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Agenda Budget and Corporate Scrutiny Management Board

Thursday, 22 September 2022 at 6.00 pm In Committee Room 2 - Sandwell Council House, Oldbury

1 Apologies for Absence

2 Declarations of Interest and Party Whip

Members to declare any interests and party whip matters in relation to the agenda.

3 **Minutes** 5 - 12

To confirm the minutes of the meeting held on 28 July 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 **Scrutiny Review** 13 - 82

To comment on and consider the work undertaken in relation to the scrutiny review.

6 Improvement Plan Progress 83 - 178

To consider and comment upon the progress of the Improvement Plan up to 4 August 2022.



















7 Equality, Diversity and Inclusion Policy 2022 - 179 - 206 Update

To consider and comment on the draft Equality, Diversity and Inclusion Policy 2022.

Kim Bromley-Derry CBE DL Managing Director Commissioner

Sandwell Council House Freeth Street Oldbury West Midlands

Distribution

Councillor Moore (Chair) Councillors Anandou, Fenton, E M Giles, Shackleton and Simms

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Minutes of Budget and Corporate Scrutiny Management Board

Thursday, 28 July 2022 at 6.00 pm In Committee Room 2 at Sandwell Council House, Oldbury

Present: Councillor Moore (Chair);

Councillors Anandou, Fenton, Shackleton, Simms and

Bhullar.

In attendance: Ian Dunn (Service Manager for Revenues and

Benefits), Rebecca Maher (Head of Finance), Charlie Davey

(Finance Business Partner for Adults), Abi Asimolowo

(Finance Business Partner), Matt Powis (Senior Democratic Services Officer) and Anthony Lloyd (Democratic Services

Officer)

29/22 Apologies for Absence

Apologies were received from Councillors Hinchliff and E M Giles.

30/22 Declarations of Interest

There were no declarations of interest.

31/22 Minutes

Resolved that the minutes of the meeting held on 13 July 2022 are approved as a correct record.

















32/22 Additional Items of Business

A Member suggested a review of the current taxi licensing protests should be undertaken by the Board. The Senior Democratic Services Officer suggested that it should, instead, be a concern for the Licensing Committee to investigate before proceeding any further.

It was requested for the Senior Democratic Services Officer to investigate further.

33/22 2021/2022 Financial Outturn

The Head of Finance presented an overview of the 2021 to 2022 Financial Outturn for the Board.

The Board noted that the Council continued to see the impact of the Covid-19 pandemic with the continued reduction in income across many services including car parking and the residential education centre. There was a total overall underspend of £4.8m however, it was noted that the overall net directorate outturn variance excluding the Housing Revenue Account (HRA) increased the underspend to £7.925m which included reserve transfers.

It was noted that multiple Council directorates including Adult Social Care (ASC) and Regeneration and Growth had underspends.

A discussion ensued about whether the underspend could be used to help residents of Sandwell tackle the current cost of living crisis. The Head of Finance explained that due inflation, it would be extremely unlikely that there would be an underspend for the period 2022 to 2023. It was noted that the Council was monitoring the financial position and preparing appropriate budgetary planning.

Members questioned how the re-uptake of staff after years of a reduced workforce, partly due to COVID-19, would impact the budget. The Head of Finance explained that many teams adapted to hybrid working and therefore many of the vacant posts were no longer required. It was also confirmed that salary budgets and staff pay awards were monitored in accordance with budgetary planning and were included in financial projections.

Adult Social Care

The Board sought clarification on why the underspend for Adult Social Care was so high. The Finance Business Partner for ASC confirmed a number of grants and efficiencies had been received and the following responses were highlighted:

- A £1.6m grant was obtained from the Better Care Fund. The Better Care Fund Pool Budget received additional contributions to the budget and reduced its overall expenditure. Therefore, the Council was able to request additional resources.
- A grant for the extremely vulnerable was obtained to help contact vulnerable people during the COVID pandemic.
- The NHS had funded patient discharges for the first four weeks of support for people moving from hospital into the social care system.
- A Domestic Abuse grant was obtained in line with additional statutory requirements. Therefore, funding responsibilities were already allocated.
- £900k was obtained from efficiencies made within services.
- A previous underspend of £1.8m was carried over from the previous year.

Due to the vast amount of grants currently available to the Council, Members requested a report at a future meeting which highlighted value of each fund and information on the applicable service area.

At this point in the meeting Councillor Bhullar left the meeting at 6.36p.m.

Children's Social Care

A lengthy discussion ensued regarding the highlighted overspend by Children's Services and the historical issues with overspends within the directorate.

The Finance Business Partner for Children's Services confirmed that there had been an increase in children requiring care within the Borough. In addition, there were longstanding issues locally and nationally regarding the recruitment and retention of Social Workers which had been a contributor to the overspends within the directorate. Additional funding had been supplied to the Sandwell Children's Trust to alleviate the budgetary pressures associated with COVID. The majority of the overspend against Children's

Services was due to the historical SEND Transport contract, which was not run by SCT.

A Member suggested SCT should prioritise early intervention of children to prevent children requiring care in the first place. This would hopefully reduce the need for foster carers and socials workers in the longer term. It was stated that it may be a useful exercise to compare the Council's early intervention programmes with that of other Local Authorities.

Law and Governance

The Chair requested clarification on both the Law and Governance underspend and whether Section 106 agreements would be spent within the allocated timescales.

The Head of Finance explained that Council had received proceeds of crime income from a recent high-profile case which had been appropriately budgeted. However, it was noted that the aforementioned proceeds would need to be allocated to the directorates and parties involved.

In relation to the Section 106 agreements, it was stated that Council conducted rigorous monitoring of the agreements with updates being regularly reported to the Council's senior leadership team. The Chair confirmed that the Board would receive a report on Section 106 and Community Infrastructure Levy funding at a future meeting.

Housing

The Board expressed their concerns in relation to the current housing underspend. Although an underspend was reported, Members questioned why this was not used to address the current housing repair delays. The Head of Finance confirmed that the underspend would be added to the ring-fenced reserves for Housing to conduct the relevant repairs to the housing stock. A Member confirmed that the Safer Neighbourhoods and Active Communities Board would receive an update report on the timely repairs of Council housing.

A Member sought clarification on whether the Council had dedicated resources for Planning Enforcement. It was confirmed that a response would be provided in writing.

Resolved:-

- that the Head of Finance investigate the viability of providing dedicated funding for planning enforcement;
- (2) that the Safer Neighbourhoods and Active Communities Scrutiny Board receive a report on the Council's housing repairs;
- (3) that a report be presented to a future meeting of the Board about the budget pressure in by Children's Services;
- (4) that a report be presented to a future meeting of the Board on the Council's grants and funds.

34/22 Energy Rebate payments update

The Service Manager for Revenues and Benefits was invited to address the Board in relation to the on-going Energy Rebate payment process.

The following updates were received by the Board:

- Over 90% of residents applying for the Energy Rebate via direct debit had received their payments; the majority being processed in the first month with almost 100,000 residents helped to date.
- There were issues with paying residents that had mismatched address and bank account data.
- Some residents did not pay via direct debit and therefore no direct debit details were available on the system for payments to be processed. This was the equivalent to over 60,000 residents however, those that missed the application deadline would instead receive £150 credit towards their next Council Tax bill.
- Over 5300 requests had been received from residents requesting physical cash payments.
- Some of the most deprived households would be provided with additional funds courtesy of the Council.
- Council staff gained experience and understanding of the service as a result of the scheme. This experience put the Council in a better place to deliver high quality customer service in future.

 Although unconfirmed, an additional rebate scheme was rumoured to be coming in the winter.

Members queried about the possible use of the existing system to automatically process the proposed second energy rebate scheme using existing resident information. The Service Manager for Revenues and Benefits confirmed that it would be possible to use the existing system however, further investigation was required and it would depend on the Government's eligibility criteria for future schemes.

At this point Councillor Shackleton left the meeting at 7.22p.m.

The Board raised concerns about the number of residents still not receiving payments. Several anecdotes were provided by Members to better explain some of their concerns. The Service Manager for Revenues and Benefits confirmed that payments were still being processed over the next few months, alongside the implementation of new software. The Board were reassured that any further complaints can be escalated by Members to the relevant officers for investigation.

Resolved that the update on the Energy Rebate payments update be noted.

35/22 Draft Scrutiny Annual Report 2021/22

The Chair of the Board outlined the draft Scrutiny Annual Report for 2021 to 2022 and requested any amended or comments in relation to the report.

It was suggested that the next Scrutiny Annual Report for 2022 to 2023 incorporate digitalisation tools such as video or infographics. There was a consensus that this method might be a better way to show the hard work carried out by each of the Scrutiny Boards.

Resolved:

(1) that, the Scrutiny Annual Report for 2021 to 2022 be approved for submission to Council.

Meeting ended at 7.34pm.

Contact: <u>democratic services@sandwell.gov.uk</u>





Report to Budget and Corporate Scrutiny Management Board

14 September 2022

| Subject: | Scrutiny Review Update |
|------------------|---|
| Director: | Surjit Tour Director of Law and Governance & Monitoring Officer |
| Contact Officer: | Suky Suthi-Nagra Democratic Services Manager and Statutory Scrutiny Officer |

1 Recommendations

- 1.1 That the work undertaken to date on the scrutiny review be noted.
- 1.2 That the Council be recommended to approve the following improvements, that have been identified as part of the scrutiny review 2022:-
 - (a) the appointment of all scrutiny vice chairs to the Budget and Corporate Scrutiny Management Board, to make a total of 10 members on the Board;
 - (b) subject to (a) above the appointment of a vice chair to the Budget and Corporate Scrutiny Management Board from amongst the new Board membership;
 - (c) the role descriptions for Chairs, Vice Chairs, Overview and Scrutiny Elected Members and Co-opted members as set out in Appendix 1;



















- (d) the following protocols, as set out in Appendix 2, in order to support and promote healthy working relations:-
 - Scrutiny Chairs, Vice Chairs and Scrutiny Elected Members with the Executive; and
 - Scrutiny Chairs, Vice Chairs and Scrutiny Members with Officers.
- (e) Authorisation of the Director Law and Governance and Monitoring Officer to make all necessary consequential changes to the Constitution to give effect to the approved changes.
- 1.3 That the Board approves the Scrutiny Improvement Plan, as set out in Appendix 3 and authorises the Director of Law and Governance and Monitoring Officer and the Statutory Scrutiny Officer to develop communication and engagement protocols/plans as set out in the Plan and provide regular updates to the Board.
- 1.4 That the Scrutiny Handbook, as set out in Appendix 4, be noted and the Director of Law and Governance and Monitoring Officer and the Statutory Scrutiny Officer be authorised to develop further guidance tools and training for both members and officers in order to promote the scrutiny function.
- 1.5 That the Director of Law and Governance and Monitoring Officer and the Statutory Scrutiny Officer, in consultation with the Chair of the Budget and Corporate Scrutiny Management Board, be authorised to continue to review the overview and scrutiny arrangements in Sandwell.

2 Reasons for Recommendations

2.1 The Council commenced a review of the Council's governance arrangements following the Grant Thornton Governance Review, LGA Corporate Peer Review and CIPFA Review. These reviews identified a number of key governance issues that needed to be addressed.



















- 2.2 The reviews specifically identified the need to address underlying constitutional and procedural deficiencies that directly and indirectly undermine or hinder the Council's governance arrangements, decision-making ability and key relationships.
- 2.3. A comprehensive review of the Council's overview and scrutiny arrangements has been ongoing to ensure it remains fit for purpose and aligned to the desired outcomes of Elected Members and the Council.
- 2.4 The review has sought to embed a strong and positive culture amongst Elected Members in relation to the real opportunities that effective overview and scrutiny provides.

Context and Key Issues

- 2.5 Nationally, it is acknowledged that a number of authorities face challenges with their scrutiny function, for e.g. lack of engagement (across the board), making an impact or adding value.
- 2.6 Sandwell Council has not undertaken a comprehensive review of its overview and scrutiny arrangements for a number of years. Good practice advocates a review should be undertaken at reasonable intervals to ensure the overview and scrutiny arrangements remain fit for purpose and aligned to the desired outcomes of Elected Members and the Council.
- 2.7 The Centre for Governance and Scrutiny (CfGS) has identified four key principles that should underpin the work of the Overview & Scrutiny Committee at all times. It should:
 - provide a culture of 'critical friend' challenge to decision makers;
 - enable the voice and concerns of the public and its communities to be heard;
 - conduct the scrutiny function by independent-minded members who will lead and own the process;
 - drive improvements on services.

















- 2.8 Statutory Guidance was released in May 2019 by the former Ministry of Housing, Communities and Local Government. This guidance placed a strong emphasis on scrutiny/executive relationship and early and regular engagement between the Cabinet and Scrutiny which is critical to scrutiny's success as well approaches on what effective scrutiny looks like and how to conduct it.
- 2.9 In undertaking the review, consideration has been given to the statutory guidance and examined how the Council's overview and scrutiny arrangements, including scrutiny outcomes, can be improved so as to reflect recognised good practice. Importantly, the review has sought to embed a strong and positive culture amongst Elected Members in relation to the real opportunities that effective overview and scrutiny provides.
- 2.10 To support the review, the CfGS consulted stakeholders in interview sessions, carried out a desktop exercise and led on an Elected Members survey. In addition to this, officers conducted wider engagement with Elected Members through three bespoke engagement sessions that explored how the Council's overview and scrutiny function and arrangements could be enhanced and the opportunities of scrutiny maximised.
- 2.11 The review collected insight and evidence gathered through engagement sessions, desktop studies, member surveys, analysis against statutory guidance and explored good practice to make evidence-based recommendations.
- 2.12 Engagement with members had revealed that culture was the single most important factor that would determine whether the Council would be able to deliver an excellent overview and scrutiny function that met the needs and expectations of the Council and Elected Members. Accordingly, promoting and encouraging a healthy culture that empowers Elected Members, promotes agile working, new ways of working and innovation is a critical driver for success.
- 2.13 Working with the Chair of the Budget and Corporate Scrutiny Management Board, a number of improvements have been embedded into the scrutiny process to strengthen the Council's overview and scrutiny function as follows:-

















- Strengthen the working relationship between Cabinet and Scrutiny by having regular meetings between scrutiny and cabinet members to look at shaping strategy and policy/decisions as part of pre-decision scrutiny as opposed to operational detail. This way scrutiny can make an impact and be valued for its work. Protocols for scrutiny and executive and scrutiny and officers' have been developed to be clear on roles and expectations (as set out in Appendix 2);
- build parity of esteem with the Executive. Scrutiny needs to be recognised for the value it brings. Historically recommendations by scrutiny have not been responded to by the Cabinet, steps are being taken to address this by regularly reporting recommendations to Cabinet and Leadership Team to ensure a response is provided within the statutory timescale;
- Enable scrutiny members to feel confident in their scrutiny roles. Both internal and external training on what makes good scrutiny have been conducted and will continue to build on learning and development for members by identifying key skills required, producing online training and a scrutiny handbook for members to utilise throughout the year and also bring in external support via the Centre for Governance and Scrutiny to conduct coaching and mentoring for scrutiny chairs to build confidence for them to effectively carry out their role;
- Having a more focussed and exciting work programme. The
 views of members of the public, councillors and MPs have been
 sought this year as part of the work programme on issues of
 concern and aligning them to the objectives of the Corporate Plan
 and Vision 2030. The aim is for the work programme to add value
 with clear objectives, look at policy development, performance
 monitoring, hold to account and support effective decision-making.
 The work programme has to be flexible but also interesting so that
 all members engage;
- Performance Framework. Historically there have been issues with member attendance at scrutiny boards, Scrutiny Chairs are therefore closely monitoring attendance. Job roles for scrutiny members and a performance framework has been developed (as

















set out in Appendix 1) so that all members of the board are clear about their role on a scrutiny board, i.e. attendance at meetings, engaging in discussion, asking meaningful questions, etc;

- Regular meetings to develop and nurture strong, healthy
 working relationships with members and officers. The Chairs of
 scrutiny boards are having regular agenda setting meetings with
 Directors and officers to be clear what the expectation is on reports
 coming to Scrutiny to enable a debate and not just information
 sharing. Scrutiny Board chairs are collectively meeting more
 regularly, whether it is a pre-meeting or prior to Cabinet to agree
 lines of questioning in advance;
- Regular meetings take place with the Chair of Budget and Corporate Scrutiny Management Board, the Statutory Scrutiny Officer and Monitoring Officer to discuss the scrutiny review, improvements to scrutiny including good practice from other authorities that can be embedded in Sandwell and any training that could be useful for members;
- Elevating the status of scrutiny at Council meetings by Chairs reporting on what they are doing at their scrutiny boards and the impact this has had;
- Having dedicated scrutiny sessions to look at how we are progressing the outcomes of the Improvement Plan;
- reviewing how the budget is scrutinised to ensure it is done effectively.
- 2.14 To support the improvements and good practices that continue to be made and adopted by Scrutiny Boards over the past couple of years, a Scrutiny Improvement Plan has been developed (as set out in Appendix 4) in consultation with the Chair of the Budget and Corporate Scrutiny Management Board. The Scrutiny Improvement Plan sets out a framework for embedding positive working relationships between Scrutiny Boards and the Executive, and Scrutiny Boards and officers. The changes will elevate the status of scrutiny by promoting its importance and ensuring parity of esteem with the Executive, and ensuring Members continue to engage in scrutiny through more strategic and dynamic work programmes that are outcome focussed.













