Internal audit is a statutory service in the context of the Accounts and Audit Regulations (Amendment)(England) 2015. Section 151 of the Local Government Act 1972 requires local authorities to make arrangements for the proper administration of their financial affairs and appoint a Chief Financial Officer to have responsibility for those arrangements

The regulations state that: *“A relevant authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance”*. These Standards have been adopted by the council's internal audit section.

The responsibility for ensuring that the council has an effective internal audit has been delegated to the Chief Financial Officer/Section 151 Officer.

Internal audit have the right of access to all records, assets, personnel and premises, including those of partner organisations, and has the authority to obtain such information and explanations as it considers necessary to fulfil its responsibilities.

Throughout the Public Sector Internal Audit Standards, reference is made to the terms 'Chief Audit Executive', 'board' and 'senior management'. For the purposes of this Charter, the 'Chief Audit Executive' is defined as the Audit Services Manager (Head of Audit) the 'board' as the Audit and Risk Assurance Committee and 'senior management' as the Leadership Team.



Public Sector Internal
Audit Standards

Applying the ISA International Standards to
the UK Public Sector

Scope and objectives of internal audit activities

The scope of work of internal audit is to determine whether the council's risk management, control, and governance processes are adequate and effective in order to ensure that:

- Key risks are identified and managed;
- Key financial, managerial, and operating information is accurate, reliable, and timely;
- Employees' actions are in compliance with policies, standards, procedures, and applicable laws and regulations;
- Resources are acquired economically, used efficiently, and adequately protected;
- Programs, plans, and objectives are achieved;
- Quality and continuous improvement are fostered in the council's control process; and
- Key legislative and regulatory issues impacting the council are identified and addressed appropriately.

Internal audit's remit extends to the entire control environment of the council and not just financial controls.

Where other internal or external assurance providers may have undertaken relevant assurance and audit work, internal audit will seek to rely on the work of these other assurance providers where professional standards would make it appropriate to do so.

Responsibilities

Internal audit has a responsibility to:

- Provide a cost effective and value added full internal audit service;
- Develop a flexible annual audit plan using a risk-based methodology;
- Implement the annual audit plan;
- Track status of outstanding management actions;
- Provide regular updates on the work of internal audit to the Audit and Risk Assurance Committee and where appropriate, senior officers;
- Assist, as needed, in the investigation of significant suspected fraudulent activities within the organisation; and
- Work with the External Auditor and other review bodies to share assurance and minimise duplication.

Organisational independence

Internal audit is involved in the determination of its priorities in consultation with those charged with governance. The Audit Services Manager has direct access and freedom to report in his own name to all officers and councillors and particularly to those charged with governance. If required the Audit Services Manager may request to meet privately with the Audit and Risk Assurance Committee.

Internal audit will remain sufficiently independent of the activities that it audits to enable auditors to perform their duties in a manner which facilitates impartial and effective professional judgements and recommendations.

Objectivity is presumed to be impaired when individual auditors review any activity in which they have previously had operational responsibility. If individual auditors are extensively consulted during system, policy or procedure development, and independence could be

seen as being compromised, or if they have had previous operational roles, they will be precluded from reviewing and making comments during routine or future audits, for the remainder of that financial year and for the following financial year after their involvement.

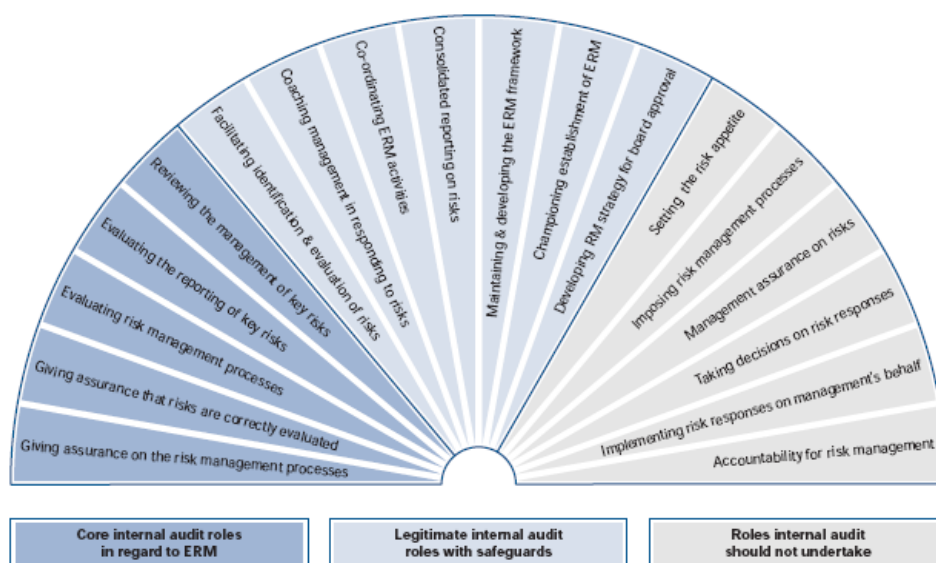
Accountability, reporting lines and relationships

The Audit Services Manager reports on an administrative basis to the Head of Finance and reports functionally to the Audit and Risk Assurance Committee, the Chief Executive and other senior management. The Audit Services Manager also, where appropriate, works closely with the Monitoring Officer. An Annual report will also be produced and presented to the Audit and Risk Assurance Committee which will include an ‘opinion’ from the Audit Services Manager on the adequacy and effectiveness of internal control, risk management and governance within the Authority.

A written report will be prepared by internal audit for every internal audit review. The report will be subject to an internal quality review before being issued to the responsible officer and, where appropriate, will include an ‘opinion’ on the adequacy of controls in the area that has been audited. The responsible officer will be asked to respond to the report in writing. The written response must show what actions have been taken or are planned in relation to each recommendation. Accountability for the response to the advice and recommendation of internal audit lies with management, who either accept and implement the advice or formally reject it.

The strategic element of risk management sits under the responsibility of the Audit Services Manager. There is a current post within the service area that leads on this. It should be noted that management remains responsible for risk management and Audit Services do not manage any of the risks on behalf of management.

In order to provide guidance on the roles that are permissible and the safeguards needed to protect internal audit’s independence and objectivity, the council adopted the Chartered Institute of Internal Auditors (UK) position statement on the role of internal audit in risk management. Based on this position statement, the table below presents the range of risk management activities and indicates which roles Audit Services do and, equally importantly, do not undertake:



The full role and responsibilities of the Audit and Risk Assurance Committee are detailed in their terms of reference, which are based on the model provided by CIPFA in their “Audit Committees – Practical Guidance for Local Authorities”.

Internal audit resourcing

Internal audit must be appropriately staffed in terms of numbers, grades, qualification levels and experience. Internal auditors need to be properly trained to fulfill their responsibilities and should maintain their professional competence.

The Head of Finance is responsible for the appointment of the Audit Services Manager, who must be suitably qualified and experienced. The Audit Services Manager is responsible for appointing all of the other staff to internal audit and will ensure that appointments are made in order to achieve the appropriate mix of qualifications, experience and audit skills.

The Audit Services Manager is responsible for ensuring that the resources of internal audit are sufficient to meet its responsibilities and achieve its objectives. If a situation arose whereby it was concluded that resources were insufficient, this must be formally reported to the Head of Finance, and if the position is not resolved, to the Audit and Risk Assurance Committee.

Fraud

Managing the risk of fraud is the responsibility of management. Audit procedures alone, even when performed with due professional care, cannot guarantee that fraud or corruption will be detected. Internal audit does not have responsibility for the prevention or detection of fraud and corruption. Internal auditors will, however, be alert in all their work to risks and exposures that could allow fraud or corruption. Internal audit may be requested by management to assist with fraud related work.

The council’s Financial Regulations require that all suspected irregularities are reported to the Audit Services Manager, and the council’s Anti-Fraud and Corruption Policy states that all frauds have to be reported to the S151 Officer, or their nominated officer (generally the Audit Services Manager) and that it is the responsibility of Audit Services to investigate any instances of fraud and corruption being perpetrated by any employee of the council.

Advisory work

The Public Sector Internal Audit Standards allow that internal audit effort may, where considered to have the right skills, experience and available resource, sometimes be more usefully focused towards providing advice rather than assurance over key controls. Any such internal audit involvement in consultancy and advisory work, would only take place where it would not constitute a conflict of interest in keeping an independent stance. Any significant additional consulting services will be approved by the Audit and Risk Assurance Committee beforehand.

External Clients

The Council’s Internal Audit team provide the internal audit service to a number of additional clients. These currently are:

- West Midlands Fire Service
- Sandwell Children’s Trust
- Sandwell Leisure Trust

Where such arrangements are in place, and where appropriate, there will be a separate Internal Audit Charter and reporting arrangements to these organisations respective Audit Committees (or equivalent).

The Head of Audit, through a shared service arrangement with the City of Wolverhampton Council, also provides the Head of Audit role for the following organisations:

- City of Wolverhampton Council
- West Midlands Combined Authority
- West Midlands Pension Fund
- Wolverhampton Homes

Again, where appropriate, there will be a separate Internal Audit Charter and reporting arrangements to these organisations respective Audit Committees (or equivalent).