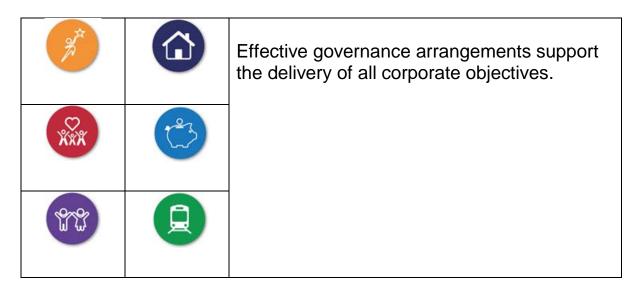




It is also proposed to amend the membership of the Budget and Corporate Scrutiny Management Board, which currently consists of all scrutiny chairs and 1 opposition member, to also now include all scrutiny vice chairs and to also appoint a Vice Chair on the Board (which is consistent with other scrutiny boards and will result in the total membership of the Board to 10 members). The additional members on the Board will enable a more rich discussion and promotes and facilitates the desired culture, relationships and work programme that scrutiny is aiming to achieve.

2.15 The Centre for Governance and Scrutiny (CfGS) and the Local Government Association (LGA) continue to be involved in the Council's overview and scrutiny improvement plan and further reviews will continue to be undertaken to ensure overview and scrutiny continues to add value and is valued in Sandwell.

3 How does this deliver objectives of the Corporate Plan?



4 Objectives

The aim of the scrutiny review is to:-

- know the purpose of scrutiny;
- detail what good scrutiny looks like;
- how to conduct it:
- the benefits scrutiny can bring;
- raise the profile of effective scrutiny in Sandwell;



















- develop a stronger understanding of roles and responsibilities what does Sandwell see as good scrutiny? Is it policy development or performance monitoring?
- appreciation and understanding of the value that scrutiny brings communication;
- actively engaging and encouraging participation of members, officers, partners and the public so as to address the local needs and help to drive improvement in public services;
- understanding of how scrutiny resources are used and how effectively;
- ensure scrutiny make good quality recommendations which are responded to by Executive and the impact is measured and felt;
- ensuring that there is a strong cultural commitment which enables scrutiny to succeed and flourish;
- identifying any gaps in skills and addressing these as appropriate.

5 Implications

| Resources: | Additional resources have been commissioned to enable the Governance Review to deliver at pace. |
|--------------|--|
| | The appointment of a Vice Chair on Budget and Corporate Scrutiny Management Board from within current scrutiny chairs and vice chairs will not qualify for an additional Special Responsibility Allowance (SRA) as members can only receive one SRA. |
| Legal and | The scrutiny review is one element of the Governance |
| Governance: | Review. |
| Risk: | There are no direct risk implications arising from this report. |
| Equality: | There are no direct equality implications arising from this report. |
| Health and | There are no direct implications for health and |
| Wellbeing: | wellbeing from this report. |
| Social Value | Social Value will be a key theme of the Improvement Plan with engagement and participation. |

6 Appendices

Appendix 1 – Role descriptions for Chairs, Vice Chairs, Overview and Scrutiny Elected Members and Co-opted members

















Appendix 2 – Protocols - Scrutiny Chairs, Vice Chairs and Scrutiny Elected Members with the Executive Scrutiny Chairs, Vice Chairs and Scrutiny Members with Officers.

Appendix 3 – Scrutiny Improvement Plan

Appendix 4 – Scrutiny Handbook

7. Background Papers

<u>Statutory Guidance on Overview and Scrutiny in Local and Combined</u> Authorities

CfPS Good Scrutiny Guide







































Informed briefing sessions with relevant officers.



Regular meetings with Cabinet Members and Directors



Peer support and mentoring in collaboration with Centre for Public scrutiny and Local Government Association



Promotion of scrutiny function via dedicated webpage, newsletters and at council meetings



Flexible and agile committee approach



Incorporation of scrutiny impact within annual report to council



Inclusion of the public voice within scrutiny workshops



Creation of job roles for scrutiny members



Effective agenda setting meetings with the Chair and Vice- Chair



Creation of information management system to enable information to be readily accessible for scrutiny



Revised Terms of Reference with expectations clearly defined



Introduction of a scrutiny mission statement



Protocol clarifying relationship between scrutiny and the executive



Development of feedback mechanism to aid continuous improvement



Ongoing training and development for elected members



Prioritisation exercises used to determine which items take precedence during work programming



Production of handbook for scrutiny members



Robust and timetabled work programmes

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Role Description: Scrutiny Board Chair

Accountabilities:

Full Council

The Public

The Panel

Responsibility:

- Personal responsibility to represent the whole of Sandwell at scrutiny meetings.
- To support all partnership working within the scope of the scrutiny panel function, have knowledge of the shared partnership priorities and through scrutiny, contribute to the delivery of the Vision 2030 and the Corporate Plan.
- To contribute to the corporate duty of well-being, good community relations and the promotion of sustainability within the scope of the scrutiny committee function.
- To ensure the full involvement of local people and communities in the decision-making process of the council, as necessary.

Leadership and direction:

- To provide leadership and direction to the scrutiny panel, contribute to the development of the overview and scrutiny function and ensure that the scrutiny panel carries out the functions set out in the Constitution.
- To contribute to the co-ordination of the work programme with other scrutiny chairs and ensure the work programme is member led and contributes to delivery of the Vision 2030 and Corporate Plan.
- To promote the role of overview and scrutiny within and outside the council, developing effective internal relationships with officers and other members and encourage member and partners engagement in scrutiny activities developing external relationships with community representatives.
- To actively seek out best practice in other authorities and report back to the Chair of the 2030 Panel.
- To share best practice nationally and aim to be an exemplar of best practice.













Member Development:

- To encourage continuous member development for scrutiny roles, identify training and development requirements for scrutiny chairs, vice chairs and members.
- Share learning and experience.
- Undertake compulsory skills training (questioning and chairing)
- Undertake appropriate awareness training on key topics that fall under the remit of the scrutiny panel.
- Maintain personal skill sets and develop a personal development plan (PDP) for your role.

Effective relationships and meeting management:

- To ensure that the scrutiny panel carries out the functions set out in the Constitution.
- To chair meetings of the panel, including any convened to consider any items that have been called-in or referred under Call for Action.
- To monitor and challenge members non-attendance and behaviours at meetings.
- To develop a constructive 'critical friend' relationship with officers and executive members and attend meetings to be briefed on all matters affecting the relevant service(s) and the forward plan.
- To make adequate and appropriate preparation for meetings, read relevant papers and reports and attend meetings with the Cabinet Member, Director and officers as appropriate.
- To engage partner agencies in the work of the scrutiny panel and promote a constructive approach to scrutiny work.
- To present findings of scrutiny panel work to the Executive and/or at meetings of the Council.
- To manage and guide the panel's work, to scrutinise relevant issues relating to service delivery and decisions taken by the Executive.
- To engage partner agencies in the work of the scrutiny panel and promote a constructive approach to scrutiny work.
- To contribute to the development of service policy through the scrutiny function.













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Values:

To be committed to the values of the Council:

- Trust: show respect, personal impact, open and honest.
- Unity: customer focus, team worker, communicate effectively.
- Progress: open to change, performance focus, team results.

To hold the values in public office:

- Openness and transparency
- Honesty and integrity
- Tolerance and respect
- Equality and fairness
- Appreciation of cultural difference
- Sustainability













Role Description: Scrutiny Board Vice- Chair

Accountabilities

- **₩** Full Council
- **₩** The Public
- **₩** The Committee
- **₩** Chair of the appropriate scrutiny committee

Role purpose and activity

- Adults, Children and Education and Health Vice Chairs;
- 2030 Scrutiny Panel Vice Chairs will each take the lead on one of the following areas of work:
 - Chair the Finance Sub-Panel
 - Chair the Performance Management Sub-Panel
 - Lead on the training and development of Scruting Members (see separate role description).
 - Lead on co-ordinating and advising on the scruting reviews, task and finish groups and Inquiries (see separate role description).

Responsibility:

- Personal responsibility to represent the whole of Sandwell at scrutiny meetings.
- To support all partnership working within the scope of the scrutiny panel function, have knowledge of the shared partnership priorities and through scrutiny contribute to the delivery of the Vision 2030.
- **₩** To contribute to the corporate duty of well-being, good community relations and the promotion of sustainability within the scope of the scrutiny committee function.
- **₩** To ensure the full involvement of local people and communities in the decision-making process of the council, as necessary.















Leadership and direction:

- To provide leadership and direction to the scrutiny panel, contribute to the development of the overview and scrutiny function and ensure that the scrutiny panel carries out the functions set out in the Constitution.
- To deputise for the Chair in the preparation for and at Scrutiny meetings as required.
- To contribute to the co-ordination of the work programme with the scrutiny chair and ensure the work programme is member led and contributes to delivery of the Vision 2030.
- To promote the role of overview and scrutiny within and outside the council, developing effective internal relationships with officers and other members and encourage member and partners engagement in scrutiny activities developing external relationships with community representatives.

Member Development:

- To encourage continuous member development for scrutiny roles, identify training and development requirements for scrutiny chairs, vice chairs and members.
- Share learning and experience.
- Undertake compulsory skills training (questioning and chairing)
- Undertake appropriate awareness training on key topics that fall under the remit of the scrutiny panel.
- Maintain personal skill sets and develop a personal development plan (PDP) for your role.

Effective relationships and meeting management:

- To ensure that the scrutiny panel carries out the functions set out in the Constitution.
- To chair meetings of the panel, in the absence of the Chair, including any convened to consider any items that have been called-in or referred under Call for Action.
- Monitor and challenge members non-attendance and behaviours at meetings.
- Develop a constructive 'critical friend' relationship with officers and executive members and attend meetings to be briefed on all matters affecting the relevant service(s) and the forward plan.
- To make adequate and appropriate preparation for meetings, read relevant papers and reports and attend meetings with the Cabinet Member, Director and officers as appropriate.
- To engage partner agencies in the work of the scrutiny panel and promote a constructive approach to scruting work.

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- **₩** To present findings of scrutiny panel work to the committee, Executive and/or at meetings of the Council as required.
- **₩** To assist the Chair to manage and guide the committee's work, to scrutinise relevant issues relating to service delivery and decisions taken by the Executive.
- **₩** To engage partner agencies in the work of the scrutiny panel and promote a constructive approach to scrutiny work.
- **₩** To contribute to the development of service policy through the scrutiny function.

Values:

To be committed to the values of the Council:

- Trust: show respect, personal impact, open and honest.
- ₩ Unity: customer focus, team worker, communicate effectively.
- ₩ Progress: open to change, performance focus, team results.

To hold the values in public office:

- ₩ Openness and transparency
- **₩** Honesty and integrity
- **₩** Tolerance and respect
- **₩** Equality and fairness
- **₩** Appreciation of cultural difference
- **₩** Sustainability















Role Description: Scrutiny Board Member

Accountabilities:

- Full Council
- The Public
- Chair of the appropriate scrutiny committee

Responsibility:

- Personal responsibility to represent the whole of Sandwell at scrutiny meetings.
- To support all partnership working within the scope of the scrutiny panel function, have knowledge of the shared partnership priorities and through scrutiny contribute to the delivery of the Vision 2030.
- To contribute to the corporate duty of well-being, good community relations and the promotion of sustainability within the scope of the scrutiny panel function.
- To ensure the full involvement of local people and communities in the decision-making process of the council, as necessary.

Member Development:

- To participate in continuous member development for scrutiny roles, identify training and development requirements for scrutiny.
- Share learning and experience.
- Undertake compulsory skills training (questioning)
- Undertake appropriate awareness training on key topics that fall under the remit of the scrutiny committee.
- Maintain personal skill sets and develop a personal development plan (PDP) for your role.















Effective relationships and preparation:

- To make adequate and appropriate preparation for meetings read relevant papers and reports, and to attend meetings to be briefed on all matters affecting the relevant service(s) as necessary.
- To participate fully in the activities of overview and scrutiny, the development and delivery of its work programme and any associated task and finish groups under the guidance of the Chair.
- To monitor the council's decision-making process, contribute to holding the Executive to account, monitoring performance and service delivery.
- To contribute to the development of overview and scrutiny in Sandwell and share learning and experience.
- To contribute to the scrutiny of scrutinising of draft policies, and improvement and refinement of existing policy. To identify where new policies might be required to address forthcoming legislation.
- To promote the role of overview and scrutiny within and outside the council, developing effective internal relationships with officers and other members and external relationships with community representatives.
- To use scrutiny as a means to carry out community engagement, address community issues and engage the public in forward work programmes.
- To participate in joint scrutiny to work effectively with partner scrutineers from other authorities and organisations.

Values:

To be committed to the values of the Council:

- Trust: show respect, personal impact, open and honest.
- Unity: customer focus, team worker, communicate effectively.
- Progress: open to change, performance focus, team results.

To hold the values in public office:

- Openness and transparency
- Honesty and integrity
- Tolerance and respect
- Equality and fairness
- Appreciation of cultural difference
- Sustainability















Role Description: Scrutiny Co-opted Member

Council can co-opt members to panels – people from the community with specific expertise and knowledge. Some co-options are statutory, for example, religious representatives on education scrutiny panels. In other instances, councils have the opportunity to invite interested members of the community to serve on other committees. For example, a representative of the Tenant Review Panel to consider housing matters on the relevant scrutiny panel. Scrutiny panels can also invite local people or professional people to be co-opted members or to consider a specific issue as part of a scrutiny review or task and finish group. It can be useful to include people who may not be strongly represented, such as business people, young people and people from ethnic minorities.

Accountabilities:

- Full Council
- The Public
- Chair of the appropriate scrutiny committee

Responsibility:

- Personal responsibility to represent the whole of Sandwell at scrutiny meetings.
- To support all partnership working within the scope of the scrutiny panel function, have knowledge of the shared partnership priorities and through scrutiny contribute to the delivery of the Vision 2030.
- To contribute to the corporate duty of well-being, good community relations and the promotion of sustainability within the scope of the scrutiny panel function.
- To ensure the full involvement of local people and communities in the decision-making process of the council, as necessary.

Training and Development:

- To participate in awareness and skills training for the scrutiny role.
- Share learning and experience.
- Undertake compulsory skills training (questioning)
- Undertake appropriate awareness training on key topics that fall under the remit of the scrutiny panel.

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Effective relationships and preparation:

- To make adequate and appropriate preparation for meetings read relevant papers and reports and attend meetings to be briefed on all matters affecting the relevant service(s) as necessary.
- To participate fully in the activities of the overview and scrutiny, the development and delivery of its work programme and any associated task and finish groups under the guidance of the Chair.
- To monitor the council's decision-making process, contribute to holding the Executive to account, monitoring performance and service delivery.
- To contribute to the development of overview and scrutiny in Sandwell and share learning and experience.
- To contribute to the scrutiny of scrutinising of draft policies, and improvement and refinement of existing policy. To identify where new policies might be required to address forthcoming legislation.
- To promote the role of overview and scrutiny within and outside the council, developing effective internal relationships with officers and other members and external relationships with community representatives.
- To use scrutiny as a means to carry out community engagement, address community issues and engage the public in forward work programmes.

Values:

To be committed to the values of the Council:

- Trust: show respect, personal impact, open and honest.
- Unity: customer focus, team worker, communicate effectively.
- Progress: open to change, performance focus, team results.

To hold the values in public office:

- Openness and transparency
- Honesty and integrity
- Tolerance and respect
- Equality and fairness
- Appreciation of cultural difference
- Sustainability













Scrutiny Protocol

Introduction

- This protocol applies to all Members of Scrutiny Committees, any Member who may sit on a scrutiny Committee or task and finish group and the like, all Members of the Executive (comprising the Leader and the Cabinet Members) and Officers who report to and support the scrutiny arrangements.
- It provides guidance on how Members and Officers interact to enable the Council to carry out the Overview and Scrutiny (OSC) function and provides guidance on the role of officers who support this process.
- The Protocol seeks to help support and drive a change in culture and mindset of both Members and Officers to ensure that an effective the Overview and Scrutiny (OSC) function that promotes independent thinking, strong, healthy challenge and forward-thinking agendas that make the most of the talents, skills and knowledge of members, co-opted members and other relevant stakeholders.
- Sandwell's Review of Scrutiny in 2019 identified a need to develop the scrutiny function and strengthen the relationship between the Executive and Scrutiny to make scrutiny consistent and more effective. The review highlighted the need to address our understanding of the roles and responsibilities of the scrutiny function, the culture of the organisation, the executive/scrutiny relationship, how we hold decision makers to account and to align to Members training and development programme to increase Members understanding of, and engagement in, the scrutiny process.

This Protocol sets out:

- the framework and procedures underpinning the operation of scrutiny;
- what Scrutiny Members and the Executive can expect when taking part in the scrutiny process, outlining the interface between Scrutiny and the Executive and procedural elements that underpin the relationship;
- steps that will be taken to improve engagement and relationships between Scrutiny, the Executive and Chief Officers to improve communication, support and preparation for the scrutiny work;













clear roles and focus for the scrutiny function to clarify relationships between the Executive and Scrutiny, to create a culture for change, develop agile working and help ensure conduct of O&S business.

The Framework:

The Council's Constitution sets out the local authority functions, the Executive role, Scrutiny role, the responsibility for functions and procedure rules for the executive and scrutiny.

Relationships:

- Executive and Overview and Scrutiny functions should maintain high standards of public accountability and mutual respect.
- Relations between the Executive and Overview and Scrutiny should offer positive and constructive collaboration to secure improvements in Council and other public services for the borough and its people.
- Scrutiny and Cabinet Members will agree to operate in line with the general principles, values and behaviours of the Council:
 - o Trust show respect, personal impact, open and honest
 - Unity customer focus, team worker, communicate effectively
 - Progress open to change, performance focus, team results and in the values of public office:
 - Openness and transparency
 - Honesty and integrity
 - Tolerance and respect
 - o Equality and fairness
 - o Appreciation of cultural difference
 - Sustainability

Scrutiny Chairs, Vice-Chairs and Scrutiny Members commit to:

- setting a vision for scrutiny
- lead with conviction and pace, their own development, training and that of the scrutiny function so as to embed an effective, efficient and robust overview and scrutiny function within the Council
- creating a work programme that is aligned to key strategic priorities linked to the Vision 2030
- proactively suggest topics for scrutiny to review/consider
- work with Chief Officers to scope out scrutiny work
- engage with Cabinet Members in relation to their respective portfolios
- prepare for and regularly attend scrutiny meetings













- fully participate at scrutiny committee meetings and on task and finish groups and the like.
- monitor outcomes of recommendations accepted by the Executive
- hold Members of the Executive to account and help to improve the decision-making process and the quality of decisions
- a facilitate and promote Member calls to action
- carry out reviews and make recommendations to the Executive
- meet with the Executive and Directors on a monthly basis to discuss key strategic priorities, share information and collaboratively discuss where scrutiny can add value
- attend a bi-annual summit between Scrutiny Chairs, Vice-Chairs and the Executive (and other relevant persons/bodies as necessary) to review progress to date and map out reviews for the coming year
- pro-actively undertake pre-scrutiny reviews to explore, strengthen or clarify the policy intentions of the Executive
- play a key and active role in articulating the Council's Vision 2030 across service areas and partner agencies
- promote and encourage public engagement on Vision 2030 via the Council's website
- support joint working and dialogue with key partners across the borough
- effective lead and represent the Council on appropriate regional committees and partnerships (Health & Wellbeing, West Midlands Combine Authority O&S, Joint Health).
- promote its work via social media to encourage participation and to gather intelligence on issues

The Executive will:

- work with Scrutiny Chairs and suggest topics for scrutiny
- respond to recommendations from Scrutiny within 6 weeks of being received
- attend meetings of the Scrutiny Committees when invited
- Properly consider and respond to recommendations arising from Scrutiny and any review/work undertaken fully and not simply 'note' recommendations without explanation or follow up
- respond to requests for information within a maximum of 6 weeks of the request being received
- provide updates as required by Scrutiny Chairs and Committees about matters that fall within their respective portfolios
- engage in specific training identified through the Member Development Programme relating to overview and scrutiny













- meet with Scrutiny and Directors on a bi-monthly basis to discuss key strategic priorities, share information and collaboratively discuss where the Council's overview and scrutiny function can add value
- attend a bi-annual summit between Scrutiny Chairs and the Executive to review progress to date and map out reviews for the coming year

Officers will:

- Actively and with pace support the overview and scrutiny function
- exprepare reports and information for Scrutiny and the Executive in line with Access to Information requirements
- prepare briefings on key subject matters for Cabinet Members and Scrutiny Chairs
- attend meetings to advise the Committees and respond to questions and provide clarification
- assist through the provision of professional advice and ensure access to relevant information and personnel to support scrutiny activities
- exprovide comment and guidance on recommendations arising from scrutiny work
- maintain a tracker of recommendations and responses
- implement scrutiny recommendations when agreed by the Cabinet
- meet with the Executive and Scrutiny on a bi-monthly basis to discuss key strategic priorities, share information and collaboratively discuss where scrutiny can add value

Monitoring Officer and Statutory Scrutiny Officer will in addition:

- oversee compliance with the protocol
- ensure that the protocol is used to support the wider aim of supporting and promoting a culture of scrutiny across the council

Nothing in the protocol diminishes the rights of O&S Committees to decide their work programmes, to challenge Executive decisions and hold the Executive to account, or to request and receive timely information; nor to reduce the Executive's ability to carry out its functions unfettered.











Scrutiny and Executive Protocol

Why do we need a protocol?

- The need to address the culture of the organisation in relation to our understanding and engagement in the scrutiny process was identified in the 2019 Review of Scrutiny in Sandwell.
- Government Guidance highlights a number of ways to improve the scrutiny function. During the review, Members recommended a protocol for Scrutiny and the Executive to address the following points highlighted:
 - Ensuring early and regular engagement between the Executive and Scrutiny
 - Managing disagreement
 - Identifying a clear role and focus
 - Being clear about Scrutiny's role
 - Who to speak to
 - Developing recommendations
- Centre for Governance & Scrutiny guide to 'Engaging with council officers and the executive' (June 2014) highlights that the Local Government Act 2000 (at s9F onwards) says that Cabinet members and officers of the council must:
 - Attend meetings, where required to do so. The word "require" is not defined in the Act but it can be assumed that it does not confer a choice as to whether or not to attend;
 - Provide information, where required to do so. Again, this must be complied with. The usual exclusions apply for confidential and exempt information, although councillors are entitled to see certain kinds of information which cannot be published;
 - Respond to recommendations. Scrutiny committees may set out the way in which they expect their recommendations to be responded to. This may include the requirement to provide reasons when a recommendation is rejected.
- The protocol is not intended to change the respective constitutional positions, roles or responsibilities of either Overview and Scrutiny function or the Executive. It is intended to clarify relationships between the two, to create a culture for change, to develop agile and flexible working and to help ensure the smooth conduct of Overview and Scrutiny business and encourage effective communication between Overview and Scrutiny and the Executive.
- The Scrutiny and Executive protocol is a guide for elected Members and other parties outlining the interface between Scrutiny and the













- Executive and the procedural elements that underpin the relationship.
- In addition to the 'Scrutiny and Executive Protocol' other protocols, role descriptions and agile ways of working have been developed to support members to develop the scrutiny function and create a culture for change to deliver the scrutiny work programme.
- Further information on Scrutiny will be provided in the Scrutiny Handbook. The protocol draws on the relevant sections of the Constitution of Sandwell Council, which can be found on the Council's website at www.sandwell.gov.uk/.
- Monitoring and Review of Protocol: The protocol shall be monitored annually at the joint informal meetings between the Overview and Scrutiny Chairs and the Executive

Introduction

This Protocol applies to all Members of the Scrutiny Panels any Member who may sit on a scrutiny panel and all Members of the Executive (comprising the Leader and the various Cabinet Members). It provides guidance on the way in which both types of Members interact to enable the Authority to carry out the Overview and Scrutiny function. The Protocol also outlines the framework and procedures underpinning the operation of scrutiny.

Objectives

- The objectives of the protocol align to the main findings of the Review of Scrutiny 2019 with the Government guidelines:
 - Roles: To enable Scrutiny Members, Officers and Cabinet Members to fully understand their powers, roles and responsibilities in relation to the Overview and Scrutiny function, role descriptions have been developed, so as to maximise their personal effectiveness.
 - Culture: To establish a positive framework and the necessary procedures to enable scrutiny to work effectively and to create a culture for change.
 - Executive Scrutiny Relationship: To promote an ethos of mutual respect, trust and courtesy in the interrelationships between Scrutiny Members and Cabinet Members and to foster a climate of openness leading to constructive debate, with a view to ensuring service improvements.
 - Account on behalf of the electorate, by monitoring the













- effectiveness of the Council's policies and through the regular review of its performance in relation to service delivery.
- Training and Development: To work in conjunction with the Member Development Programme scheme to develop the skills and knowledge of components of the scrutiny process.













Understanding the roles - The Councils Constitution

Scrutiny Role

That Scrutiny boards, within their terms of reference, as set out in Article 6 of the Council Constitution:

- Will review and/or scrutinise decisions made or actions taken in connection with the discharge of any of the Council's functions and responsibilities;
- Will make reports and/or recommendations to the Council and/or the executive and/or any committee in connection with the discharge of any functions;
- Will consider any matter affecting the area or its inhabitants, including the operation of any partner organisations;
- Will consider referrals to call-in, for deliberation, decisions made but not yet implemented by the executive and/or any non-Quasi-Judicial committees; and
- Will consider referrals under the Call for Action process.

Responsibility for functions

That Scrutiny Boards, will operate within the Scrutiny Procedure Rules, as set out in Part 4 of the Councils Constitution to:

- Scrutinise recommendations
- Consider referrals under the Call for Action process.
- Contribute to decision making and policy development through predecision scrutiny processes

The responsibility for functions of scrutiny boards are set out in Part 3 of the constitution.

Scrutiny Arrangements

- A scrutiny body is one appointed to discharge the functions conferred by Section 21 (Overview and Scrutiny Committees) of the Local Government Act 2000 and any regulations made under that Section.
- The Council will have the scrutiny boards set out in Article 6 of the Constitution and will appoint members to them as it considers appropriate from time to time.
- All Councillors, except members of the Cabinet may be members of a scrutiny board.
- Chairs and Vice- Chairs are appointed at Annual Council.
- Co- opted members are appointed at Annual Council:
 - Statutory Education representatives
 - Tenants Review Panel representative
 - SHAPE representative
 - Healthwatch representative



WWW.







Scrutiny Role Descriptions

Role descriptions for Chairs, Vice-Chairs, Co-opted Members and Scrutiny Members have been developed and are set out in the Councils' Constitution.

Executive Role

That the Executive will carry out all of the local authority's functions which are not the responsibility of any other part of the local authority, whether by law or under this constitution.

Part 3 of The Local Authorities (Functions and Responsibilities)
Regulations 2000, as amended gives effect to Section 13 of the Local
Government Act 2000, specifying local authority functions which are:

- Non- Executive, meaning scrutiny roles cannot be undertaken by or be the responsibility of the executive.
- Executive or Non- Executive by local choice, those which the council can choose to be the responsibility of the executive if they so wish.
- To some extent, the responsibility of the executive.

All other functions given to a local authority, but which are not specified in the Function Regulations are automatically deemed to be the responsibility of the Executive.

Executive Procedure rules, as set out in Part 4)- How the Executive Operates:

The arrangements for the discharge of executive functions will be set out in the executive arrangements from time to time approved, amended and adopted by the Council.

Executive Role Description

The Cabinet Member role description is set out in the Councils' Constitution













Culture - General Principles, Values and Behaviours

That Scrutiny and Cabinet will agree to operate in line with the below values and behaviours, as set out in Part 5 of the Council's constitution: The Members Code of Conduct.

Values:

To be committed to the values of the Council:

- Trust: show respect, personal impact, open and honest.
- Unity: customer focus, team worker, communicate effectively.
- Progress: open to change, performance focus, team results.

To hold the values in public office:

- Openness and transparency
- Honesty and integrity
- Tolerance and respect
- Equality and fairness
- Appreciation of cultural difference
- Sustainability

Relationship between Executive and Overview and Scrutiny

- Executive and Overview and Scrutiny functions should maintain high standards of public accountability and mutual respect.
- Relations between the Executive and Overview and Scrutiny should not be confrontational but a positive and constructive collaboration to secure improvements in Council and other public services for the borough and its people.
- Overview and Scrutiny Members will work together with the Executive in a nonpartisan environment and aim to adopt a nonadversarial but challenging approach to identify improvements.
- In seeking agreement to this protocol, it is acknowledged that there are different rights and roles of both Overview and Scrutiny and Executive Members but that both are committed to developing an effective relationship. This will involve but not be limited to:
 - Frequent and honest dialogue between Executive Members and Overview and Scrutiny Members, either individually or collectively.
 - Regular discussions regarding Executive and Overview and Scrutiny work programmes/activities including establishing joint activities/projects where possible.
 - Establishing effective and formal reporting structures.
 - Respecting the confidential nature of the discussions that may from time to time take place.













Holding the Executive to Account

- One of the underpinning principles of Overview and Scrutiny is the ability of non-Executive Members to hold the Executive to account. A key method of ensuring accountability is through critically and routinely considering the performance and decisions taken by the Executive or may question decisions which the Executive is proposing to take, as set out in the Forward Plan.
- The Executive will be required to consider any recommendations or views expressed by the Scrutiny Panel relating to the development of the Council's budget or policy framework.