Review of the internal audit charter

This charter will be reviewed annually by the Audit Services Manager and the Audit and Risk Assurance Committee.

Audit and Risk Assurance Committee

15 November 2022

Subject:	Corporate Risk Management Strategy
Director:	Director of Finance Simone Hines
Contact Officer:	Audit Services Business Partner Narinder Phagura Narinder_phagura@sandwell.gov.uk

1 Recommendations







- 1.1 To note and approve the corporate risk management strategy which has been reviewed and updated.

2 Reasons for Recommendations

- 2.1 Effective risk management is a key element of good corporate governance, as noted in the council's Code of Corporate Governance. It is essential to the overall performance of the council in meeting its corporate plan objectives. Good risk management will ensure that resources are used efficiently and effectively and that assets and resources are protected against risk in the most efficient way.
- 2.2 The role of the ARAC is to provide assurance to the Council that it has a system of governance, risk management and internal control in place and that the adequacy and effectiveness of these arrangements continue to inform decision making.

3 How does this deliver objectives of the Corporate Plan?



	Best start in life for children and young people
	People live well and age well
	Strong resilient communities
	Quality homes in thriving neighbourhoods
	A strong and inclusive economy
	A connected and accessible Sandwell
	The report details the key strategic risks that need to be managed to ensure that they do not negatively impact on the delivery of the Corporate Plan objectives.

4 Context and Key Issues

- 4.1 Risk Management assists an organisation to understand, evaluate and take action on its identified risks with a view to increasing the successful achievement of the organisational objectives and priorities and making efficient use of limited resources. An effective risk management framework across the council will give assurance to all stakeholders that the council's business is conducted based upon informed decision making, is being effectively managed and will help confirm compliance with the council's [Code of Corporate Governance](#).
- 4.2 This Risk Management Strategy as set out in Appendix A, will contribute to the strategic outcomes that make up Vision 2030 and assist in the delivery of the council's Improvement Plan, by ensuring that an effective risk management framework is in place and embedded into the decisions the council makes and the policies, procedures, processes and systems it implements, in delivering both the Improvement Plan actions and Vision 2030.
- 4.3 The key updates to the strategy include:



- Updates to the roles and responsibility which now include reference to the Commissioners and Corporate Transformation Board.
- References to the Council Plan 2021-25 and the Improvement Plan.
- Replacement of the Institute of Internal Auditors (IIA) ‘3 lines of defence’ model with the new IIA ‘3 lines model’.
- Further details on risk appetite.
- Further detail to risk assessment scores and the inclusion of safeguarding/ injury/ life and limb impacts.

5 Alternative Options

5.1 The risk management strategy sets out the framework for embedding risk management into key council processes. The identification of risks and the measures that are being considered for the mitigation of each of the risks, will take account of any alternative options available.

6 Implications

Resources:	The authority’s budget planning process incorporates financial and other resources required to manage the authority’s risks and deliver the priorities within the corporate plan.
Legal and Governance:	There are numerous standards applicable to the management of risk within the local authority sector. Included amongst these is guidance from CIPFA/Solace, the British Standards Institute (BSI) and a set of joint standards published by the Institute of Risk Management (IRM), Alarm (The public sector risk management association) and AIRMIC (Association of Risk Managers in Industry and Commerce). Evidence that robust management of the authority’s strategic risks is being undertaken demonstrates compliance with these standards.
Risk:	The report itself sets out the framework for managing risks across the council.
Equality:	It is not necessary to undertake an Equality Impact Assessment. However, when measures and decisions are being considered for the mitigation of risks, risk owners



	must take into account any equalities impact and whether an equalities impact assessment is required.
Health and Wellbeing:	The management of risk takes into account where appropriate, the implications on health and wellbeing of our communities.
Social Value	The actions and decisions that are being considered for the mitigation of risks, will take into account the meeting of the Council's social value commitments.

7. Appendix

Appendix A – Risk Management Strategy

8. Background Papers

None



Risk Management Strategy
November 2022



Introduction

Risk Management assists an organisation to understand, evaluate and take action on its identified risks with a view to increasing the successful achievement of the organisational objectives and priorities and making efficient use of limited resources. An effective risk management framework across the council will give assurance to all stakeholders that the council's business is conducted based upon informed decision making, is being effectively managed and will help confirm compliance with the council's [Code of Corporate Governance](#).

Sandwell Vision 2030



The Sandwell Vision is at the heart of everything the council does.

The Council has developed its [Corporate Plan 2021-2025](#) that sets out what the Council will do to deliver Vision 2030 and the 10 Ambitions. It is based upon six strategic outcomes. The driving theme behind the Plan is One Team: One Council, to reflect a culture of the organisation through strong leadership in an honest, open and transparent environment.

OUR STRATEGIC OUTCOMES



Sandwell Council's Improvement Plan

In March 2022 the Secretary of State for Levelling Up, Housing and Communities announced an intervention package and a set of Directions to ensure the council was able to comply with its best value duty under Part 1 of the Local Government Act 1999. These Directions were in-part influenced by a number of external reviews of the council that had been undertaken at that time

In June 2022 Council approved an Improvement Plan which provides the organisation with a clear direction for its improvement journey that will enable the continued delivery of the strategic priorities in the Corporate Plan 2021-2025.

This Risk Management Strategy as set out below, will contribute to the strategic outcomes that make up the Vision and to assist in the delivery of the Improvement Plan, by ensuring that an effective risk management framework is in place and embedded into the decisions the council makes and the policies, procedures, processes and systems it implements, in delivering both the Improvement Plan actions and Vision 2030.

Good Risk Management

Sandwell Council is committed to adopting good risk management to ensure its Ambitions are attained, and this strategy describe how the council intends to achieve this. In developing the Strategy, the council has considered best practice, in particular the guidance contained within the CIPFA/ALARM publication “Risk Management in Public Services”.

Compliance with this Strategy will demonstrate that the council has an enterprise wide risk management framework that is embedded across all corporate processes including:

- Strategic planning
- Financial planning
- Service delivery
- Project and performance management
- Policy and decision making
- Safeguarding
- Health and safety
- Partnership Management
- Sustainability and climate change
- Annual governance statement
- Equality and diversity
- Procurement

Purpose and objectives

The Strategy sets out how the council plans to systematically manage risk and make it an essential part of its daily business by explaining what members and officers are expected to do. It seeks to assist the development of innovative and different ideas to deliver council services in a considered and measured way.

Monitoring, Review and Changes

The council’s commitment to effective risk management includes the application, review and maintenance of this Strategy. This is undertaken by the council’s Risk Management Team who will report its findings and any updates to the Leadership Team and the Audit and Risk Assurance Committee. The role of the Committee is to understand the process undertaken to review the Strategy and to ensure this aligns with its understanding of the council’s governance framework.

This document will be reviewed annually and any significant changes that are required to this Strategy, will be submitted to the Committee for approval.

Risk appetite - the risks we take:

The amount of risk we take as a council to achieve our objectives is known as our risk appetite. Although individual circumstances determine it, defining it gives us overall guidance when we make decisions.

As a council, we seek to continually improve our services to people while we maintain high standards in the way we work and run our affairs. These standards include processes to consider the risks of specific decisions. The council recognises the complexity of demands on its services and aims to provide holistic and balanced solutions that evolve constantly and deliver the required outcomes.

The council's attitude to risk is that risks should be identified and managed rather than avoided.

We challenge ourselves to compare the potential risks and benefits of specific proposals and only go ahead with them after doing this. This means we look at our risk appetite for each proposal on a case by case basis. In some areas, we may take more risk in order to support new and innovative ways of working. Where the council is more open to risk, officers are still expected to ensure that adequate governance, risk management and internal control is in place, but it is expected the residual risk may remain higher even with these measures in place. In other cases, we may have a much lower appetite and take less risk (to make sure we comply with the law or maintain public confidence and safeguarding). We will therefore consider our appetite for specific risks with the approval of the appropriate members and/or officers.

In all circumstances though:

- we would never do anything to financially threaten our ability to continue as a going concern; and
- we would always act within the law.

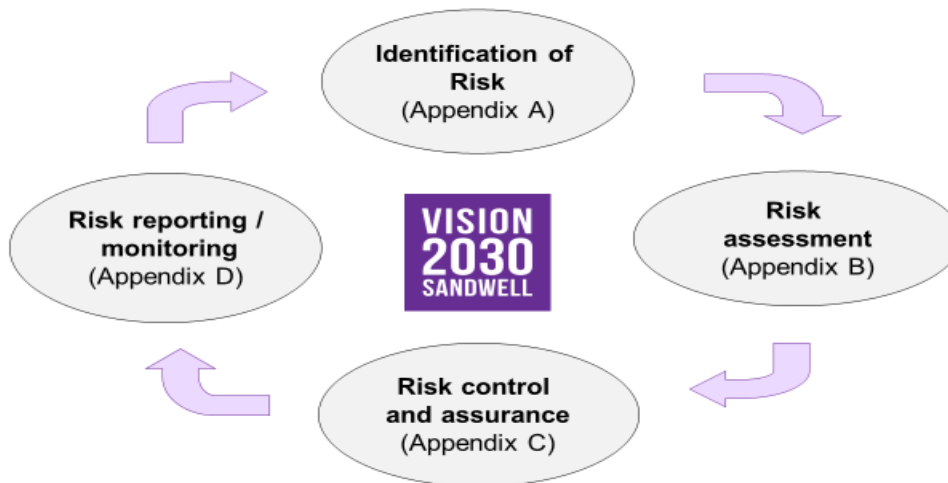
Our risk appetite will be monitored by senior management and risk officers.