Training and Development

- Executive and Scrutiny Members will engage in the Member Development Programme.
- Chairs of Scrutiny will identify training needs for scrutiny members.
- The Vice-Chair of 2030 will identify areas for awareness and training and liaise with the Member Development Programme Lead.











| What | Scrutiny | Executive |
|---|--|---|
| Executive and Scrutiny's Critical Friend relationship | Develop a constructive 'critical friend' relationship with officers and executive members Attend meetings (individually or collectively), to be briefed on all matters affecting the relevant service(s), confidential items and the forward plan. Attend and participate in regular informal meetings of Chairs and Vice-Chairs of Overview and Scrutiny with the executive Invite the executive to comment on the findings of task and finish and work group reports | Executive Members will work with Scrutiny Chairs to develop a critical friend relationship Executive Members will attend scrutiny when invited Executive Members will attend and receive briefings on all matters affecting the relevant service(s), confidential items and the forward plan. Executive Members will be encouraged to consult with scrutiny Chairs and gauge their views on matters that fall within their remit. Executive Members will attend scrutiny meetings when invited to present or participate in scrutiny work Cabinet Members will normally be expected to attend any meeting when a matter is called in that falls in their portfolio. |
| Hold to account | Hold the Cabinet to account for decisions, performance, risk management and budget management. Invite the executive member and relevant Chief Officers to attend call-in meetings. Scrutiny Members should be prepared to | Attend Scrutiny Meetings Attend call-in meetings with in the rules outlined in the constitution Executive Members should respond to questions in as much detail as is possible to inform the scrutiny process. The response could be orally at the meeting, or by |













| Chairs at Executive and Portfolio Holders at Overview and Scrutiny meetings is particularly helpful in allowing clarification where needed Work programme Consult with the relevant senior Officers, executive member and take into account the views of the public and of partner agencies Scrutinise relevant issues relating to service delivery, policy and decisions taken by the Executive and other decision makers. Consider reports and make recommendations to inform and advise the Cabinet or Council or other decision- making bodies on improvements to policies and service delivery. Planning for Overview and Scrutiny items Individual Portfolio Holders and Overview | | ask searching questions of Cabinet Members. | reference to a published report, or by requesting officers to provide detail, or in writing following the meeting, if the information is not readily available. |
|---|----------------|--|--|
| executive member and take into account the views of the public and of partner agencies Scrutinise relevant issues relating to service delivery, policy and decisions taken by the Executive and other decision makers. Consider reports and make recommendations to inform and advise the Cabinet or Council or other decisionmaking bodies on improvements to policies and service delivery. Planning for Overview and Scrutiny items Individual Portfolio Holders and Overview | | Chairs at Executive and Portfolio Holders at Overview and Scrutiny meetings is particularly helpful in allowing | ` ` ` |
| meeting regularly to identify and plan for policy development work in which all | Work programme | executive member and take into account the views of the public and of partner agencies Scrutinise relevant issues relating to service delivery, policy and decisions taken by the Executive and other decision makers. Consider reports and make recommendations to inform and advise the Cabinet or Council or other decision-making bodies on improvements to policies and service delivery. Planning for Overview and Scrutiny items Individual Portfolio Holders and Overview and Scrutiny Chairs should consider meeting regularly to identify and plan for | Consult with scrutiny to ensure the clarity of topics being scrutinised and to avoid potential duplication The Executive will invite Scrutiny to look at specific issues to add value to the work of |













| | members can participate | |
|-----------------|---|--|
| | Undertake activities or joint work when | |
| | possible same issue | |
| | The purpose of Scrutiny is to add | |
| | value to the work of the Council | |
| Reporting and | Present findings of scrutiny work to the | The Executive will invite Scrutiny Chairs to |
| recommendations | Executive and to Council as required. | present the findings of scrutiny work at |
| | The O&S recommendations to the | Cabinet meetings |
| | Executive and the Executive's | Responding to Overview and Scrutiny |
| | response to them is vital. The onus is on | Recommendations: The Executive's |
| | the respective chair of both Overview | response to the report should be in writing |
| | and Scrutiny and Executive to keep this | dealing with each recommendation making |
| | issue to the front of their minds when | it clear if it is accepted or not and what |
| | summarising and framing resolutions. | action will be taken within a maximum of two |
| | Scrutiny Boards, reviews or task and | months. |
| | finish groups will have spent time | |
| | considering witness evidence and | |
| | formulating their recommendations to the | |
| B.A. No. 1 | Executive. | |
| Monitoring | The Overview and Scrutiny Panel will | |
| outputs | monitor implementation of the agreed | |
| D I | response to their recommendations. | NATI AND THE STATE OF THE STATE |
| Development and | Make adequate and appropriate | Where officers are providing briefings to |
| training | preparation for meetings, read relevant | Overview and Scrutiny members on topics, |
| | papers and reports and attend meetings | such as a Government consultation paper or |
| | with the Cabinet Member, Director and | a new piece of legislation within the work |
| | officers as appropriate. | programme and site visits they should |
| ₹ XX | | |



STRONG RESILIENT COMMUNITIES

PEOPLE LIVE WELL AND AGE WELL

| | Policy Briefings: Attend briefings on topics such as a Government consultation paper or a new piece of legislation | consider inviting the relevant Portfolio Holder. |
|---------------|--|--|
| Be the public | Enable the public to engage in the work | |
| voice | of the Council by holding public meetings | |
| | to inquire into matters of local concern. | |
| Roles | Overview and Scrutiny Members | The Executive recognises Overview and |
| | recognises the Executive's role in taking | Scrutiny Committee's role in policy |
| | operational decisions on Executive | Development and being critical friend and |
| | functions. | challenging decisions. |
| | Role descriptions for Chairs, Vice-Chairs, | Role description is in the Constitution |
| | Co-opted Members and Scrutiny | |
| | Members have been developed | |

























Scrutiny and Chief Officer Protocol

Why do we need a protocol?

- The need to address the culture of the organisation in relation to our understanding and engagement in the scrutiny process was identified in the 2019 Review of Scrutiny in Sandwell.
- Government Guidance highlights a number of ways to improve the scrutiny function. During the review, Members recommended a protocol for Chief Officers and Scrutiny to address the following points highlighted:
 - Providing the necessary support
 - Identifying a clear role and focus
 - Ensuring impartial advice from officers
 - Being clear about Scrutiny's role
 - Who to speak to
 - How to plan (evidence sessions)
 - Developing recommendations
- Centre for Public Scrutiny guide to 'Engaging with council officers and the executive' (June 2014) highlights that the Local Government Act 2000 (at s9F onwards) says that Cabinet members and officers of the council must:
 - Attend meetings, where required to do so. The word "require" is not defined in the Act but it can be assumed that it does not confer a choice as to whether or not to attend;
 - Provide information, where required to do so. Again, this must be complied with. The usual exclusions apply for confidential and exempt information, although councillors are entitled to see certain kinds of information which cannot be published;
 - Respond to recommendations. Scrutiny committees may set out the way in which they expect their recommendations to be responded to. This may include the requirement to provide reasons when a recommendation is rejected.
- The protocol is intended to strengthen the scrutiny arrangements for scrutiny panels and review work, and to provide more support for the Scrutiny Members.
- The Scrutiny and Chief Officer protocol is a guide for elected members and officers outlining the interface between Scrutiny and Chief Officers and the procedural elements that underpin the relationship.

Monitoring and Review of Protocol: The protocol shall be monitored annually at the joint informal meetings between the Overview and Scrutiny Chairs and the Executive.

Introduction

This protocol applies to all Members and Officers who report to and support the scrutiny arrangements. It provides guidance on how Members and Officers interact to enable the Authority to carry out the Overview and Scrutiny function and provides guidance on the role of officers who support this process.

Objectives

The objective of the protocol is to align to the findings of the Scrutiny Review 2019 and to provide support to Members when carrying out the Overview and scrutiny function.

Attendance by Officers at Scrutiny Panel meetings

- Meetings of the Scrutiny Panel will normally be attended by a Chief Officer with responsibility for any agenda item under discussion. The role of the Chief Officer will be to assist the Panel through the provision of professional advice and to ensure access to relevant information and personnel. Chief Officers will provide reports/presentations to Scrutiny in accordance with the Access to Information Rules to enable scrutiny to prepare relevant questions.
- The attendance of other relevant officers at either Scrutiny Committee or Scrutiny Panel meetings will be at the request of the Chairman or lead member, who will have regard to the appropriate level of seniority of attendees. In general, the relevant officer should not be below the level of Director / Head of Service.
- An officer in receipt of a request to attend a Scrutiny meeting should make reasonable efforts to do so. Where an officer is unable to attend on a particular date he/she should notify the Chairman or lead member as soon as possible, in order to agree the most appropriate course of action, which may include the attendance of an alternative representative.
- Officers in attendance at Scrutiny meetings should be prepared to assist the Cabinet Member in the provision of information to the Committee in response to any question raised.
- Relevant Officers will normally be expected to attend any meeting of the Scrutiny Committee at which it is intended to consider a Call-In request in relation to his/her service.

Evidence provided by Officers at Scrutiny Review meetings

- It is recognised that senior officers have a valuable role to play in the scrutiny process in terms of the provision of factual evidence for a review. The lead member will notify the relevant Chief officer who will then contribute to the review in terms of supplying information and helping to identify suitable witnesses.
- The Chief Officer will be given the opportunity to comment and/or make recommendations on a completed draft report in terms of any factual errors. The decision as to whether to incorporate any suggested amendments will remain with the Scrutiny Panel and the lead member.
- The responsibility for the implementation of scrutiny recommendations that have been approved by the Executive will rest with the relevant Chief Officer who will also be responsible for providing regular updates on progress to the Scrutiny Committee.











| What | Scrutiny | Officer | |
|---|----------|---|--|
| Critical Friend relationship Develop a constructive 'critical friend' relationship with officers and executive members Attend meetings (individually or collectively), to be briefed on all matters affecting the relevant service(s), confidential items and the forward plan. | | Chief Officers will work with Scrutiny Chairs to develop a critical friend relationship Chief Officers will attend scrutiny when invited to present or participate in scrutiny work Chief Officers will provide briefings on all matters affecting the relevant service(s), confidential items and the forward plan. | |
| Attendance at meetings The attendance of Officers at Overview and Scrutiny meetings | | Chief Officers will attend scrutiny when invited to present an item or participate in scrutiny work. The attendance of Chief Officers is particularly helpful in allowing clarification where needed | |









ONE COUNCIL ONE TEAM







| What | Scrutiny | Officer |
|----------------|--|---|
| Work programme | Consult with the relevant senior Officers, executive member and take into account the views of the public and of partner agencies Scrutinise relevant issues relating to service delivery, policy and decisions taken by the Executive and other decision makers. Consider reports and make recommendations to inform and advise the Cabinet or Council or other decisionmaking bodies on improvements to policies and service delivery. | Add items as early as possible to the forward plan. Share the forward plan with Scrutiny. Consult with scrutiny to ensure the clarity of topics being scrutinised and to avoid potential duplication The Chief Officers will brief Scrutiny Chairs and members on specific issues to add value to the work of the Council |













| What | Scrutiny | Officer | |
|-------------------------------|--|---|--|
| Reporting and recommendations | Present findings of scrutiny work to the Executive and to Council as required. The O&S recommendations to the Executive and the Executive's response to them is vital. The onus is on the respective chair of both Overview and Scrutiny and Executive to keep this issue to the front of their minds when summarising and framing resolutions. Scrutiny Boards, reviews or task and finish groups will have spent time considering witness evidence and formulating their recommendations to the Executive. | The Chief Officers will invite Scrutiny Chairs to present the findings of scrutiny work at Cabinet meetings Support the Executive to respond to Overview and Scrutiny Recommendations | |
| Monitoring outputs | The Overview and Scrutiny Panel will monitor implementation of the agreed response to their recommendations. | | |
| Development and training | Make adequate and appropriate preparation for meetings, read relevant papers and reports and attend meetings with the Cabinet Member, Director and officers as appropriate. Policy Briefings: Attend briefings on topics such as a Government | Where officers are providing briefings to Overview and Scrutiny members on topics, such as a Government consultation paper or a new piece of legislation within the work programme and site visits they should consider inviting the relevant Portfolio Holder. | |















| | consultation paper or a new piece of legislation | |
|---------------------|--|--|
| Be the public voice | Enable the public to engage in the work of the Council by holding public meetings to inquire into matters of local concern. | |
| Roles | Overview and Scrutiny Members recognises the Executive's role in taking operational decisions on Executive functions. Role descriptions for Chairs, Vice-Chairs, Co-opted Members and Scrutiny Members have been developed and are available at Appendix 1. | Recognises Overview and Scrutiny Committee's role in policy development and being critical friend and challenging decisions. |













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Summary of evidence and Proposed Scrutiny Improvement Plan

| T | | | | |
|--|---|---|--|--|
| Culture | | | | |
| Desired Outcome Characteristics | Survey / evidence findings | Proposed Action | Key Actions for change | Action By |
| Effective relationship between scrutiny, the Executive and officers Openness, transparency and honesty Being confident and brave Knowledgeable Understand function of scrutiny and subject matters | Review findings – what you told us Some cabinet members feel 'under-scrutinised' Scrutiny tends to look at operational detail, rather than shaping strategy and policy/decisions Too few examples of scrutiny having impact – it can be single dimensional Scrutiny can be seen as unhelpful or disruptive, rather than constructive Members are in favour of change and improvement Member behaviours are polite, positive and challenging Member survey – main findings Consistent understanding of role and purpose, eg: holding to account, influence policy, challenge decisions-accountability, public voice, investigative, improving and value adding | Introduce a Scrutiny Mission Statement Introduce a scrutiny and executive protocol clarifying expectations and the working relationship between the executive and scrutiny Introduce a scrutiny and officer protocol clarifying expectations and the working relationship between scrutiny and officers; Creation of a job role for the following members:- Scrutiny Chairs Vice Chairs Scrutiny members Co-optees Job roles to outline Accountability Purpose Activities Values expectations of members of the Committee, | R1. Create a Scrutiny Mission Statement setting out the purpose and key role of scrutiny R2. Develop a suite of protocols to develop effective relationships: | Director – Law & Gov/Dem Services Director – Law & Gov/Dem Services/Communica tions Team Director – Law and Gov/Dem Services |

- But when asked how well this is achieved there was a 50/50 split – not sure its effective?
- Mixed views about who is mostly held to account -Over 50% said that scrutiny mainly held officers to account – 42% said Leader/Cabinet – 32% said Cabinet with officer support
- Overall 93% said that scrutiny is an important part of the democratic process at Sandwell Council
- Free text comments:
 - Parity of esteem
 - More openness and transparency of decision making process

including performance management issues, attendance at meeting, reading of papers in advance, etc.

- Promote and raise awareness of the function and work of scrutiny via a dedicated scrutiny page, newsletters, at Council meetings, social media platforms, etc
- Develop a mechanism for feedback, suggestions and continuous improvement as part of the scrutiny process
- Raising awareness and understanding through training of Councillor Call for Action, call-ins, pre-decision scrutiny
- More informed, effective officer, partner and stakeholder briefings/discussions, etc
- Produce handbook for scrutiny members
- Annual report to Council to include the impact made by scrutiny

R4. Develop guides and tools:

- scrutiny member handbook, guides and a framework
- scrutiny guide for officers.
- training and awareness for report writers.
- partner meetings to be scheduled
- Develop engagement mechanisms.
- Develop a mechanism for feedback, suggestions and continuous improvement as part of the scrutiny process
- R5. Develop scrutiny elements of the Member Development Programme (MDP); create a scrutiny member development plan, in line with the MDP to reflect the outcomes of the review. Review the induction programme to strengthen scrutiny function.

Director – Law and Gov/Dem Services/Civic & Member Services

Director – Law and Gov/Dem Services

| 7 | | | R6. Develop job role descriptions for Chair, VC, scrutiny member and co-opted member. | |
|---|--|---|---|-----------------------------------|
| Relationships Desired Outcome Characteristics Having and | Survey / evidence findings Review findings – what you told | Proposed Action • See protocols reference | Key Actions for change R2 above: Develop | Action By |
| building trust. Executive value scrutiny. Opportunity to develop and nurture strong, healthy working relationships with members, officers, the public, partners, stakeholders, etc. Critical friend. Strong understanding and working. relationship between the Chair, Vice Chair and scrutiny members. Being alive to role and opportunities of others to shaping scrutiny. Scrutiny confidently holding | No formal communication process Cabinet members not invited to scrutiny Too much holding officers to account There are regular meetings between scrutiny chairs and corporate officers Member survey – main findings Does scrutiny influence policy – 62% said yes (often or sometimes) 38% said no (rarely or never) The overall relationship between Scrutiny and Executive – 48% said positive 51% said negative There is generally a good relationship between Scrutiny and Officers 86% said it was very well or fairly well supported | See protocols reference under Culture above See creation of jobs roles as referenced above Revised terms of reference for scrutiny that clearly defines the expectation and role of scrutiny committees, i.e. being a critical friend Proactively inviting other views at scrutiny meetings and enable the committee to be flexible and agile Explore with Centre for Public Scrutiny and Local Government Association peer support and mentoring Annual Summit to enable healthy working relationships More effective scrutiny workshops at the local level (seeking the public voice) Regular scheduled meetings between scrutiny members, Town Leads, the executive and other stakeholders to | executive—scrutiny / scrutiny - officer protocols R7. Arrange briefing meetings: | Director – Law & Gov/Dem Services |

| the executive to account. | free text comments: • More engagement from Cabinet members and | promote the work of scrutiny and raise awareness Create an information | |
|--|---|--|--|
| Collaborative Dworking and Sharing of Oknowledge across Othe Council, the public and stakeholders. | greater attendance More public engagement and community-based activity Greater involvement from partners Improve attitudes to scrutiny across council Reporting back from scrutiny on scrutiny recommendations Usefulness of scrutiny questions at Cabinet | management system to enable information to be readily accessed by scrutiny | |

| Work Programme | | | | |
|---|---|---|--|------------------------------------|
| Desired Outcome | Survey / evidence findings | Proposed Action | Key Actions for change | Action By |
| Characteristics | | | | |
| Ambitious Aligned to Vison 2030 and Council priorities Joined up Exciting Adds value Well-informed Strong, clear objectives Policy development, performance monitoring, holding to account, supporting effective decision- making Autonomous Timely, relevant and achievable Aligned to resources available | Review findings – what you told us Can be single dimensional (only scrutinising from reports) Pre-decision or policy-shaping scrutiny not sufficiently understood or used Work-programmes not joined-up with council plan and mission In-puts to scrutiny not clearly integrated: forward cabinet plan, community concerns, partners etc Tries to take on too much – prioritisation is a challenge Objective setting is not clear Not clear if or how prioritisation tool is used. Unclear justification for many items on work programme Member survey – main findings Who is in control of the work programme? 31% say members of scrutiny – 37% say members with officer advice – 3% say officers lead it – | Establish a clear timetable for setting the work programme Create a protocol that clearly defines how the work programme will be devised and who is able to influence and/or determines it which also includes ➤ Clear templates that enable scrutiny items to be identified, understood, evaluated and with a clear timescale ❖ Identification of resources as part of the template ❖ Template will ask outcome being sought (linked to Vision 2030) ❖ Provide clear detail ❖ Anticipated resources required and which scrutiny mechanism to utilise | R9. Review work programming arrangements and develop a work programming protocol | Director – Law & Gov/ Dem Services |

| Almost a 3rd said know Is the work progration focused on the right priorities? 45% said that it was not well focused it was not What sources of does scrutiny used developing its was programme? 48% said it was not officer information public views – 10 witnesses – 10 % council data Only 10% said council data Only 10% said council and priorities | objectives and recommendation s Clear criteria to determine the work programme which includes a prioritisation exercise/mechanism formation in C liant on -3% 6 external use of | |
|--|--|--|
|--|--|--|

| Structure | Structure | | | | | | | |
|--|---|---|---|--------------------------------------|--|--|--|--|
| Desired Outcome | Survey / evidence findings | Proposed Action | Key Actions for change | Action By | | | | |
| Characteristics | | | | | | | | |
| Clear O PFlexible | Review findings – what you told us Cabinet meets monthly. | Clarity of roles and remit (member job roles, scrutiny procedure rules) | R10. Agree the scrutiny structure. | Council | | | | |
| Aligned to the Vision 2030 and council core responsibilities Promotes and facilitates the desired culture, relationships and work programme | Scrutiny meets 3-monthly (difficult to align and have impact) Possible need for higher meeting frequency Need for a forum for Cabinet and Scrutiny to meet and share plans and ideas Members open to ideas for better scrutiny structure Member survey – main findings No specific survey questions, but some free text comments: Not enough committees – 4 insufficient More public and partner involvement | Proposed structures attached | R11. Review and make constitutional change where necessary including scrutiny procedure rules. R12. Review resource and support for the scrutiny function. R6. Develop job role descriptions for Chair, VC, scrutiny member and coopted member. | Director – Law & Gov/Dem Services | | | | |

| J } ! | Members and chairs need greater level of skills Scrutiny needs to select subjects which add value Members seem to like more agile working | | | |
|---|--|---|--|---------------------------------------|
| Agile Working | | | | |
| Desired Outcome Characteristics | Survey / evidence findings | Proposed Action | Key Actions for change | Action By |
| Agile working should be embedded in everything scrutiny does and how it operates: Culture Relationships Work programme Structure Support | Review findings – what you told us Members show appetite to be more experimental with scrutiny to test what works Members are interested in learning from other councils There is an interest in the use of co-opted independent specialists This is interest in more community-based scrutiny and holding scrutiny is other locations in the Borough Member survey – main findings Councillors agreed that different, agile ways of using scrutiny could work Time-fixed sub-committees, Task and Finish Groups, Inquiry Days all received over 90% approval | Agile working should be embedded in everything scrutiny does and how it operates: Changing the culture Building and maintaining working relationships, confidence and knowledge in the Making the work programme flexible to find the right mechanism or approach to carry out scrutiny. Structure – building in mechanisms to enable scrutiny to look at a topic in depth and through different lenses/ perspectives. Support – building skills, knowledge and relationships to strengthen confidence and trust in the scrutiny function. | R14. Develop mechanisms and identify opportunities to include time-fixed subcommittees, task and finish groups and inquiry days in the work programme. | Director – Law & Gov/ Dem Services |



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Scrutiny Handbook



01

What is Scrutiny? How does it work at Sandwell MBC?

Good governance and scrutiny is at the heart of what we do.

Overview and scrutiny helps to improve the way the Council works and to make sure its decisions and policies are right for local people.

What is Scrutiny?

Scrutiny Boards fulfil the statutory responsibility

Placed on local authorities to review and scrutinise
their decision making – it allows for cross party
engagement and provides an opportunity for
councillors and members of the public to improve the
quality and delivery of services as well as
strengthening the decision making process. Each year
the Council appoints members to a Scrutiny
Management Board and four thematic Scrutiny Boards.

Each Board has its own area of responsibility which are themed around the Council directorates and aligned to deliver the Sandwell Vision 2030 ambitions and the Councils Corporate Plan













OMES NG HOODS A CONNECTED
AND ACCESSIBLE
SANDWELL



Scrutiny is a key aspect of this Council's governance framework and is integral to decision making.

The Scrutiny function should:-

- Give power to local people to work with local representatives and challenge the council and other agencies to deal with concerns
- Make sure that the views of local people are heard by the local authority
- Enable councillors as community champions to raise issues for scrutiny
- Create change and improve things so that local communities can see clear results

What is Scrutiny?

03.

The Scrutiny review process determines key issues and objectives, identifies key stakeholders and decides what evidence needs to be gathered and how. Boards can gather evidence in the following ways:

- Formal meetings to consider written reports or presentations.
- Working Groups.

Page

- Site visits to see services/facilities in action.
- Speaking to front line staff and service users. Surveys and questionnaires.

- Calls for Evidence to the public.
- Literature reviews and desktop analysis.
- Hearing from other organisations such as the Police,
 NHS, charities and community organisations in short, anyone with expertise.

Scrutiny Boards also have 'Call-In' powers to scrutinise Cabinet decisions before they are implemented.

Call-in provides an opportunity to ensure that the Council adheres to the principles of good decision-making and allows Scrutiny Boards to consider whether the Cabinet should be asked to review its decision.

After the Cabinet has announced its intention to make a decision, members have 5 working days to consider that decision. If members feel that the decision is questionable, they can lodge a request to 'call in' that decision. At least six members are required for a call in and the reasons must be valid based on the Council's parameters. The call in is heard at a meeting of the relevant Scrutiny Board. Until the matter has been resolved, the decision is put on hold. The Board will then provide a report to the Cabinet and detail any recommendation for the Cabinet to consider.

The Cabinet will then consider any recommendations and decide whether or not to change its original decision.

Sandwell Scrutiny Boards

04.



Children's Services and Education Scrutiny Board

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Economy, Skills, Transport and Environment Scrutiny Board Health and
Adult Social
Care Scrutiny
Board

Safer Neighbourhoods and Active Communities Scrutiny Board

The Budget and Corporate Scrutiny Management Board consists of a Chair and the 4 Chairs of the thematic Boards. Each Board is made up of 11 non-executive members. Both Children's Services and Education and Safer Neighbourhoods and Active Communities also include co-opted members who serve on the Boards alongside elected members. You can see more about the Scrutiny Boards membership and activity .

What does good Scrutiny look like?

05.

The status of th

Constructive – Scrutiny shines a spotlight on decision making by acting as a 'critical friend' to improve the transparency and accountability of the executive and Council. This check and balance role ensures the right decisions are made for the citizens of Sandwell and aligns with the Council's priorities.

Engaging – Involving a range of people in democratic debate to amplify the voice of the public and focus on issues of direct relevance to local people.

Adds Value – Utilising the unique perspective, expertise and skills of scrutiny members to challenge accepted ways of doing things and act as a champion for developing a culture of improvement in the local area.

The impact scrutiny has can be measured in two ways:

Outcomes – what stakeholders experience as a result of the review, for example if the local community recognises an improvement. The council and its partners could also be stakeholders, for example where scrutiny recommendations relate to internal processes.

Outputs – quantitative expressions of the activities being reviewed, for example 'waste bin collections have increased to 10,000 every week'. These can be expressed in financial terms to show return on investment.

Case Study

06.

Tlective Home Education Working Group – Improving support for families:

Children's Services and Education Scrutiny Board received an update which highlighted that there had been an increase in numbers of elective home education cases and it was questioned why parents were choosing to home educate and whether current support provision was sufficient.

The Board agreed to establish a working group to receive further analysis of data consider the range of ways to carry out education out of the school system and to hear the child's voice about home education.

The working group has met four times to gather evidence through a range of mechanisms, including data analysis, surveys and focus group with parents and EHE advisory teachers.

There are several areas of concern emerging from the evidence gathered so far that require further investigation and that will inform recommendations to Cabinet in the spring 2021. Further sessions are planned January – March 2021, including a focus group with teachers and head teachers.

The Children's Services and Education Board has received update reports from the working group and invited the DfE Regional Advisor to provide an update relating to the Select Committee Inquiry into Elective Home Education which commenced in October 2020. It is anticipated that the working group evidence will contribute to the Select Committee work in 2021

Member Led Scrutiny at Sandwell

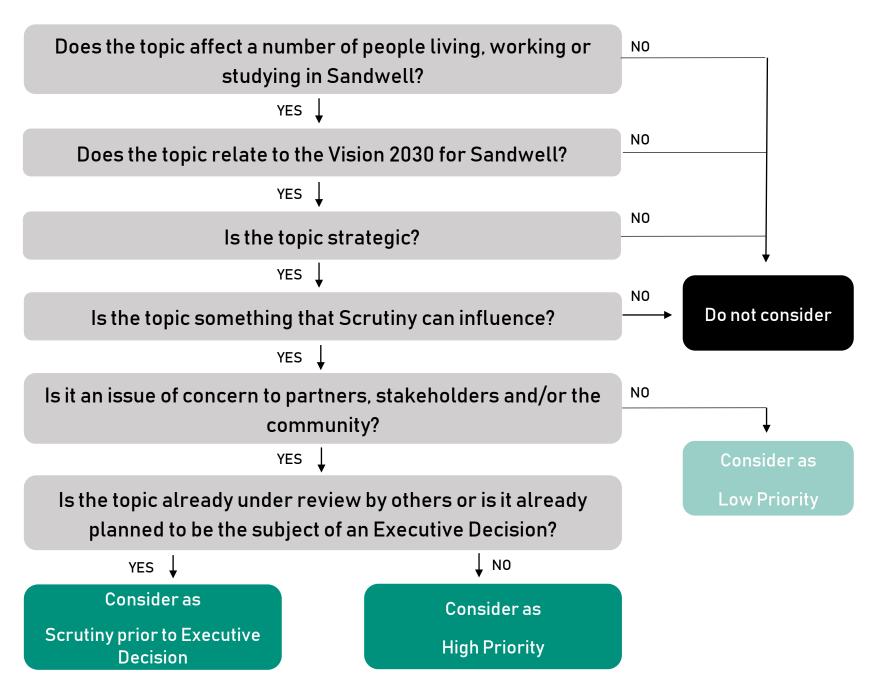
Serutiny Boards are expected to make a positive impact by supporting the development of policy, monitoring performance and making important recommendations to support improvement. Scrutiny Boards create work programmes of topics they wish to review. Topics can come from all sorts of sources...but members make the final decision!

How do you decide what goes on a work programme? Consider the below criteria:

- Issues identified by members as a key issue for the public
- Poor performing service (evidenced by performance data)
- High level of user / general public dissatisfaction with service (surveys / complaints)
- Public interest issue covered in local media
- High level of budgetary commitment to the service / policy area
- Pattern of budgetary overspends
- Council corporate priority area
- Central government policy area
- Issues raised by external audit management letters / external audit reports
- New government guidance or legislation
- Key reports or new evidence provided by external organisations on a key issue



Use this tool to help prioritise your work programmes and keep them focussed



Making sure scrutiny adds value

09

The purpose of scrutiny is ultimately to improve the lives of local people through improved public services. It is important to be able to demonstrate that scrutiny work adds value and makes a difference to local people.

There are several ways to ensure that Scrutiny adds value. Proactive scrutiny councillors should:

- Participate constructively in the activities of the committee.
- Monitor the council's decision-making process.
- Investigate the basis on which major decisions are taken and ensure they are consistent with council policy.
- Monitor the effect of national legislation on the council.
- Hold the Cabinet and officers to account in respect of their actions in carrying out council policy.
- Monitor the council's performance, jointly, where appropriate, with the cabinet member.
- Investigate the quality of services provided.
- Participate in reviews in carrying out existing policies and the development of new policies by the council through the scrutiny arrangements available and through group consultation mechanisms.
- Participate constructively in any short-life task groups or spotlight reviews agreed by the committee.



Remember: Scrutiny at Sandwell is member lead, speak to the Chair of the Scrutiny Board or contact Democratic Services if there is something you want to add to the work programme

Case Study

10.

Emproving Support For Families In Sandwell - Elective Home Education Working Group:

Children's Services and Education Scrutiny Board received an update which highlighted that there had been an increase in numbers of elective home education cases and it was questioned why parents were choosing to home educate and whether current support provision was sufficient.

The Board agreed to establish a working group to receive further analysis of data consider the range of ways to carry out education out of the school system and to hear the child's voice about home education.

The working group has met four times to gather evidence through a range of mechanisms, including data analysis, surveys and focus group with parents and EHE advisory teachers.

There are several areas of concern emerging from the evidence gathered so far that require further investigation and that will inform recommendations to Cabinet in the spring 2021. Further sessions are planned January - March 2021, including a focus group with teachers and head teachers.

The Children's Services and Education Board has received update reports from the working group and invited the DfE Regional Advisor to provide an update relating to the Select Committee Inquiry into Elective Home Education which commenced in October 2020. It is anticipated that the working group evidence will contribute to the Select Committee work in 2021.

SCRUTINY HANDBOOK FOR NEW MEMBERS

Key Terms and Questions to Consider

11

Q8estions to consider:

- How does x fit with our existing plans/budget priorities?
- How well do we compare with others (local authorities or other agencies)?
- What needs to be done to achieve target x?
- Are there any legislative requirements in the policy? If so what are they? How have they been met?