The table below provides a definition of what is generally considered to be the different levels of risk appetite within an organisation.

Averse	Avoidance of risk and uncertainty, defensive approach.
Cautious	Preference for safe options that have a low degree of risk and may only have limited potential benefits
Open	Willing to consider all potential options and choose the one most likely to result in successful delivery, while also providing an acceptable level of reward and value for money
Eager / Seeking	Eager to be innovative and to choose options offering potentially higher business rewards, despite greater inherent risk. Ready to take difficult decisions where benefits outweigh risks.

As noted above, the council's risk appetite will vary dependent upon the nature and circumstances of the decision being made. As a public service, the council considers that its risk appetite generally sits between cautious and open. However, in order to deliver our priorities and invest in the future of the borough the council has to be ambitious and innovative and where necessary take an eager attitude towards risk.

Risk management process and risk registers



Risk registers are a vital tool to help us manage risk. Developing a risk register is not in itself evidence that risks are being managed, but a well developed risk register will:

- help identify risks and evidence how we're dealing with them to reduce the likelihood of loss and its impact if things go wrong;
- show clear links between our priorities/ Vision 2030 and the risks affecting them;
- enable us to take immediate action to minimise the impact of a risk if it materialises (because the register will include a list of things to do which have already been agreed);
- give us confidence because we know that procedures to deal with any identified risks that may arise are in place; and
- enable us to share and communicate information on risks so that informed decisions can be made.

The council has a suite of risk registers in place as shown below.



Risks and risk registers should be continually reviewed by management to ensure that:

- actions and mitigations are being taken on a timely basis to ensure risks are within the agreed risk appetite;
- identify any new risks;
- close or transfer risks to other risk registers. It is management's responsibility to escalate or transfer risks as appropriate
- an audit trail of changes to risks is maintained (via version control)

The risk register template can be found at:

https://intranet.sandwell.gov.uk/downloads/download/2901/risk_register_template

Roles and responsibilities

Whilst we all have a responsibility to manage risk, various, members and officers within the council have specific roles and responsibilities to make sure risk management is embedded and we manage risk effectively, including:

Role	Responsibility
Cabinet members	<ul style="list-style-type: none"> • Hold the Leadership Team accountable for the effective management of risk • lead the assessment and management of risk and take a strategic view of risks in the council; • ensure that there are clear accountabilities for managing risks and that officers are equipped with the relevant skills and guidance to perform their roles effectively and efficiently; • ensure that roles and responsibilities for risk management are clear to support effective governance and decision-making at each level with appropriate escalation and delegation; • determine and continuously assess the nature and extent of the principal risks that the council is willing to take to achieve its priorities and maintain its risk appetite. • consider the risks involved in all key decisions
Cabinet Member for Finance and Resources	<ul style="list-style-type: none"> • the champion for risk among members; • receives reports on the strategic risks and presents them to Cabinet.
Audit and Risk Assurance Committee	<p>Supports the Cabinet by:</p> <ul style="list-style-type: none"> • understanding the framework for risk assessment, management and assurance and the assignment of responsibilities; • critically challenges and reviews the risk management and assurance framework to provide assurance (on strategic, directorate, project and partnerships) that the council is managing risk in line with this strategy; • critically challenges and reviews the adequacy and effectiveness of control processes in responding to risks within the council's governance, operations, compliance and information systems and • ensures the Annual Governance Statement reflects the risk profile
Leadership Team (incl. commissioners, directors and managers)	<ul style="list-style-type: none"> • identify, manage and monitor strategic and directorate risks; • challenge (and hold accountable) officers responsible for taking action to manage risks; • ensure decision making reports to members include information on managing risks to enable informed decisions to be made.
Programme, project and partnership boards (incl. Corporate Transformation Board)	<ul style="list-style-type: none"> • identify and manage the key risks to the programme/ project or shared partnership objectives; • obtain assurances that these risks are being managed.
Risk Management	<ul style="list-style-type: none"> • leads, co-ordinates and supports everything we do as a council to

Role	Responsibility
Team	manage risks; <ul style="list-style-type: none"> • reports on risk to senior officers and members; • assists in the identification and assessment of risk; and • provides risk management training to officers and members.
Internal Audit	<ul style="list-style-type: none"> • provide independent assurance on the adequacy and effectiveness of the council's system for managing risk.
Insurance Services	<ul style="list-style-type: none"> • considers and advises on insurable operational risks (for example, highways, slips and trips, building security); • arranges insurance for the council in line with its risk appetite.
Resilience Team	<ul style="list-style-type: none"> • coordinates council plans to keep it operating in response to major and minor unplanned incidents.
Health and Safety Team	<ul style="list-style-type: none"> • makes sure we comply with our system for managing the health and safety risks of council staff and other assets.
Counter-Fraud Unit	<ul style="list-style-type: none"> • identifies fraud related risk areas; • co-ordinates and reports on our anti-fraud activities including investigation of suspected fraud and corruption.
Information Management	<ul style="list-style-type: none"> • identifies areas of information risk • Co-ordinates all information management activity
All Employees	<ul style="list-style-type: none"> • identify and manage risk in their job and report risks to their manager.

The “three lines model” provides a systematic approach that may be used to help clarify the expectations of different roles within the organisation that are necessary for the effective management of risks (see Appendix C).

Identification of Risk

Risk Identification is the first major component of the risk management process. The purpose of risk identification is to generate a comprehensive inventory of risks based on those events which might create, prevent, accelerate or delay the achievement of the council's priorities. i.e. **'what could go wrong?'**

There are several methods which can be used to identify risks such as brainstorming workshops, interviews, questionnaires and SWOT analysis. It may help to consider risks in categories, for example legal, political, technological, economic etc. A range of risk categories is provided below.

Category	
Political	Changes in government policy; Unforeseen policy changes; political decision making and leadership
Environmental incl. climate change	Environmental consequences of strategic objectives and decision making; physical security
Regulatory and Legislative	Ability to manage current or potential changes in laws and regulations; breaches of statutory legislation; inadequate response to legislative changes and regulatory framework
Financial incl fraud	Ability to meet financial commitments; misuse of resources or fraud; failure to prioritise and allocate appropriate budgets; financial planning, external funding opportunities
Social	Effects of changes in demographic, residential or socioeconomic trends; failing to meet the needs of disadvantaged communities; crime and disorder; stakeholder engagement and management
Technological	Failure to keep pace with technological change; increased downtime; IT or project failure; system capability; security of data, system resilience
Management systems	Management arrangements and protocols, leadership, business continuity, capacity, capability and training
Customers and citizens	Ability to meet changing customer needs and expectations; stakeholder management
Partnerships	Partnership governance; contract monitoring; supply chain resilience; procurement risks; market capacity

A Risk Owner should be allocated to each identified risk. Such accountability helps to ensure "ownership" of the risk is recognised and appropriate resources are allocated. The title and/or name of the Risk Owner should be recorded in the risk register.

Risk Assessment

‘How likely is it to happen and what would the impact be if it did?’

Score	Impact			Likelihood
	Financial	Reputation	Service Delivery/ Injury	
	Indicative guidelines			
4 (High)	Critical impact on budgets and resources	National media attention, long term/ impact on reputation	Serious service or project disruption requiring high level intervention Fatality	Highly likely to happen > 50%
3 (Medium)	Significant impact on budgets and resources	Local media Medium term impact on reputation	Significant service or project disruption requiring high level intervention Significant injury	Likely to happen 25% to 50%
2 (Low)	Some impact on budgets and resources	Local media, reputation affected temporarily in short term	Noticeable disruption to outputs requiring intervention by service/ project manager Minor injury	Possible to happen 10% to 24%
1 (Very Low)	Minimal loss can be remedied within budget or project contingencies	Internal reputation affected temporarily	Minimal service disruption requiring minimal intervention by service/ project manager	Unlikely to happen < 10%

Risk Matrix

Likelihood	4	4	8	12	16
	3	3	6	9	12
	2	2	4	6	8
	1	1	2	3	4
		1	2	3	4
	Impact				

Risk Control

‘What if anything, should be done to reduce the risk and how effective is this?’