- How does x help the Council deliver its strategic priorities?
 - How have local people and/or service users and partners determined the content of the policy / strategy?
- How will Council resources and those of local people and partners affect x?

| Work Programming: | Work programming is the planning stage of scrutiny, where subjects for further investigation are identified and prioritised to the be considered by the Scrutiny Board throughout the municipal year. |
|-------------------|---|
| Recommendations: | Scrutiny boards do not make decisions,but they make recommendations. The Executive will consider the recommendations made by Scrutiny Boards and decide whether or not to make changes to their decision. |
| Call-in: | Scrutiny Members can 'call-in' Cabinet Executive decisions which have been made but not yet implemented. They can ask for further information about a decision that has been made and recommend that the Cabinet re-considers its decision. |
| Working Group: | If required, separate 'working' groups can be established as part of a Scrutiny Board to look at 'one-off' pieces of work. Working groups do not have to be politically proportionate and work on a task and finish basis. Any non-executive Member can be on a working group |

Resources

Sandwell

Committees and Scrutiny Boards at Sandwell: https://bit.ly/2RosLuH Sandwell MBC Scrutiny Review 2019: https://bit.ly/3mz3XMb

Scrutiny Annual Report 2019/20:

Constitution - Part 4:

Sandwell's Climate Change Strategy: https://bit.ly/2RTMliB

General

House of Commons Library – Report on Overview and Scrutiny: https://bit.ly/3s3y8w6

LGA – Councillors Scrutiny Workbook: https://bit.ly/322k6A1
Overview and Scrutiny Statuary Guidance: https://bit.ly/39UreTG

CFGS - 'The Good Scrutiny Guide': https://bit.ly/3wIU6rt

Boston Borough Council - Introduction to Scrutiny: https://bit.ly/32il4sk

Key Legislation:

- the Local Government Act 2000:
- the Health and Social Care Act 2001:
- the Police and Justice Act 2006;
- Local Government and Public Involvement in Health Act 2007
- the Local Democracy, Economic Development and Construction Act 2009:
- the Police Reform and Social Responsibility Act 2011;
- the Localism Act 2011;
- the Health and Social Care Act 2012.

Neighbourhoods, Communities and Policing

Latest Government Policy - MHCLG: https://bit.ly/2Q5EzSf Strategic Policing and Crime Board: https://bit.ly/3smTm8j National Housing Fodoration: https://bit.ly/3uPM/Y2P

National Housing Federation: https://bit.ly/3uRWY3B
Homelessness Code of Guidance for Local Authorities:

https://bit.ly/20dNG2r

Tpas - Tenant Engagement: https://www.tpas.org.uk/

Health

Kings Fund: https://bit.ly/3gdYmK0

CQC: https://bit.ly/3nf3per

Black Country and West Birmingham CCG: https://bit.ly/3dKuljf

Sandwell and West Birmingham NHS Hospital Trust: https://bit.ly/3vetUUh Health and Social Care Bill White Paper explained: https://bit.ly/3xfXSJk Black Country Healthcare NHS Foundation Trust: https://bit.ly/3xgWZjH

Children's Services and Education

NSPCC: https://bit.ly/3vbJ101

Sandwell Children's Trust: https://bit.ly/3gAvuvA

ESTE

Black Country Joint Executive Committee: https://bit.ly/2RNiOaf Planning for the Future White Paper: https://bit.ly/2RTMQct

CfGS: https://bit.ly/3sJB0h0

Questions? Clarifications?

Get in touch!

Democratic_Services@sandwell.gov.uk





Report to Budget and Corporate Scrutiny Management Board

14 September 2022

| Subject: | Improvement Plan Progress | | | | | | | | |
|------------------|---|--|--|--|--|--|--|--|--|
| 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 the Board considers and comments upon the progress of the Improvement Plan up to 4 August 2022
- 1.2. That any recommendations / comments are reported to Cabinet at their meeting on 28 September for their consideration
- 1.3. That the Board 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 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 September. Any recommendations or comments Budget and Corporate Scrutiny Management Board wish to make to Cabinet can be presented for Cabinet's consideration on 28 September.
- 2.3 Scrutiny's consideration of progress of the Improvement Plan and scrutiny of specific areas within the plan contributes to creating an effective scrutiny function.

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.

| Z [*] | Best start in life for children and young people |
|----------------|--|
| XXX | People live well and age well |
| | Strong resilient communities |
| | Quality homes in thriving neighbourhoods |
| (3) | A strong and inclusive economy |



















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 the 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 This report is the first quarterly update to scrutiny on overall progress of the Improvement Plan.

4.2 Specific Recommendations from External Reviews relating to Scrutiny

















- 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 scrutiny 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 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
 - 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
- 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 scrutiny. However, the LGA Corporate Peer Challenge placed emphasis on progress they observed in the way scrutiny operates and cited examples of effective scrutiny work around Serco, and the impact of the pandemic on children in the Borough.

4.3 Scrutiny Work Programme

- 4.3.1 Budget & Corporate Scrutiny Management Board have included regular reports on overall progress of the Improvement Plan on their work programme.
- 4.3.2 Scrutiny's consideration of overall progress of the Improvement Plan and of specific areas within the plan contributes to creating an effective scrutiny function. This will also assist scrutiny to identify any additional work planning items linked to the Improvement Plan.

















4.3.3 Several elements of the Improvement Plan feature on the work programmes of scrutiny boards and include the following:

| Scrutiny Board | Work plan item | Improvement Plan Theme and Workstream |
|--|---|--|
| Budget & Corporate | Progress of the Improvement Plan | All |
| | Review of Scrutiny Arrangements | Decision Making: Role and Function of Scrutiny and Audit |
| | Budget Monitoring and Budget Setting scrutiny | Corporate Oversight: Performance Management |
| | Feedback on budget consultation, resident engagement | Strategic Direction: Consultation and Engagement |
| | Staff Engagement Results | Organisational Culture: Employee Engagement |
| | Update on review of Procurement and Contract Procedure Rules incl. Implications of SEND transport procurement | Decision Making: Constitution and Governance Framework; and Procurement and Commercial: SEND Transport |
| | Customer Journey | Strategic Direction: Locality Working |
| Children's Services and Education | SCT Annual and 6monthly Review | Partnerships and Relationships: Sandwell Children's Trust |
| | SEND Transport updates | Procurement and Commercial: SEND Transport; and Decision Making: Role and Function of Scrutiny |
| Economy Skills Transport and Environment | Serco's Fleet Replacement | Procurement and Commercial: Waste Contract; and Decision Making: Role and Function of Scrutiny |
| Health and Adult Social Care | Throughout items | All work plan items link to Partnerships and |

















| | | Relationships: Effective local |
|---------------|-----------------------------|--------------------------------|
| | | structures |
| Safer | Voluntary and Community | Partnerships and |
| Neighbourhoo | Sector Grants Review | Relationships: VCS |
| ds and Active | | Relationships |
| Communities | Housing Strategy & HRA 30 | Strategic Direction: Strategy |
| | Year Plan | Development and Refresh |
| | Future provision of leisure | Procurement and |
| | services | Commercial: Leisure |
| | | Contract |

4.4 Improvement Plan Progress

4.4.1 Summary achievements:

- Significant progress made on long-standing service issues to implement decisions taken by Cabinet between December 2021 and July 2022: Sandwell Leisure Trust and establishment of Arms-Length Trading Company, Sandwell Children's Trust, the waste service, the ERP system and Lion Farm
- SEND Transport Contracts awarded and preparations for commencement from September 2022. The procurement has incorporated lessons learned from previous procurement
- Regular meeting structures in place to enable development of positive and constructive working relationships between officers and members
- Learning taken from commercial decisions, procurement and contract management and national best practice is being included in refresh of Corporate Governance Documents. The first wave of policies were approved by Council in July 2022 with others to follow this year.
- Regular reporting on budget monitoring, performance information and Improvement Plan in place
- Approval of Performance Management Framework that underpins the delivery of the Corporate Plan. Q1 performance report will be made to Cabinet in September

















- Approval of the single Improvement Plan that addresses the recommendations of all three external reviews and aims to improve how the council operates
- Approval of Regeneration Strategy and Pipeline to encourage and deliver significant investment in Sandwell
- Launch of the Early Help Strategy with partners
- Employee engagement survey conducted and being used to shape culture theme
- Council representatives actively participating in key regional and sub-regional bodies
- Capacity in Finance specialist training delivered, and a restructure completed to ensure there is sufficient capacity to manage the council's financial reporting responsibilities.
- Completion of New Member induction
- Review of Arms-Length Companies complete
- Children's Services Ofsted judgment and specific comments around the improved governance and effective relationships between Council and Trust
- Commencement of Consultation on 4-yearly election cycle following Council's approval in July
- Commencement of Consultation in relation to the Budget
- Search Consultancy engaged to commence Chief Executive recruitment
- 4.4.2 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 is included at 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.
- 4.4.3 Progress against each theme of Improvement Plan is summarised within Appendix 2. This includes an overall status rating, a description of workstream progress, commentary on progress against milestones and achievements. The theme ratings and a summary of any issues is provided below.

















4.4.4 Organisational Culture

- 4.4.4.1 Overall Status Rating Green Progress is being made across all workstreams. Of the 7 actions with an amber risk rating, all subactions to deliver the action are on track
- 4.4.4.2 Organisational Culture Progress Issues: None to report all workstreams on track.

4.4.5 Corporate Oversight

- 4.4.5.1 Overall Status Rating Amber: Progress is being made across all workstreams with some slippage/issues.
- 4.4.5.2 Of the 1 action with a red risk rating, sub-actions are on track with little or no slippage. This relates to **Performance Management Framework.**

Performance Management Framework

- The risk status is red due to need to recruit a dedicated corporate performance management resource. Whilst the dedicated resource is being recruited to, significant progress has been made to further embed the corporate performance management framework agreed by Council in April 2022, with the first quarterly performance report due to be presented to Cabinet on 28 September 2022
- **4.4.5.3** One area of amber risk, is experiencing a medium level of slippage and/or issues. This relates to **Oracle Fusion.**

ERP (Oracle Fusion)

- Procurement of the new Oracle Fusion provider evaluation period being extended by 3 weeks, due to the need for further financial evaluation, clarification needed from bidders.
- Due to the evaluation period extension, there is slippage on the support provider being in place and delivery.

4.4.6 Strategic Direction



















- 4.4.6.1 Overall Status Rating Red Progress is being made across workstreams but there are many areas with slippage/issues
- 4.4.6.2 There are 6 actions with an amber risk rating. Of the 6 actions with an amber risk rating:
 - 2 have sub-actions that have or will experience significant slippage or issues. These actions relate to Equality Policy approval and Locality Working: Pilot of Town Co-ordinator role
 - 4 have sub-actions that have or will experience medium slippage or issues. These actions relate to Corporate Asset Management Strategy Development, Commercial Strategy, Corporate Parenting Strategy, and Review of Equality and Diversity policy

Equality and Diversity

 Slippage in approval of Equality Policy due to consideration of best practice models. Policy is being prepared for October approval

Developing a model for locality working

 Pilot of town co-ordinator role has not taken place due to recruitment issues and is being reconsidered in line with community hubs approach

Corporate Asset Management Strategy Development

- Strategy is being prepared for September in line with original schedule.
- Confirmation of funding for remaining Workplace Vision components is pending
- Surplus Assets Portfolio Cabinet report has been delayed but is being prepared September Cabinet
- Implementation of asset database is on track however risk of slippage

Develop and Implement the Commercial Strategy

















- Work ongoing with Commercial Strategy but slippage from original timescales
- Strategy is in draft and will be reviewed following training with C CO and approval by Leadership Team. 5 potential workstreams are within the draft. LATC (in relation to leisure provision) will be added to the draft workstreams.

Refresh of Corporate Parenting Strategy

 Strategic priorities to be confirmed by Corporate Parenting Board ahead of September Board. Corporate parenting strategy due to be approved in September 22 by Board Members.

4.4.7 Decision Making

- 4.4.7.1 Overall Status Rating Amber: Progress is being made across all workstreams with significant progress made this month through Council's approval of first wave of changes to Corporate Governance Documents, and agreement to consult on 4-yearly election cycle.
- 4.4.7.2 Of the 5 main actions with an amber risk rating:
 - 1 sub-action has or will experience significant slippage or issues.
 This action relates to Revised Financial Regulations
 - 1 sub-action has or will experience medium slippage or issues.
 This relates to the completion of ARAC recommendations in relation to SEND Transport.
 - 1 sub-action has or will experience medium slippage or issues which is due to an error in the dates recorded. This relates to Approval of changes to scrutiny

Revised Financial Regulations

 Financial Regulations are being reviewed. Priority for change was in relation to thresholds for decisions which were approved by Council in July. Further amends to Financial Regulations will be presented to Council in October.

Completion of ARAC recommendations in relation to SEND Transport

















 All contracts have now been offered and accepted in line with commencement from new academic year. Issues were encountered due to providers returning contracts which has been resolved. Internal audit has included a review of compliance with contract procedure rules as part of their work programme. Lessons learnt regarding procurement exercises to take place.

4.4.8 Procurement and Commercial

- 4.4.8.1 Overall Status Rating Amber: Progress is being made but there is some slippage in delivery timescales.
- 4.4.8.2 Of the 5 actions with an amber risk rating, there are 2 sub-action that have or will experience medium slippage or issues. These relate to: Lion Farm Options Agreement, and Completion of ARAC recommendations in relation to SEND Transport.

Lion Farm Options Agreement

 Some slippage due to legal representatives of both sides taking longer than expected to agree terms for the Expert Determination process

Completion of ARAC recommendations in relation to SEND Transport

 All contracts have now been offered and accepted in line with commencement from new academic year. Issues were encountered due to providers returning contracts which has been resolved. Internal audit has included a review of compliance with contract procedure rules as part of their work programme. Lessons learnt regarding procurement exercises to take place.

4.4.9 Partnerships and Relationships

4.4.9.1 Overall Status Rating Amber: Progress is being made but there is some slippage in delivery timescales.



















4.4.9.2 Of the 4 actions with an amber risk rating: 4 have sub-actions that have or will experience medium slippage or issues. These actions relate to: SCT Governance Arrangements, Review partnership structures within the 'People's sphere', Corporate Review of Grant Funding

SCT Governance Arrangements

- SMBC have drafted KPIs (Key Performance indicators) which were reviewed in July and confirmed KPIs will be included in the revised contract.
- Review of contract to be concluded in Autumn (change to original timescale) to take into account the ability to be more flexible, and to align with DfE (Department for Education) schedule.
- Monthly four-way meetings diarised throughout the year.
- Ofsted Judgement 'require improvement to be good' with comments around the improved governance and effective relationships between Council and Trust.

Review partnership structures within the 'People's sphere'

- Project manager to be appointed to the partnership restructures to transition from children's to adults in place- post has been advertised.
- Partnership discussions taking place for scoping of work with partners around partnership structures in children's sphere.
- Joint approach between HWBB and SHCP (Sandwell Health & Care Partnership).
- Health and Wellbeing Strategy in draft form and will be present to the next Health and Wellbeing Board in September
- Substance Misuse deep dive presented to SHCP board and currently being written up as a stakeholder report.

Corporate Review of Grant Funding

 Desktop assessments completed of all council funded voluntary and community sector grants to understand how current funding aligns with the council's strategic priorities and to ensure that investment in the sector represents value for money for Sandwell. Where this review has identified that funding should come to an end, communication with affected organisations has commenced. Plans are being developed to meet the savings identified within the council's budget for 2023/24.

















4.5 Statutory Recommendations

- 4.5.1 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.
- 4.5.2 To provide an overview of progress against these three specific recommendations, Appendix 3 extracts the key actions that respond to each of the recommendations and they are summarised below.
- 4.6 Statutory Recommendation 1 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.

Progress update:

- Continuing to implement strategies to address the service issues highlighted in the Grant Thornton report.
 - SLT progressing the approach agreed by Cabinet in June 2022 to transfer services to a Local Authority Trading Company.
 - SCT Governance arrangements remain in place. Joint work in place with SCT in relation to corporate parenting and early help.
 - Waste Contract Contract Monitoring framework progressing well. Review of the Contract has commenced.
 - ERP (Oracle Fusion) Tender evaluation period has been extended for support provider. Project Management and Governance arrangements are in place.
 - Lion Farm action plan to implement Cabinet decision made on 12 January 2022 is on track. Responsibilities for council and developer are clearly set out.
 - Regeneration Strategy and Pipeline to underpin significant regeneration in Sandwell approved by Cabinet 23 March 2022. First monitoring update due in November.

