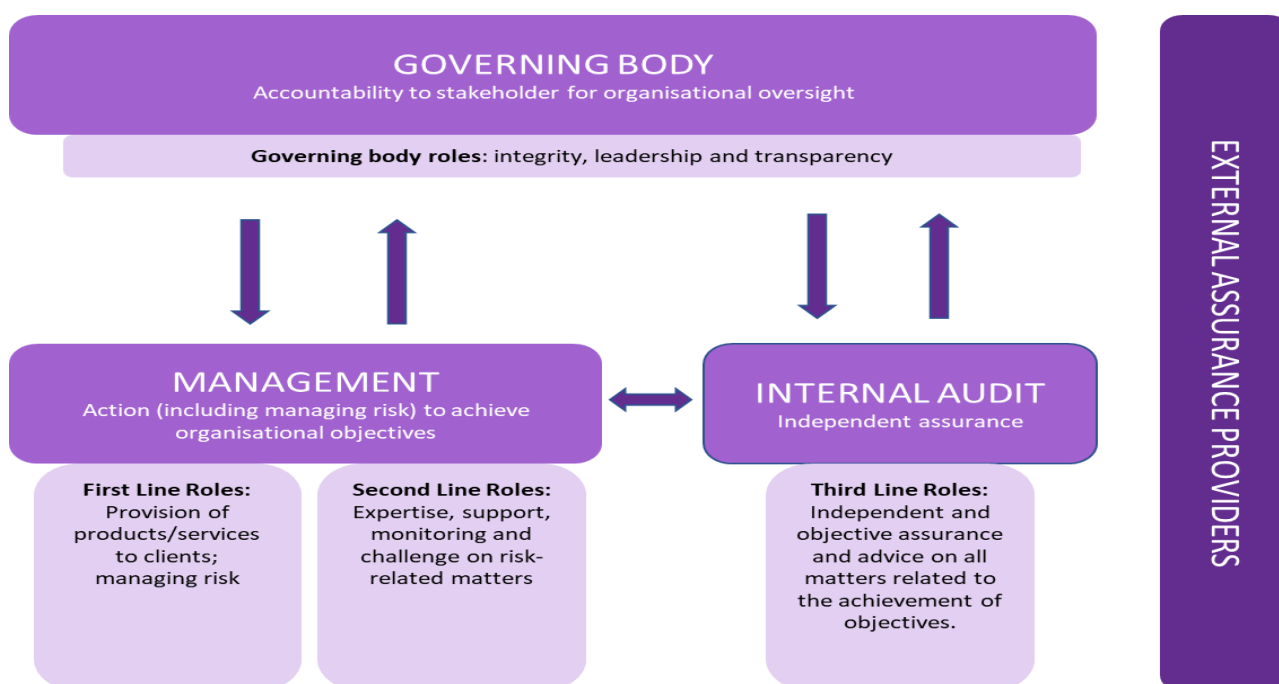
Control measures are concerned with the actions taken to reduce the likelihood or impact of risks. It is not necessarily about eliminating or transferring the risk in its entirety, as this may not be cost beneficial.

Approach	Description
Terminate	A decision is made not to undertake the activity that is likely to trigger the risk. Where the risks outweigh the possible benefits, terminate the risk by doing things differently and thereby removing the risk.
Treat	This is the most common approach and introduces preventative actions to reduce the likelihood and/ or impact if the risk occurs.
Transfer	Share the risk exposure, either totally or in part, with a partner or contractor, or through insurance. Any partnership will need to be carefully monitored as it may not be possible to transfer all risks and certain aspects may remain with the council.
Tolerate	The ability of an effective action against some risks may be limited or the cost of taking such action may be disproportionate to the potential benefits gained.

Risk Management and Assurance

The three lines model (shown below) enhances the understanding of risk management and control by setting out, assigning and clarifying roles and responsibilities in this respect.

The IIA’s Three Line Model (2020)



Success requires effective alignment, communication, coordination and collaboration with all roles operating concurrently.

Risk Reporting and Monitoring

'Who needs to be informed and has anything changed?'

Few risks remain static. New issues and risks are likely to emerge and existing risks may change. Having identified the risks, assessed them and put control measures in place, it is essential that they are routinely monitored and reported.

Monitoring progress and regular reviews provides:

- Assurance that progress is being made towards controlling risks
- Assurance that controls are effective
- Knowledge of any changes to the risk brought about changing circumstances or business priorities.

When undertaking the monitor and review process, the sorts of questions that should be taken into account include:

- Are the risks still relevant?
- Has anything occurred that could impact on them?
- Are the controls in place effective and being implemented on a timely basis to achieve the target risk score?
- Have risk scores changed, and if so, are they decreasing or increasing?
- If risk profiles are increasing, what further controls might be needed? Does the risk need to be escalated to senior management and escalated to a higher risk register?
- If risk profiles are decreasing, can the risk be closed or transferred to an operational level?

The monitoring and review process should be integrated into existing business processes (for example as part of management team meetings when monitoring the corporate/ business / project plan or even used as the agenda itself) so that it adds value and supports the successful achievement of objectives and is not just seen as a 'bolt on'. Where objectives have not been achieved or are not on course to be achieved, the cause(s) should be investigated to inform and improve the risk assessment process.

Management, senior management, project/ partnership boards and elected members all have a responsibility to monitor risks. As such, risks should be regularly reported by risk owners and discussed as appropriate, at management teams, or project/ partnership board meetings and where required, with Cabinet Members.

Risk in Decision Making Reports

It is vital that an options appraisal is carried out at the outset of any project; expenditure or opportunity, identifying and assessing both the benefits and the risks associated with each option and the resources required to control any risks to an acceptable level.

No decision is risk free. As such, the decision making report requesting approval, should clearly set out the risks associated with the preferred option/ recommendations being sought, and not just the risks if the report/ request is not approved. Only then can a fully risk based informed decision be made.

The report should include details of any significant risks if the decision is approved, how these will be controlled and where and by whom they will be reported and monitored.

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Audit and Risk Assurance Committee

15 November 2022

Subject:	Housing Directorate Risk Register Report
Director:	Director of Housing Gillian Douglas
Contact Officer:	Audit Services Business Partner Narinder Phagura Narinder_phagura@sandwell.gov.uk

1 Recommendations

1.1 To note and comment on the directorate risks.

2 Reasons for Recommendations

2.1 Effective risk management is a key element of good corporate governance, as noted in the council's [Code of Corporate Governance](#), and is essential to the overall performance of the council in meeting its corporate plan objectives. Good risk management will ensure that resources are used efficiently and effectively and that assets and resources are protected against risk in the most efficient way.

2.2 The role of the ARAC is to provide assurance to the Council that it has a system of governance, risk management and internal control in place and that the adequacy and effectiveness of these arrangements continue to inform decision making. Thereby, it provides assurance that risks to the delivery of the council's key priorities are being managed.

2.3 The Committee will be aware that these risks are managed through the council's risk management process which is set out in its Corporate Risk



Management Strategy, and involves the development of risk registers at strategic, directorate, operational and project levels.

Risk hierarchy









- 2.4 Ownership of the individual directorate risks is assigned to the director and service managers, who have responsibility to:
- Consider and agree the risk description
 - Assess the current risk score based upon the controls in place and the assurances they have received on the adequacy and effectiveness of these controls
 - Implement mitigating actions to reduce the risk scores where necessary, in order to deliver the target risk score by the target date.
- 2.5 The Director is also responsible for keeping the Cabinet Members informed of the relevant risks that fall within their portfolio and the implementation of mitigating actions.
- 2.6 Further ongoing reviews of the directorate register are undertaken by the Directorate Management Team on a regular basis.
- 2.7 A summary of the directorate risks is included at Appendix A of this report which notes 2 risks that are currently assessed as red, 7 amber risks and 2 green risks. This summary register should be considered alongside the council's strategic risk register which also includes risks



which the directorate has responsibility for managing or will contribute to the management of.

3 How does this deliver objectives of the Corporate Plan?

	Best start in life for children and young people
	People live well and age well
	Strong resilient communities
	Quality homes in thriving neighbourhoods
	A strong and inclusive economy
	A connected and accessible Sandwell
	The report details the key directorate risks that need to be managed to ensure that they do not negatively impact on the delivery of the directorate business plan and thereby the Corporate Plan objectives.

4 Context and Key Issues

4.1 This report updates the Committee on the profile of the key risks currently faced by the Housing directorate. The directorate risk register may not include all of the risks faced by the directorate. Other risks are captured within service, programme and project risk registers and assessments, in line with the Council's risk management framework as noted above.

4.2 The directorate incorporates the following areas:

- Tenancy and estate management
- Homelessness, allocations and housing policy
- Private sector housing
- Income and rents
- Community and voluntary sector
- Neighbourhood management and community centres



- Building maintenance and improvements
- Building safety and premise management

- 4.3 The Housing directorate provides the Council’s landlord function, managing 27,000 homes occupied by Sandwell residents. It has responsibility for carrying out emergency and planned repairs, property maintenance, safety checks and upgrades and refurbishments to the stock.
- 4.4 The directorate sets and collects the rent and service charges from tenants. It delivers neighbourhood support to tenants, welfare rights and debt advice to people in need of financial help and community centres that are either managed by the Council or by the voluntary and community sector. The Directorate also has responsibility for delivering floating support to vulnerable people and for administering Disabled Facilities Grants through the Home Improvement Agency.
- 4.5 The directorate has overarching responsibility for meeting housing need and works closely with other directorates and partners to deliver new build and specialist housing as well as access to our existing stock for the people who need it most. All of its work is underpinned by a commitment to tackling climate change, promoting diversity and tackling deprivation and inequalities.
- 4.6 The risk register is a live document and reflects the risk profile at the time of preparing this report in October 2022. The risks undergo ongoing review to ensure they remain appropriate and are assessed in order to aid informed decision making and resource allocation.
- 4.7 An update of the risks, including the measures in place to mitigate them are included within appendix A.

5 Alternative Options

- 5.1 Whilst this report does not require a decision and therefore, alternative options do not need to be considered, when measures are being



considered for the mitigation of each of the directorate risks, this takes in to account any alternative options available.

6 Implications

Resources:	The authority's budget planning process incorporates financial and other resources required to manage the authority's risks and deliver the priorities within the corporate plan.
Legal and Governance:	There are numerous standards applicable to the management of risk within the local authority sector. Included amongst these is guidance from CIPFA/Solace, the British Standards Institute (BSI) and a set of joint standards published by the Institute of Risk Management (IRM), Alarm (The public sector risk management association) and AIRMIC (Association of Risk Managers in Industry and Commerce). Evidence that robust management of the authority's risks is being undertaken demonstrates compliance with these standards.
Risk:	The report itself is an update of the key risks facing the directorate.
Equality:	As a decision is not being sought in this report, it is not necessary to undertake an Equality Impact Assessment. However, when measures and decisions are being considered for the mitigation of risks, risk owners must take into account any equalities impact and whether an equalities impact assessment is required.
Health and Wellbeing:	The management of risk takes into account where appropriate, the implications on health and wellbeing of our communities.
Social Value	The actions and decisions that are being considered for the mitigation of the risks, will take into account



	where appropriate, the meeting of the Council's social value commitments.
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7. Appendices

Appendix A – Directorate risk register summary as at October 2022

8. Background Papers

None

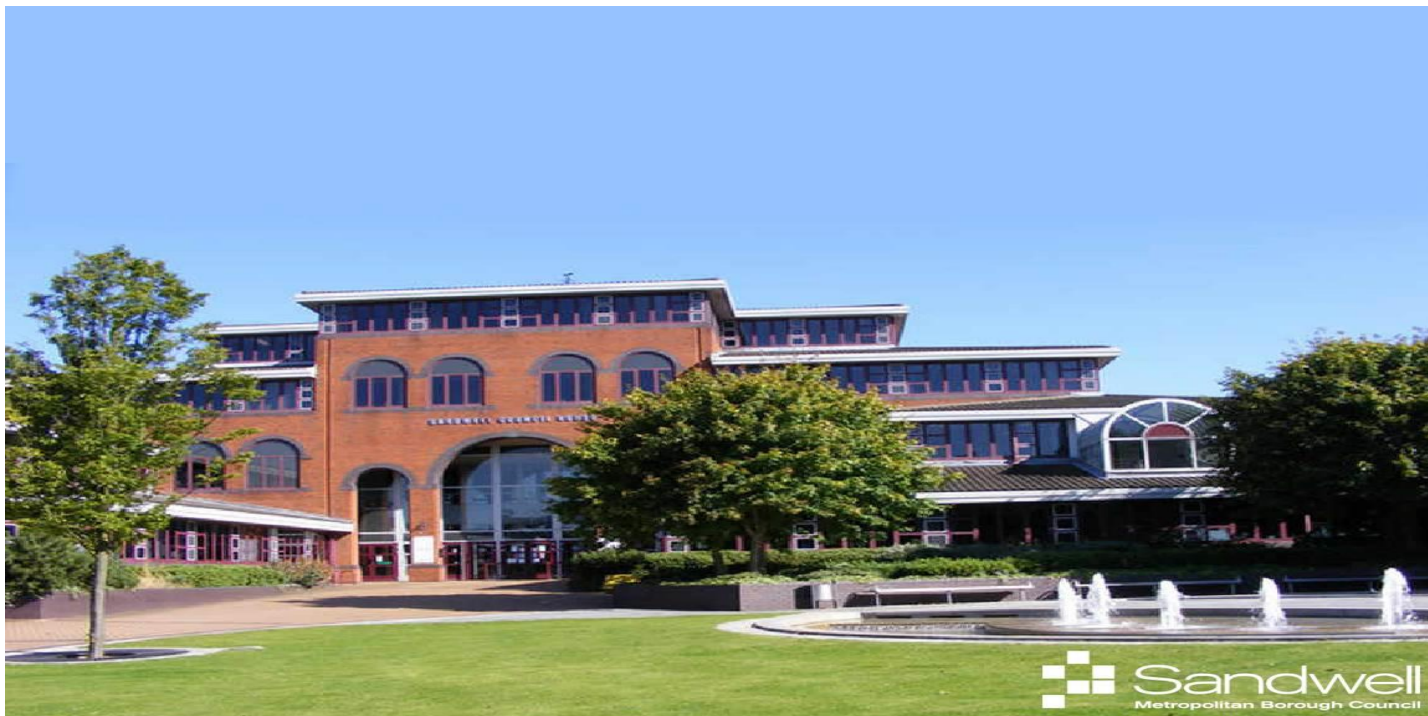


Appendix A

Profile of Current Strategic Risk Scores

RED	2
AMBER	7
GREEN	2

Summary Housing Directorate Risk Register @ October 2022



1. Best start in life for children and young people



2. People live well and age well



3. Strong resilient communities



4. Quality homes in thriving neighbourhoods



5. A strong and inclusive economy






6. A connected and accessible Sandwell


Housing directorate business plan priorities


Page 172


1. Preventing homelessness	3. Raising standards in the private rented sector	4. Community Focussed-working with tenants, residents and the voluntary and community sector to co-produce services and solutions	5. Quality Homes in thriving neighbourhoods– council housing that is high quality, safe and energy efficient	6. Tackling deprivation and inequalities and improving quality of life and wellbeing of tenants and residents					
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Risk Ref	Risk Title and Description	Previous score	Movement in score	Current score (Oct 22)	Target score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
01	<p>Procurement and Contract Management</p> <p>If management of the procurement process and ongoing contract management across the directorate is not effective and there is non-compliance with the new procurement rules, it could potentially result in a challenge from unsuccessful bidders and poor value for money.</p> <p>Risk owner – Interim Assistant Director, Asset Management and Improvement</p> <p>Priorities impacted: 2, 5.</p>	9 (amber)		9 (amber)	6 (green) 31/3/23	<p>Current and ongoing controls</p> <ul style="list-style-type: none"> Contractors appointed for all areas of housing maintenance. Procurement of additional contractors to assist with repairs backlog from Covid. KPIs in place for all contracts to enable effective contract management and contingency planning in the event of contract failure. Further actions Seek assurance in respect of compliance with new procurement rules – 30/11/22 All Business Managers and directors to complete Finance and Procurement Training – 30/11/22 Review compliance with the Construction, Design and Management Regulations 2015 in relation to the client, designer, and delivery functions for major projects – 31/3/23


Risk Ref	Risk Title and Description	Previous score	Movement in score	Current score (Oct 22)	Target score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
02	<p>HRA Business Plan</p> <p>If the Council does not have a long term (30 year) business plan in place for its housing revenue account, developed with input from tenant and leaseholders, then this will result in an ineffective allocation of limited resources and failure to achieve the Council's long term housing ambitions and priorities.</p> <p>Risk owner – Director of Housing with Finance Business Partner</p> <p>Priorities impacted: 2, 4, 5, 6.</p>	8 (amber)		8 (amber)	4 (green) 28/2/23	<p>Current and ongoing controls</p> <ul style="list-style-type: none"> Tenant and Leaseholder Scrutiny Group in place and being consulted on the plan HRA officer group in place with terms of reference re oversight of HRA HRA budget monitoring ongoing Business Continuity Plans in place and to be reviewed. Annual review of rent and service charges Annual Report for tenants published for transparency of performance and spend <p>Further actions</p> <ul style="list-style-type: none"> HRA Business Plan to go to Cabinet for adoption in following consultation with key stakeholders, including Sandwell Community Information and Participation Service (SCIPs) – February 2023 Proposals for rent and service charge increases to be put forward for Cabinet decision as Business Plan is built on rent and service charge income – December 2022 Detailed review of service charges to be completed – June 2023
03	<p>Management of Private Finance Initiative (PFI) project and Tenant Management Organisations (TMOs)</p> <p>If appropriate governance and contract monitoring arrangements are not in place to manage and monitor the PFI contract and relationships with the TMOs then there is a risk to:</p> <ul style="list-style-type: none"> Quality and effectiveness of service provided to tenants Robust and effective decision making 	6 (green)		6 (green)	6 (green) Achieved	<p>Current and ongoing controls</p> <ul style="list-style-type: none"> 25-year contract and monitoring arrangements in place with Riverside Housing for delivery of the PFI project (Hawthorns Estate) Service agreements in place with Cotterills Farm Housing Management Cooperative Ltd and Boscobel Estate TMO Ltd Rolling programme of audits of PFI delivery is in place and undertaken by Internal Audit