4.7 Statutory Recommendation 2 - 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.

Progress Update

- The Governance Review of key documents within the council's Constitution is well underway. Approval in July to revised procurement and contract procedure rules, thresholds for decisions and sale of land and buildings protocol.
- Corporate Governance Training Programme of training and development commencing in September 2022 on effective decision-making, good governance, and revised contract procedure rules
- Development of a Commercial Strategy continues
- Corporate Asset Management Strategy in development.
- 4.8 Statutory Recommendation 3 Senior leadership, both officers and members, must demonstrate that they can continue to work together effectively, that they operate in line with 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.

Progress Update

- Member Development New Member induction complete and Member Development Programme is being delivered.
- Officer Development A consolidated programme of fundamental training for managers on Corporate Governance matters is being developed for delivery from Autumn onwards
- Organisational Culture consultancy engaged and champion recruitment underway
- Work has commenced to design the Senior Leadership Team development programme which will feed into the new Management Development Programme to ensure consistency across all levels of management.

















• Meeting structures to facilitate Cabinet Member and Leadership Team cross-working re-established following election.

Reporting Framework and Governance 4.9



















- 4.9.1 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.
- 4.9.2 Two quarterly updates on progress of the Governance Improvement Plan were provided to Cabinet in April 2022 and July 2022. The next quarterly update to Cabinet will take place in September 2022.
- 4.9.3 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.
- 4.9.4 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.
- 4.9.5 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 in October this year.
- 4.9.6 Audit & Risk Assurance Committee received an introduction to the Improvement Plan and the Improvement Plan Risk Register on 28 June 2022 to support the committee's work programming. The Improvement Plan Risk Register and overall progress will be reported to the Audit & Risk Assurance Committee regularly. The Committee will focus primarily on assurance and risk management of the Plan. The next report to Audit & Risk Assurance Committee will take place on 22 September 2022.
- 4.9.7 Scrutiny Boards have now developed their work programmes. 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. This report is the first report to Budget & Corporate Scrutiny Management Board on overall progress.



















- 4.9.8 Following the first progress report to Audit & Risk Assurance Committee and Budget & Corporate Scrutiny Management Board, those members will identify areas for further exploration and reporting. Any recommendations or comments from these committees for Cabinet's consideration will be presented at Cabinet's meeting on 28 September.
- 4.9.9 External assurance will continue to play a part in our improvement journey. Grant Thornton, CIPFA and the LGA have been invited back in Autumn 2022 to monitor our progress in addressing the recommendations in their reviews.

4.10 Risk Management

- 4.10.1 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.
- 4.10.2 The current risk register is attached as 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. A detailed communication plan will be developed to ensure effective and timely communication with stakeholders
 - **Constitutional Changes** key corporate governance documents are being reviewed and the first set were approved in July with others to follow in October. Once approved, these policies will 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.
- Progress Monitoring and Risk Management approach if assessment of progress and risk assessment contains optimismbias, this will prevent an accurate and realistic view of progress. Assurance mechanisms will help manage this risk.

4.11 Changes to the Improvement Plan

- **4.11.1** The Improvement Plan is intended to be a live document updated to take account of progress and relevant changes.
- 4.11.2 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.
- **4.11.3** Changes are considered by Leadership Team at on a quarterly basis. Appendix 6 contains details of all the changes made to the Improvement Plan this guarter and are summarised as follows:
 - 3 changes made to address errors in the Improvement Plan
 - 15 changes made to amend delivery timescales
 - 1 change to add a new action
 - 1 change to amend the delivery lead

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.

Where funding is required for longer-term change, this will be incorporated into the Medium-Term Financial Strategy.

There are no land or building implications associated with the Improvement Plan as a whole.

Legal and Governance:

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.

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.

The delivery of the Improvement Plan and achievement of the desired outcomes will meet the remainder of the Directions.

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.

Scrutiny's consideration of progress of the Improvement Plan and input into specific work areas contained within the plan, contributes to the governance and assurance framework of the Improvement Plan and effective scrutiny.





















| Risk: | 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 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. |
|-----------------------|--|
| | 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. |
| 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 it 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

- 1. Improvement Plan Monitoring Tool July 2022
- Improvement Plan Theme Progress Summary July 2022
- 3. Statutory Recommendations Reporting July 2022
- 4. Improvement Plan Governance Diagram
- 5. Improvement Plan Risk Register July 2022
- 6. Changes to the Improvement Plan

7 Background Papers

Sandwell Council Governance Improvement Plan

- Adopted January 2022
- o 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

















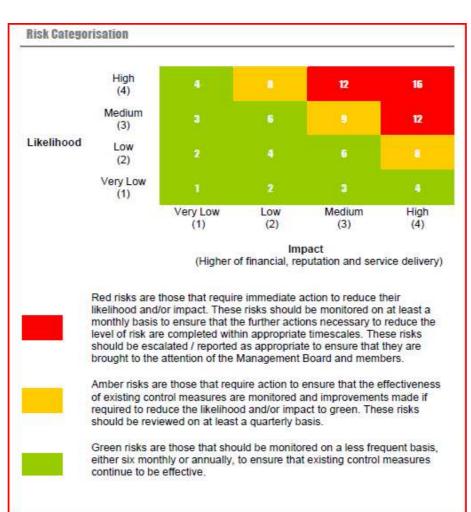


| Progress against Plan Status | Rating Definition | Leadership Team Action as a result |
|-------------------------------|--|--|
| On Track | Progress against the action is in line with the delivery date with no or minor (of less than a month) actual/projected slippage that does not | Leadership Team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



Action Risk Score (Use Corporate Risk Matrix)

| Score | | Higher o | f | Likelihood (the proximity of the | | | | |
|-----------------|-------------------------|---|---|--|--|--|--|--|
| | Financial | Reputation | Service Delivery | risk at the time of assessment) | | | | |
| 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 | 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

 Doc type
 Monitoring Document

 Sandwell Council
 Improvement Plan

 Report Date
 Jul-22

 Owner
 Leadership Team



| | | | | | | | | | | Leadership ream | 1 | | July Undates | |
|---|----------|---|--|----------------|---|-----------------------------------|----------------|-------------|---------------------|---|---|--|---|--|
| ס | | Static data | | Owners | | | | Dates | N | Nain Action Risk | Progress against plan | Evidence of status rating | Progress against plan | Evidence of status rating |
| Worksheam Establishing Organisational | Ref | Action | Director Lead | Cabinet Member | Other Leads | Update Owner (if different) | Start date | Due date | Main Action Risk | Description | Status (June 2022) | Update (June 2022) | Status (July 2022) | Update (Initial and Date) (July 2022) |
| 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 Organizational 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 | On Track- little or no slippage | Consultancy engaged. Working Group in place and meeting. Stakeholder mapping complete. Phase one measures identified - to be refined | On Track- little or no slippage | Engagement and Culture Champion recruitment underway. On track for Listening Groups to commence late August/through September |
| 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 | Not due to start | Not due to start | On Track- little or no slippage | Consultancy support engaged. Sucess measures identified. Engagement timetable established |
| Establishing Organisational Culture | OCA1.3 | 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 | Not due to start | Not due to start | Not due to start | Not due to start |
| 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 | Director – Business Strategy and Change | Deputy Leader | | Head of HR | твс | End 2022 | N/A | N/A | Not due to start | Not due to start | Not due to start | Not due to start |
| Establishing Organisational Culture | OC.A2.2 | Other actions as a result of engagement phases | Director – Business Strategy and Change | Deputy Leader | | Head of HR | твс | твс | 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 | Duplicate/ link to another action | See update to OC.B2.1 below | On Track- little or no slippage | Incorporated within update to OC.B2.1 below on management development programme |
| Officer Learning and Development | OC.B1.2 | Revision of Corporate Induction | Director – Business Strategy and Change | Deputy Leader | Director- Law & Governance | | Jun-22 | Jul-22 | N/A | N/A | Significant issues / actual/projected slippage- more than 2 months | Corporate Induction will be updated when the relevant learning interventions relating to Governance Training have been developed. RJ 07.07.22: Likely change control on dates for sequencing with Management Development Programme | Significant issues / actual/projected slippage- more than 2 months | As June. Governance training planning discussions are underway. By 0.10/80/22: Change control to sequence dates with Management Development Programme - linked to OD Strategy and Plan |
| 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 | | | On Track- little or no slippage | incorporated within Management Development Programme and progress rating reflected within that action(see update to OC.B2.1 below) As individual constitutional changes are approved, training will be rolled out to follow. First approvals due at July Council. |
| 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 | Duplicate/ link to another action | See update to OC.B2.1 below | On Track- little or no slippage | Discussing with LGA possible support around corporate governance training. Progress incorporated within Management Development Programme and progress rating reflected within that action(see update to OC.82.1 below) |
| Officer Learning and Development | OC.B1.5 | Delivery of Corporate Governance Training | Director – Business Strategy and Change | Deputy Leader | Director- Law & Governance | | Autumn 2022 | Dec-22 | 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.B1.6 | Annual Refresher of Corporate Governance Training | Director – Business Strategy and Change | Deputy Leader | Director- Law & Governance | | TBC 2023 | TBC 2023 | 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.B2.0 | Develop a clear programme of management development | Director – Business Strategy and Change | Deputy Leader | Director- Law & Governance | | | | Low Risk | Lack of engagement from managers with the programme | N/A | N/A | N/A | N/A |

| Officer Learning and Development | OC.B2.1 | Management Development Programme Designed | Director – Business Strategy and Change | Deputy Leader | Director- Law & Governance Director - Finance | Head of HR HR Team Manager L&D/OD | Aug-22 | Dec-22 | N/A | N/A | On Track- little or no slippage | RJ 08.07.22: Procurement and budget holder training in development. Currently finalising dates with LGA for Officer-Member relationship support. Sessions with other Officer-Hers are being designed with the intention that an output from the training will ble a series of pledges made by Officers and Members. Governance and Decision Making training will follow Council approvals. These initial strands of work will become a "Managers Fundamentals/Essentials programme with the broader Management Development Programme to be delivered in 2023 following the approval of an Ob Strategy and Plan. | On Track- little or no slippage | As per June. Dates for Member- Officer relationship support from LGA confirmed for September (6th and 20th) |
|--|---------|---|--|-----------------------|--|--|----------|-------------|-------------|---|--|---|--|--|
| Officer Learning and Development | OC.B2.2 | Budget Holder Role Profile Approved | Director - Finance | Deputy Leader | Director- Law & Governance | Finance Improve ment Manager | | May-22 | N/A | N/A | On Track- little or no slippage | Approved and launched at SM briefing. Will be discussing with Directorate Management Teams. SH 1/7/22 | 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 | | Head of HR HR Team Manager L&D/OD | Aug-22 | Dec-22 | 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.B2.4 | Management Development Programme Delivery | Director – Business Strategy and Change | Deputy Leader | Director- Law & Governance | | 2023 | 2023 | N/A | N/A | Not due to start | Not due to start | Not due to start | Not due to start |
| Officer and Member Relationship | OC.C1.0 | Continue regular weekly meetings between Cabinet Members and Leadership Team | Director- Law & Governance | Leader of the Council | Director- Law & Governance Chief Executive Leader Cabinet Members Leadership Team | | | | 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 | Director- Law & Governance Chief Executive Leader Cabinet Members Leadership Team | | May 2022 | May 2022 | N/A | N/A | Medium Progress- actual/ projected slippage of 1-2 months | 1:1 Meetings have been taking place. Awaiting confirmation of Conservative Group whip. Formal schedule of meetings will be scheduled to start from September. | Medium Progress- actual/ projected slippage of 1-2 months | Update as per June. Conservative Group whip to be identified. |
| 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 | Director- Law & Governance Chief Executive Leader Cabinet Members Leadership Team | | May 2022 | Jun 2022 | N/A | N/A | On Track- little or no slippage | Regular weekly meetings in place between Directors and Executive and agreed for Municipal Year | On Track- little or no slippage | In place. To be reviewed throughout year to ensure structures are fit for purpose. |
| 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 | Not due to start | Not yet due. Star Chambers to be booked for August/early September | On Track- little or no slippage | Booked for August and September |
| 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 | On track. Sessions being planned August and September for all Members. Regular dialogue with LGA. Plans are progress. | On Track- little or no slippage | Sessions have been scheduled for 6th and 20th Sep for Members. LGA will be supporting sessions with Officers around the Member-Officer Relationship. Confirming dates. |
| 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 | N/A |
| 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 | |
| Officer and Member Relationship | OC.C4.2 | Leadership Team conversation to identify mechanisms to embed and sustain the required approach and process for ward and casework (linked to desired organisational culture) | Director- Law & Governance | Deputy Leader | Director- Business Strategy & Change | | | | N/A | N/A | On Track- little or no slippage | RJ 06.07.22: Action to be pursued in Sep/Oct linked to organisational culture work. Approach to be discussed by NC and ST. | On Track-little or no slippage | Work around Member-Officer relationship is progressing but it is recognised that Member portal requires further development to meet Members' expectations. Options appraisal underway for customer management system. Action to be pursued in Sep/Oct linked to organisational culture work. Approach and timescales to be discussed by NC and ST. |

| 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 | 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 | |
| Member learning and it component | OC.D1.2 | New Member Induction | Director- Law & Governance | Deputy Leader | | May-22 | Jun-22 | N/A | N/A | On Track- little or no slippage | New Member Induction Completed | Complete | Completed and positive fedeback received from Members on changes. Further improvements are being identified for next year's induction |
| 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 | On Track- little or no slippage | Approved by Ethical Standards and Member Development Committee. MDP is a dynamic document that will be regularly reviewed and refreshed by the Committee. | On Track- little or no slippage | Approved by Ethical Standards and Member Development Committee. MDP is a dynamic document that will be regularly reviewed and refreshed by the Committee. It has also been shared with LGA and Commissioners. Discussions are taking place with LGA around assistance with delivery. |
| 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 activity as part of the Municipal Year. | On Track- little or no slippage | Ongoing activity as part of the Municipal Year is taking place. Member attendance has been good |
| 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 | On Track- little or no slippage | ST 05.07.22: MDP contains Corporate Governance training and was agreed in June. It will be rolled out throughout Municipal Year and updated as changes are implemented (e.g. scheme of delegation, fin regs, CPRules). Member Development Plan will incorporate these requirements. | Complete | Governance Review Approvals are now being implemented |
| 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 | On Track- little or no slippage | Training around decision making will be delivered throughout the municipal year as part of Improvements and continuous improvement around decision-making | On Track- little or no slippage | If Council approves key decision making thresholds in July, training will then follow for Executive around effective decision-making (by September). Role of scrutiny in the decision making process forms part of the scrutiny review that is underway and will be concluded in October |
| 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 | Not due to start | Not due to start | On Track- little or no slippage | Discussing with LGA possible support around corporate governance training. Progress incorporated within Management Development Programme and progress rating reflected within that action(see update to OC.82.1 below) |
| 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 | Not due to start | Not due to start | Not due to start | as above |
| 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 | Oct-22 | N/A | N/A | Not due to start | Not due to start | On Track- little or no slippage | Annual Refresher of Code of Corporate Governance Training planned in November in readiness for Code of Corporate Governance being considered by Council at its Dec Meeting. Change control: Revise date to November |
| 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 | Agreed and in place. | On Track- little or no slippage | In place and no issues. Regular review |
| 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 | Picked up through Leadership Team discussions (within and outside meetings) | On Track- little or no slippage | Picked up through Leadership Team discussions (within and outside meetings) |

| 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 | Action not yet commenced. Approach to be agreed in July ahead of commencement of Chief Executive Recruitment. Change Control: action is in relation to Chief Officer Terms and Conditions Committee Members | Medium Progress- actual/ projected slippage of 1-2 months | Intention to deliver training in August for Chief Officer Terms and Conditions Committee Members. |
|---------------------------------|---------|---|--|-----------------------|---------------------------|---------------|--|--|-------------|--|--|---|--|---|
| Interna 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 | | | Not due to start | Not due to start - linked to establishing desired organisational culture | Not due to start | Not due to start - linked to establishing desired organisational culture. May be sooner as a result of Member-Officer relationship work |
| Intertal 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 1/7/22 - Regular internal communications being delivered, Communications & Corporate Affairs Manager regualrly meeting with Leadership Team to agree key messages | | |
| 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 enagement from individual directorates in identifying required actions | On Track- little or no slippage | NC 1/7/22 - All Employee Engagement results broken down to directorate level basis and respective DMT's briefed on the figures | slippage | NC 19/7/22 - Request sent to all directorates to identify the actions being put in place to respond to employee engagement survey feedback. 01/08/22 RI: Leadership Team discussion planned 30/08 to consider initial Council-wide repsonse and actions to EES. |
| 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 | Complete | | Complete | |
| Chief Executive Recruitment | OC.F2.1 | Decision on the timescale to go out for advert for the permanent Chief Executive | Commissioner | Leader of the Council | | Head of HR | | Autumn 2022 | N/A | N/A | On Track- little or no slippage | Search proposals and recruitment schedule draft underway | On Track- little or no slippage | Search consultancy support engaged. Chief Officer Terms and Conditions Committee scheduled to meet 28 July to approve process. Creative marketing campaign planning underway. |
| Chief Executive Recruitment | OC.F2.2 | Recruitment process takes place | Commissioner | Leader of the Council | | Head of HR | Dates TBC following Autumn decision | Dates TBC following Autumn decision | N/A | N/A | On Track- little or no slippage | Preparation underway to commence campaign from late summer - date TBD | On Track- little or no slippage | Schedule drafted, to be finalised following Chief Officer Terms and Conditions Committee meeting 28 July. On schedule for commencement (advert out) in August |
| | | | | | | | | | | | | | | |