Risk Ref	Risk Title and Description	Previous score	Movement in score	Current score (Oct 22)	Target score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
	<ul style="list-style-type: none"> Quality of the housing provided Safety of residents Value for money being achieved <p>Risk owner – Director of Housing with Principal Accountant, Regeneration and Growth</p> <p>Priorities impacted: 5</p>					<p>Further actions</p> <ul style="list-style-type: none"> Review service agreements and monitoring arrangements with the TMOs to ensure accountabilities are clear and understood by both parties – 31/3/23
04	<p>Homelessness and Temporary Accommodation</p> <p>An increase in demand for Temporary Accommodation is realised due to the increase in the numbers of households who approach the Council in housing crisis. This is further exacerbated by the implications of the current economic environment.</p> <p>If the council does not have appropriate arrangements and housing policies in place, then it will be unable to serve those in most need of housing and use limited resources ineffectively by spending on expensive short term temporary accommodation arrangements.</p> <p>Risk owner – Service Manager, Housing Management</p> <p>Priorities impacted: 1, 2.</p>	12 (red)		8 (amber)	4 (green) December 2022	<p>Current and ongoing controls</p> <p>The service has a range of mitigating actions in place and underway to reduce the number of people who present as homeless escalating into relief duty and requiring temporary accommodation.</p> <ul style="list-style-type: none"> New Homelessness and Rough Sleeper Strategy adopted 2022 New service operating model introduced in 2022 to focus on early intervention and prevention Private Rental Sector (PRS) Secure and Sustain model to increase the available properties for our customers Call Before You Serve model in place to reduce the volume of presentations from the PRS Protocols in place with Children's Trust to implement early intervention and prevention model for care leavers and young people Housing First methodology embedded into the complex hub operating model providing sustainable accommodation for rough sleepers Applewood Grove providing 21 high quality temporary accommodation units to homeless households and avoiding the need for higher cost spot purchases. Opening of Complex Hub accommodation and assessment centre for single homeless people at Holly Grange



Risk Ref	Risk Title and Description	Previous score	Movement in score	Current score (Oct 22)	Target score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
						Further actions <ul style="list-style-type: none"> Manifoldia Grange due to open to provide in-house temporary accommodation for families in November 2022 Re-procurement of hotels for use as TA due to be completed December 2022
05	<p>Housing Rental Income</p> <p>If a reduction in housing rental income is experienced as a result of rent arrears; voids; welfare reform and the current economic environment and cost of living crisis, then this may lead to budgeted levels of income not being achieved and a shortfall in the housing funds available to the Council, thereby impacting on the HRA short and medium term plans.</p> <p>Risk owner – Service Manager, Housing Management</p> <p>Priorities impacted: 5</p>	4 (green)		8 (amber)	4 (green) 30/6/23	Current and ongoing controls <ul style="list-style-type: none"> Performance indicators for rent collection are in place and monitored monthly. Digital Transformation, enhancing the customer experience, reducing avoidable contact and creating efficiency across Income & Money Advice Services. Income Management are working with CAPITA (Open Housing) to improve the Rent Accounting Module. Extension of contract with Mobyssoft software that enables early intervention with tenants struggling to pay rent. Partnership working with the West Midlands Best Practice Group, DWP, Six Towns Credit Union and Citizens Advice Bureau. Direct referral to Welfare Rights Team to secure welfare benefits and maximise income for residents. HRA is used to top up the Discretionary Housing Payments budget and assist tenants at risk of homelessness. Digital access for customer to manage their rent account and make payments via My Sandwell Regular write-off of bad debt in compliance with corporate debt and tenant arrears write-off

Risk Ref	Risk Title and Description	Previous score	Movement in score	Current score (Oct 22)	Target score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
						<p>policies and procedures</p> <p>Further actions</p> <ul style="list-style-type: none"> Promoting Direct Debit as preferred and secure option for tenants - ongoing Working in partnership corporately to identify a telephony solution which will support outbound dialling and text options to reduce abortive work from manual contacts. Summer 2023.
06	<p>Compliance with Building Safety Act 2022, the Fire Safety Regulations 2022 and building safety requirements.</p> <p>If the Council does not put in place appropriate processes and controls to ensure compliance with Building Safety regulations and guidance, then this could result in:</p> <ul style="list-style-type: none"> A risk of injury and even death to tenants, leaseholders and members of the public Reputational harm Exposure to regulatory action including corporate manslaughter and financial penalties to Council The triggering of investigations and sanctions by the Building Safety Regulator and/or Regulator of Social Housing Risk of individuals being prosecuted as well as the council itself <p>Risk owner – Interim Assistant Director, Asset Management and Improvement</p>	8 (amber)		8 (amber)	4 (green) April 2023	<p>Current and ongoing controls</p> <ul style="list-style-type: none"> Programme of work in place under Building Safety (officer) Group including monitoring of compliance dashboard and improving robustness of the data that sits below KPIs. Building Safety Board in place, chaired by Lead Member for Housing. Building safety training being delivered to teams. Home checks are being rolled out to identify tenants with vulnerabilities. Capital programme delivering major refurbishments and upgrades to blocks. External improvement programme in place to insulate with external wall insulation /cavity wall insulation to increase the energy performance certificate rating, also helping to reduce fuel costs and progress decarbonisation. <p>Further actions</p> <ul style="list-style-type: none"> Remedial actions arising from Fire Risk Assessments are being reviewed and remedial actions followed up where not actioned within date – 31/10/22 Restructuring of Asset Management and Improvement service is being carried out and will reflect new building safety and energy

Risk Ref	Risk Title and Description	Previous score	Movement in score	Current score (Oct 22)	Target score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
	Priorities impacted: 5					<p>efficiency/climate change duties and accountabilities – 31/3/23</p> <ul style="list-style-type: none"> Electrical Installation Condition Reports to be brought within 5 year requirement by December 2022 following self-referral to the Regulator of Social Housing in 2022 – 31/12/22 Building Safety Programme progress reporting to be overseen by Housing Transformation Board – 31/12/23 Develop a Compliance Strategy that sets out how our legislative responsibilities will be met including how we will develop digital records for all properties – 31/3/23 Collate required information on high risk buildings that will be required by the BSR from April 2023 Identify role competences and put training in place, if required, to ensure relevant roles/officers can demonstrate the required competences – 31/3/23
07	<p>Compliance with the Social Housing (Regulation) Bill, including the Consumer Standards</p> <p>If the council does not put in place measures and actions to comply with the new regulatory framework there is a risk of:</p> <ul style="list-style-type: none"> Not delivering services to the standards required or in line with tenant/leaseholder priorities Inability to report against the prescribed tenant satisfaction measures (TSMs) Non-compliance resulting in intervention by the Regulator of Social Housing and/or Building Safety Regulator Harm to residents 	8 (amber)		8 (amber)	4 (green) 31/3/23	<p>Current and ongoing controls</p> <ul style="list-style-type: none"> Training programme in place Stock condition surveys being procured to inform stock improvements including safety and energy efficiency improvements Tenant satisfaction survey has been commissioned and is being rolled out October 2022 with results available in December 2022 KPIs being monitored and reviewed Annual Report published Summer 2022. <p>Further actions</p> <ul style="list-style-type: none"> Work to be done to improve systems for recording and reporting on all KPIs including safety measures. This may require procurement of a new system. Project to commence in

Risk Ref	Risk Title and Description	Previous score	Movement in score	Current score (Oct 22)	Target score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
	<ul style="list-style-type: none"> Low levels of tenant and leaseholder satisfaction Poor rating by the RoSH following inspection Reputational damage and loss of resident confidence <p>Risk owner – Service Manager, Housing Management</p> <p>Priorities impacted: 4, 5.</p>					<p>November 2022, timescales for completion to be confirmed once scope agreed.</p> <ul style="list-style-type: none"> Prepare for 'mock' inspection to test preparedness for actual RoSH inspection and implement the learning including areas for improvement - Autumn 2023
08	<p>Housing Disrepair and Stock Conditions</p> <p>If the Council does not have effective and robust arrangements in place to identify the condition of its housing stock, and carry out the necessary repairs and improvements, including energy efficiency improvements, then this will result in:</p> <ul style="list-style-type: none"> Poor and inefficient housing stock Non-compliance with the Homes (Fit for Habitation) Act 2018 Housing disrepair claims being made against the Council and Withholding of rent payments. <p>Risk owner – Interim Assistant Director, Asset Management and Improvement</p>	12 (red)		12 (red)	8 (amber) 31/3/23	<p>Current and ongoing controls</p> <ul style="list-style-type: none"> HRA capital programme in place to deliver stock improvements programmes including increasing the energy performance certificate rating of homes and helping to reduce fuel costs and progress towards decarbonisation. New contracts for repairs in place from 1 October 2022 to address the backlog. Disrepair claims being managed by Asset Management and Improvement Service to ensure priority repairs are fast-tracked. <p>Further actions</p> <ul style="list-style-type: none"> 14,000 (50% of total stock) stock conditions surveys about to be procured following the Cabinet's decision in September 2022. This data will inform future improvement programmes. Consider engaging external resource to deal with disrepair claims – 31/12/22

Risk Ref	Risk Title and Description	Previous score	Movement in score	Current score (Oct 22)	Target score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
	Priorities impacted: 5, 6					
09	<p>Right to Buy (RTB), Replacement of Housing Stock and Supply of Affordable Housing</p> <p>If there is a continuing and significant number of RTBs and reduced availability of affordable housing (private rented and social housing) then this will result in:</p> <ul style="list-style-type: none"> • An increased erosion of social housing stock and longer waiting lists • Increase in temporary accommodation costs • Increases in housing benefit costs • Increased risk of homelessness • Impact on the viability of contracts with TMOs and the PFI. <p>Risk owner – Director of Housing</p> <p>Priorities impacted: 1, 2.</p>	8 (amber)		8 (amber)	8 (amber) 31/3/23	<p>Current and ongoing controls</p> <ul style="list-style-type: none"> • Housing Needs Assessment 2022 produced to identify housing demands and needs for greater supply of affordable housing, by housing type/size. • RTB assumptions (250 pa) and need for land acquisitions and a new build programme built in to new 30-year HRA Business Plan. • New build council housing programme underway (target 195 homes, to start on site by March 2023). Programme is informed by needs of households on the housing register (waiting list). <p>Further actions</p> <ul style="list-style-type: none"> • Further develop relationships with private sector landlords and incentive schemes in order to access properties for households in need – 31/3/23 • Adopt and implement the Empty Homes Strategy to bring more empty homes in to use – December 2022 • Review the council's voids process to minimise turnaround times – 31/3/23 • Review of stock to identify properties that may be exempt from RTB to provide clarity to tenants on the status of those properties before applications are submitted – 31/3/23

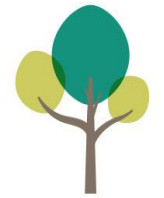
Risk Ref	Risk Title and Description	Previous score	Movement in score	Current score (Oct 22)	Target score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
10	<p>Inflation, supply chain resilience and workforce capacity</p> <p>There is a risk that the current and forecast levels of inflation, constraints in the job market and our workforce profile will impact upon:</p> <ul style="list-style-type: none"> • The successful delivery of the existing contracts in place • The cost of procuring future services and contracts within the expected and budgeted values • The resilience of the directorate's key supply chains • The directorate's ability to recruit and retain staff, particularly trades and technical roles <p>Risk owner – Interim Assistant Director, Asset Management and Improvement</p> <p>Priorities impacted: 5</p>	8 (amber)		12 (red)	8 (amber) 31/3/23	<p>Current and ongoing controls</p> <ul style="list-style-type: none"> • Strategic Investment Unit assesses contract costs and value for money. • Contingency amounts built into contract costs to allow for justifiable increases that can be approved using delegated powers. <p>Further actions</p> <ul style="list-style-type: none"> • Review and improve compliance with CDM (Construction, Design and Management) to ensure effective management of major programmes and reduce risk of slippage and escalating costs – 31/3/23 • Review roles for job-evaluation to reflect market rates and better compete with the private sector – 31/12/22 • Ongoing Investment in the wellbeing of staff with Occupational Health Initiatives to manage sickness absence, morale and productivity – 31/3/23
11	<p>Security of assets/ stores</p> <p>There is a risk that a lack of robust, adequate and effective controls in place at Stores could result in inaccurate and poor stock control systems, impact on service delivery, the loss of stock and fraud.</p> <p>Risk owner – Interim Assistant Director, Asset Management and Improvement</p>	6 (green)		6 (green)	3 (green) 30/6/23	<p>Current and ongoing controls</p> <ul style="list-style-type: none"> • Regular stock-takes performed and any significant variances between book and physical stock are investigated. <p>Further actions</p> <ul style="list-style-type: none"> • Review and improve arrangements for use of Stores by external contractors, reducing risks of non-payment where contract fails, or contractor ceases trading – June 2023

Risk Ref	Risk Title and Description	Previous score	Movement in score	Current score (Oct 22)	Target score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
	Priorities impacted: 5					

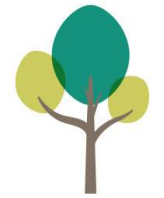
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The following items set out key decisions to be taken by the Executive in public session:-

	Title/Subject	Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
1	<p>Grant funding for advice services 2023/24 – 2025/26</p> <p>Contact Officer: Heather Chinner</p> <p>Directors: Director of Housing - Gillian Douglas, Director of Public Health - Lisa McNally - Director of Children’s Services and Education - Michael Jarrett</p>	<p>Cabinet – Adults Social Care & Health (Cllr Hartwell)/ Children & Education (Cllr Hackett)/ Communities (Cllr Millard)/ Housing (Cllr Padda)</p>	7 December 2022		Cabinet report



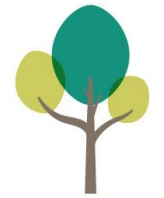
Title/Subject		Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
2	<p>Re-Commissioning of the Pre-& Post Dementia Diagnostic Support Service</p> <p>Contact Officer: Maxine Groves</p> <p>Director: Rashpal Bishop - Director of Adult Social Care</p>	<p>Cabinet - Adults Social Care and Health (Cllr Hartwell)</p>	<p>7 December 2022</p>		<p>Cabinet Report and Engagement Report</p>



	Title/Subject	Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
3	<p>Application to Secretary of State for Education for change of use/appropriation of Denbigh Drive</p> <p>Contact Officer: Rachel Hill</p> <p>Director of Children and Education, Michael Jarrett</p>	<p>Cabinet - Children & Education (Cllr Hackett)</p>	<p>7 December 2022</p>		<p>Report</p>



	Title/Subject	Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
4	<p>Childcare Sufficiency Report 2022/2023</p> <p>Contact Officer: Sara Baber/Sally Dowie</p> <p>Director of Children’s Services and Education, Michael Jarrett</p>	<p>Cabinet - Children & Education (Cllr Hackett)</p>	<p>7 December 2022</p>		<p>Report</p>



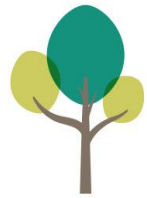
	Title/Subject	Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
5	<p>Uplands Manor Primary School; Re-design and expansion of Special Educational Needs provision consultation responses as per the Making significant changes ('Prescribed alternations') to maintained schools</p> <p>Contact Officer: Rachel Hill</p> <p>Director of Children's Services and Education, Michael Jarrett</p>	<p>Cabinet - Children and Education (Cllr Hackett)</p>	<p>7 December 2022</p>		



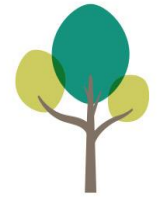
Title/Subject		Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
6	<p>Community Hubs</p> <p>Contact Officer: Director of Business Strategy – Neil Cox and Director of Housing – Gillian Douglas</p>	<p>Cabinet - Communities (Cllr Millard)</p>	7 December 2022		
7	<p>Oracle Fusion Implementation Update</p> <p>Contact Officer: Simone Hines</p> <p>Director of Finance – Simone Hines</p>	<p>Cabinet - Finance & Resources (Cllr Piper)</p>	7 December 2022		



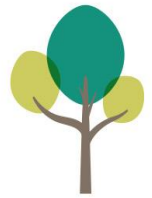
Title/Subject		Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
8	<p>Adult Social Care Direct Payments Policy</p> <p>Contact Officer: Kay Murphy</p> <p>Directors: Rashpal Bishop Director of Adult Social Care/Simone Hines – Director of Finance</p>	<p>Cabinet – Finance & Resources (Cllr Piper)</p>	<p>7 December 2022</p>		



	Title/Subject	Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
9	<p>Annual Tenant Rent Review</p> <p>Contact Officer – Nigel Collumbell</p> <p>Director – Gillian Douglas, Director of Housing</p>	<p>Cabinet – Housing (Cllr Padda)</p>	<p>7 December 2022</p>		<p>Appendix 1 Impact of on Average Weekly Rents</p> <p>Appendix 2 Impact on customers on partial benefits</p> <p>Appendix 3 Rental from service charges and Impact on weekly charges</p> <p>Appendix 4 Rental Increase and Impact on Budgets</p> <p>Appendix 5 Briefing note - Hardship interventions to supporting tenants in rent arrears</p>



	Title/Subject	Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
10	<p>2023-24 Asset Management Investment Programme for Housing</p> <p>Contact Officer: J Rawlins</p> <p>Director: Gillian Douglas, Director of Housing</p>	<p>Cabinet - Housing (Cllr Padda)</p>	<p>7 December 2022</p>		
11	<p>Empty Homes Strategy</p> <p>Contact Officer: Richard Hawkins</p> <p>Director: Gillian Douglas, Director of Housing</p>	<p>Cabinet - Housing (Cllr Padda)</p>	<p>7 December 2022</p>		



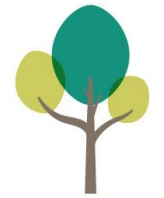
	Title/Subject	Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
12	<p>Update on Streamlining Black Country Ways Of Working – Black Country Consortium Ltd</p> <p>Contact: Hywel Ruddick, Black Country Consortium</p>	<p>Cabinet - Leader of the Council (Cllr Carmichael)</p>	<p>7 December 2022 (private item)</p>		
13	<p>City Region Sustainable Transport Settlement and Local Transport Capital Programme Update</p> <p>Contact Officer: Andy Miller</p> <p>Director: Tony McGovern - Director of Regeneration & Growth</p>	<p>Cabinet - Regeneration and Growth (Cllr Hughes)</p>	<p>7 December 2022</p>		



	Title/Subject	Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
14	<p>Chance Glasswork Trust Memorandum of Understanding</p> <p>Contact Officer: Tammy Stokes</p> <p>Director: Tony McGovern</p>	<p>Cabinet - Regeneration & Growth (Cllr Hughes)</p>	7 December 2022		
15	<p>The Local Plan in Sandwell – Approval To consult on Issues Options and to open a Call For Sites</p> <p>Contact Officer: Andy Miller – Strategic Planning & Transportation Manager</p> <p>Director: Tony McGovern – Director Regeneration & Growth</p>	<p>Cabinet - Regeneration & Growth (Cllr Hughes)</p>	7 December 2022	No	



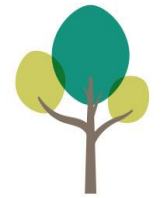
	Title/Subject	Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
16	<p>On-Street Residential Charging Scheme – Appointment of Contractor</p> <p>Contact Officer: Andy Miller – Strategic Planning & Transportation Manager</p> <p>Director: Tony McGovern – Director Regeneration & Growth</p>	<p>Cabinet - Regeneration & Growth (Cllr Hughes)</p>	<p>7 December 2022</p>	<p>No</p>	



	Title/Subject	Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
17	<p>Asset transfer of Greets Green Resource Centre and adjoining land to the Confederation of Bangladeshi Organisations (CBO) Ltd</p> <p>Contact Officers: Stefan Hemming</p> <p>Director: Tony McGovern – Director Regeneration and Growth</p>	<p>Cabinet - Regeneration & Growth (Cllr Hughes)</p>	7 December 2022		



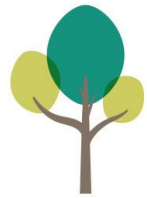
	Title/Subject	Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
18	<p>Trees Strategy and Policy</p> <p>Contact Officer: Matthew Huggins</p> <p>Director – Borough Economy, Alice Davey</p>	<p>Cabinet - Environment Service (Cllr Ahmed)</p> <p>Leisure and Tourism (Cllr Rollins)</p>	January 2023		



	Title/Subject	Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
19	<p>Levelling Up Fund Local Authority Memorandum of Understanding, Grant Determination Letter & Assurance Framework</p> <p>Contact Officer: Jenna Langford</p> <p>Director: Tony McGovern, Director of Regeneration and Growth</p>	<p>Cabinet - Regeneration & Growth (Cllr Hughes)</p>	<p>January 2023</p>		

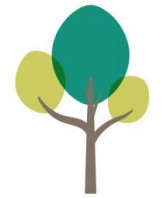


	Title/Subject	Decision Maker	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
20	<p>Adoption of Housing Revenue Account 30 Year Business Plan</p> <p>Contact Officer: Gillian Douglas</p> <p>Director: Gillian Douglas, Director of Housing</p>	<p>Cabinet – Housing (Cllr Padda)</p>	<p>8 February 2023</p>		
21	<p>Housing Strategy 2023 - 2028</p> <p>Contact Officer: Louis Bebb</p> <p>Director: Gillian Douglas, Director of Housing</p>	<p>Cabinet – Housing (Cllr Padda)</p>	<p>15 March 2023</p>	<p>SNAC 24 November 2022</p>	<p>Housing Strategy 2023 - 2028</p>



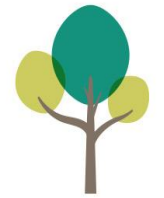
The following items set out key decisions to be taken by the Executive in private session:-

Title/Subject	Cabinet Portfolio Area	Decision Date	Reason for Exemption	List of documents to be considered
<p>Update on Streamlining Black Country Ways Of Working – Black Country Consortium Ltd</p> <p>Contact Officer: Hywel Ruddick, Black Country Consortium</p>	<p>Cabinet - Leader of the Council (Cllr Carmichael)</p>	<p>7 December 2022 (private item)</p>	<p>Financial or business affairs of any individual</p>	



Annual Programme Reminder (these items are not added automatically)

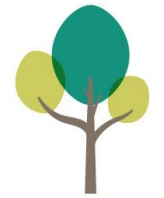
Title/Subject	Cabinet Portfolio Area	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
Review of Fees and Charges		January		
Determination of Admission Priorities for Sandwell's Community and Voluntary Controlled Schools		January/February		
Schools Funding		December/January		
Quarter 3 Budget Monitoring		February		
Council Finances		February		
Financial Regulations		February		
Business Plans		February		
Highways Asset Management Plan		March		



Title/Subject	Cabinet Portfolio Area	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
Local Transport Settlement		March		
Revenues and Benefits Policy framework 2022/23		March		
Schools Capital Programme		April to June		
Financial Outturn		May		
Procurement and Contract Procedure Rules		July		
Review of Fees and Charges Sandwell Residential Education Services Centre Charges		May – July		
Childcare Sufficiency Report		July - September		



Title/Subject	Cabinet Portfolio Area	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
Quarter 1 Budget Monitoring		August		
Model Schools Pay Policy		October/November		
Winter Service Operational Plan		October/November		
Road Safety Plan		November		
Quarter 2 Budget Monitoring		November		
Council Tax Base Calculation		December		
Business Rates Retention Estimates		December		
Council Tax Reduction Scheme		December		



Audit and Risk Assurance Committee Work Programme 2022/2023

Date of Meeting	Item	Responsible Officer
28 June 2022 (Reports due 15 June)	Strategic Risk Register	Narinder Phagura
	Council Improvement Plan	Kate Ashley
	Improvement Plan Risk Register	Kate Ashley
21 July 2022 (Reports due 11 July)	Counter Fraud Annual Report	Oliver Knight
	Annual Internal Audit Report 2021/22	Peter Farrow
	Auditors Annual Report 2020-21	Mark Stocks
	Directorate Risk Register – Children’s Services	Michael Jarrett

Date of Meeting	Item	Responsible Officer
22 September 2022 (Reports due 9 September)	Council Improvement Plan Update	Kate Ashley/ Rebecca Jenkins
	Improvement Plan Risk Register	Kate Ashley/Rebecca Jenkins
	Local Government and Social Care Ombudsman's Annual Report 2021/22	Neil Cox
	Audit and Risk Assurance Committee Annual Report	Chair/Peter Farrow
	Strategic Risk Register Update	Narinder Phagura
	Directorate Risk Registers (x2) – Law and Governance/Adult Social Care	Narinder Phagura in consultation with directorates.
15 November 2022 (Reports due 2 November)	Corporate Risk Management Strategy	Narinder Phagura
	Code of Corporate Governance (Deferred)	Surjit Tour/Elaine Newsome
	Internal Audit Update	Peter Farrow
	Council Improvement Plan Update	Kate Ashley/Rebecca Jenkins
	Improvement Plan Risk Register	Kate Ashley/Rebecca Jenkins
	Directorate Risk Registers (x1)	Gillian Douglas
	Statement of Accounts 2020/21 (Deferred)	Simone Hines/Rebecca Maher
	Internal Audit Charter	Peter Farrow

	ICT Incident Report	Narinder Phagura/Lee constable
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Date of Meeting	Item	Responsible Officer
19 January 2023 (Reports due 9 January)	Council Improvement Plan Update	Kate Ashley/ Rebecca Jenkins
	Directorate Risk Registers (x2)	Neil Cox and Tony McGovern
	Counter Fraud Update	Oliver Knight
	Internal Audit Update	Peter Farrow
	Code of Corporate Governance (TBC)	Elaine Newsome/Surjit Tour
	Statement of Accounts 2021 (TBC)	Simone Hines/Rebecca Maher
16 March 2023 (Reports due 3 March)	Strategic Risk Register Update	Narinder Phagura
	Council Improvement Plan Update	Kate Ashley/Rebecca Jenkins
	Directorate Risk Registers (x2)	TBC
	Internal Audit Update	Peter Farrow
	Internal Audit Plan 2023/24	Peter Farrow
	Financial Management Code Action Plan Update	Rebecca Maher
	Audit and Risk Assurance Committee Terms of Reference Review	Peter Farrow

Items – date to be determined:
Statement of Accounts 2021/22
Grant Thornton Updates i.e. External Audit Plan, External Audit Updates, Informing the Risk Assessment etc.
Financial Management Code
Governance Statement 2022/23
Estimates Letter for 2022/23'
Grant Thornton - Annual Audit Letter 2022/23
Review of the Constitution changes from the Governance Review – biannual update

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By virtue of paragraph(s) 7 of Part 1 of Schedule 12A of the Local Government Act 1972.

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