Doc type Monitoring Document
Sandwell Council
Project Improvement Plan
Start date Jul-22



| | | | | | | | | | owner | Leadership Team | | | | July Update |
|--|---------|--|---------------------------------------|--|---|--------------------------------|-------------|--------------------------------|---------------------|---|--|---|--|--|
| | | Static data | | Own | ers | | Dates | | N. | Nain Action Risk | Progress against plan | Evidence of status rating | Progress against plan | Evidence of status rating |
| Workstream | Ref | Action | Director Lead | Cabinet Member | Other Leads | Update Owner (if different) | Start date | Due date | Main Action Risk | Description | Status (June 2022) | Update (June 2022) | Status (July 2022) | Update (Initial and Date) (July 2022) |
| Sandwell Children's Trust | PR.A1.0 | Continue with robust governous arrangements in piles estimating the account builty of SCT to define improved outcomes for children and young people in Sandwell in line with the contract | Director - Children and Education | Children and Education | | | Autumn 2021 | Ongoing | Medium Risk | This is identified as a Corporate Risk - the contract between SCT and the Countil is subject to review, the Council are embarking on a mid point contract review with the Trust and the DTE - this will include revision on Key Performance indicators (DPS) 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 | | | Jan-22 | Aug 2022 and then quarterly | N/A | N/A | On Track-little or no slippage | The Trust contract and KPIs are included in the PMF. | On Track- little or no slippage | As June update |
| 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 | Medium Progress- actual/ projected slippage of 1-2 | SMBC has issued the draft KPIs, the Trust are reviewing them ahead of the contract review and the revised KPIs will be included in the new Contract. | Medium Progress- actual/ projected slippage of 1-2 months | The contract review meeting took place on 20 July 2022. The confirmed KPIs will be included in the revised contract. |
| 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 | months Medium Progress- actual/ projected slippage of 1-2 months | As Above PR.A1.2 | Medium Progress- actual/ projected slippage of 1-2 months | As Above PR.A1.2 |
| Sandwell Children's Trust | PRAL4 | Review of Contract concludes | Director - Children and Education | Cabinet Member for Children and Education | | | | Summer 2022 | N/A | N/A | Medium Progress- actual/ projected slippage of 1-2 months | This is likely to be concluded in the autumn to align with the DfE schedule and statutory direction. | Medium Progress- actual/ projected slippage of 1-2 months | As June update |
| Sandwell Children's Trust | PRA15 | Contract Review with DNE | Director - Children and Education | Cabinet Member for Children and Education | Director – Finance | | | May-22 | N/A | N/A | Medium Progress- actual/ projected slippage of 1-2 months | The contract review process is on schedule with confirmed dates to include a cross section of senior officers across the council, Trust and DET. The review will flours on contract requirements, revised SYS and governments as part of the DET direction. | Medium Progress- actual/projected stippage of 1-2 months | The condetact review process is on schedule with revised date. The review team met 20 July 2021 to progress developments with 20 July 2021 to proview will focus on contract requirements, revised 5/15 and 20 July 2021 to 15/15 and 15/1 |
| Sandwell Children's Trust | PR.AZ.0 | Establish and maintain positive relationship between SMBC and SCT at senior officer and member level | Director - Children and Education | Cabinet Member for Children and Education | | | Autumn 2021 | Ongoing | Low Risk | The introduction of monthly 4 way meetings with the CE of the Trust, the Chair of the Trust, the Chair of the Trust of the CE of the Trust, the Lead Cabinet Member and the DCS - this is supporting of the relationship between the Council and the Trust. | N/A | N/A | N/A | N/A |
| Sandwell Children's Trust | PR.A2.1 | Continuation of regular cross - SMBC-SCT Leadership meetings in piloe (rocking Chair of thest based, Lead Meetiner, CCO of the That and CCO) | Director - Children and Education | Cabinet Member for Children and Education | | | | Ongoing | N/A | N/A | On Track-little or no slippage | Meetings are districted throughout the year to include the Lead Member, DCS, Chair of the Trust Board and CEX of the Trust Board and CEX of the Trust Lead of the Trust Board effectiveness of arrangement provided through Oritzed judgment of improvements Judgment of improvements Lead State Lead Lead improvement to be good and comments from Ottode airound the improved governance and effective relationships between the council and Trust. | On Track-little or no slippage | As June update |
| Sandwell Children's Trust | PR.A2.2 | Confirm Member participation in Governance Arrangements for new Municipal Year | Director - Children and Education | Cabinet Member for Children and Education | | | | Jun-22 | N/A | N/A | On Track-little or no slippage | Scrutiny cycle confirmed, performance monitoring which forms part of the contract. | Complete | Complete. Member Engagement governance is set and Scrutiny confirmed. MM 2/8 (email from Michael on 30/7) |
| Sandwell Children's Trust | PR.A3.0 | Establish carporate approach to working with SCT on shared issues, such as corporate powerling 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 (CLSF) has enabled shared priorities to be developed and priorities to be developed and protribes to be developed and partnership - this has led to an improved understanding of strategic planning including, though not limited to, the bunch of the Early Help and Corporate Parenting Strategies. | N/A | NΑ | 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 | The strategic priorities have been agreed across the partnership and monitored through the Children and Families Strategic Partnership This assurance is in place as | On Track- little or no slippage | As June update |
| Sandwell Children's Trust | PR.A3.2 | Assurance that approach to working logether is effective through regular programme of performance reports | Director - Children and Education | Cabinet Member for Children and Education | | | | Aug 2022 and the ongoing | N/A | N/A | On Track-little or no slippage | part of the governance arrangements (as part of the contract) and include the | On Track-little or no slippage | As itune update |
| 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 | | Leader of the Council / Cabinet Member for Regeneration and Growth | Cabinet Chief Executive | | Jan-22 | | Medium Risk | Member input into key WIMCA 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 | Council / Cabinet Member for | Cabinet Chief Executive | | | Complete | N/A | N/A | | Complete | Complete | Complete |
| Regional and Sub- Regional presence | PR.B1.2 | Sandwell asks of trailblazer devolution deal agreed | Director- Regeneration & Growth | Council / Cabinet Member for | 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 | Council / Cabinet Member | Cabinet Chief Executive | | | Complete | N/A | N/A | Complete | Complete | Complete | Complete |
| Regional presence Regional and Sub- | | | Director | for Deader or line Council! / Cabinet Member | Chief Executive Cabinet | | | | | | | | | |
| Regional presence | PR.B1.4 | CRSTS allocation (transport) approved by CA Board | Regeneration & Growth | Cabinet Member for | 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 agends 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 | Medium Progress- actual/ projected slippage of 1-2 months | New Cabinet Member has now got all WMCA. Key Member meetings in diary and briefings taking place on SPF, TDD and Metro / CRSTS | On Track-little or no slippage | Attendance at WMCA, ABCA and BCLEP meetings much improved since May and engagement with agenda issues is improved. Using the Briefing information from Officers effectively. |
| Effective Local Structures | PR.C1.0 | Review partnership structures will fin 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 | | | In place | N/A | N/A | Medium Progress- actual/ projected slippage of 1-2 months | Discussions are underway with the Director of Adult Social Care and the Director of Children and Education. A project manager will be appointed to coordinate this activity across the partnership. | On Track-little or no slippage | 23/7/2022 - post has been advertised and meetings arranged to review data and agreed project principles before project lead arrives. |
| 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-Public Health Director-Adult Social Care Director-Public Health | | Mar-22 | Sep-22 | N/A | N/A N/A | months | Partnership discussions have commenced and options and plans being considered across the range of current governance structures. | Medium Progress- actual/ projected slippage of 1-2 months | As June update |
| | | | | | | | | | N/A | N/A | N/A | N/A | N/A | N/A |

| Effective Local Structures | | 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 | Medium Risk | Joint approach between HWBB and SHCP approved by both boards. Draft strategy in production. | Medium Progress- actual/ projected slippage of 1-2 months | Joint approach between HWBB and SHCP approved by both boards. Draft strategy in production. | Medium Progress- actual/ projected slippage of 1-2 months | The Health and Wellbeing Strategy is currently in draft form and will be presented to the next Health and Wellbeing Board in September. |
|-------------------------------|---------|---|-------------------------------|---|-------------------------|--------|--------|-------------|--|--|---|--|---|
| Effective Local Structures | PR.C2.1 | | 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 | Medium Risk | First deep dive (substance misuse) presented at SHCP Board | Medium Progress- actual/ projected slippage of 1-2 months | First deep dive (substance misuse) presented at SHCP Board | Medium Progress- actual/ projected slippage of 1-2 months | The first deep dive into integrated substance misuse has been completed and is currently being written up as a stakeholder report by an NHS colleague in collaboration with Public Health. |
| VCS Relationships | | Relationship with Voluntary & Community Sector (VCS) and Funding to Voluntary & Community Sector. | Leadership Team | Cabinet Member for Communities | | Mar-22 | Jul-05 | | | 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 | projected slippage of 1-2 | Reviews of some grants are underway and draft proposals for reform of grants and efficiency savings have been prepared. | months | Decision needs to be made on how savings will be delivered for 2023/24 |
| VCS Relationships | PR.D1.2 | VCS Strategy formation commences | Leadership Team | for | | 2023 | 2023 | N/A | N/A | Not due to start | | Not due to start | |
| | | | | | | | | | | | | | |

Change Control Next discussion- 4 August 2022 Start date Change Theme Action Action Title hange date Change/ Impact of change (incl. any Owner Date Type of Change conclusion of scrutiny review), end date 2023 (specific timescale for implementation will be determined once review concluded) Director- Law & Develop Health & Wellbeing Strategy that builds on existing whole system approach to addressing health inequalities Test adequacy of partnerships and integration through Health Outcomes Framework and system-wide thematic 22 Partnership & Relationships PR.C2.0 Director-Adult Social Care change reference number to match workstream PR.C1.3 8/2022 Mistake on Document n/a n/a 23 Partnership & PR.C2.1 08/2022 Mistake on Document n/a n/a n/a PC 813 4 Gommercial 2 Corporate Oversight Review of corporate debt recovery processes completed Director- Finance 06/07/22 Change to delivery timescales (actions and milestones) CO.D3.3 Jun-22 Oct-22 Support Fund schemes due to government solicies. Change to October 2022. A new action will be added to the Corporate Oversight theme meaning a revised date is not required for this action. Due date of June 22 to be revised. 2 stage process. Stage 1 complete irector- Finance 27/07/22 Change to delivery timescales (actions CO.D3.2 Review of internal charges Jun-22 Oct-22 Procure new support provider to deliver Oracle Fusion Director- Finance 01/08/2022 Change to delivery timescales (actions and milestones) Evaluation period extended by 3 weeks due to need to financial evaluation - clarifications needed CO.A1.6 from bidders.
Slippage as Revenues and Benefits SM has been focusing on Energy Rebate and Household Support Fund schemes due to government policies, Change to October 2022. 17 Corporate Oversight Review of corporate debt recovery processes completed irector- Finance 01/08/2022 Change to delivery timescales (actions and milestones) CO.D3.3 Jun-22 Oct-22 Duplicate change control entry number 2 octor- Finance 02/08/2022 Change to delivery timescales (actions Change implementation date. Date the following appointment of provider. CO.A1.0 TBC nce Date is know this can be added to the IP monitoring tool Approval to change decision making thresholds took place in July. Further revisions to Fin Regs being prepared for Council in October. Content of Management Development Programme to be sequenced accordingly. 12 Decision Making DM.B1.3 Revised Financial Regs Agreed Jul-22 Oct-22 4 Organisational OC.B1.2 Revision of Corporate Induction Director –
Business Strategy 27/07/2022 Change to delivery timescales (actions and milestones) Revision of dates to link the Corporate Induction to the overall OD strategy and plan. Jul-22 Feb-23 and Change Revise delivery date from October to November for Annual Refresher of Code of Corporate Governance to reflect plans for training to take place in November (ahead of December Council pages) 9 Organisational OC.D2.5 Annual Refresher on Corporate Governance Training and Inclusion in N Member Induction 27/07/2022 Change to delivery timescales (actions and milestones) Oct-22 Nov-22 place in November (altead of December Counce approximation). The contract review process requires a revised end date to November 22. Action to be concluded in the autumn now that more flexibility (due to Ofsted visit having taken place), to align with the DEE schedule, and as we don't wish to everle break clause. C C O have delivered training and progressing with "welface." 14 Partnership & PR.A1.5 Contract Review with DFE 01/08/2022 Change to delivery timescales (actions and milestones) 15 Partnership & PR.A1.4 18 Strategic Decision SD.A5.1 Commercial Strategy Approved irector- Finance 01/08/2022 Change to delivery timescales (actions and milestones) business case development. Strategy is in draft but will be reviewed following the above and approved Oct-22 by LT.

Oct-22 C Co are now developing business cases foollowing the workshops and training. SD A5.2 Business Cases Presented for commercial workstreams Director- Finance 01/08/2022 Change to delivery timescales (actions and milestones) Jun-22 Sep-22 On track for September Cabinet Approve
Slippage to timescales- Equalities Policy has been reviewed. Draft being prepared for new Equalities
Approve SD.D1.1 MTFP Review concluded 3 Strategic Decision SD.B1.4 Equality Policy reviewed Director- Law & Governance 13/07/2022 Change to delivery timescales (actions and milestones) Jun-22 reviewed. Draft being prepared for new Equalities Policy.

Due to be presented to Council in October. 2. Draft programmers of the Council in October. 2. Physics approach.

Revisive end date. Compliance review completed in April. 2nd action is procurement of stock surveys (they will be completed ulune 2023). Add new actions are not in order to all gary with community hubs work. Decision required on new strategy by October. I likely channel to action. 27/07/22 Change to delivery timescales (actions and milestones) SD.B1.5 Equality Policy approved 7 Strategic Decision 28/07/22 Change to delivery timescales (actions and milestones) SD.A6.1 Review of compliance and stock data May-22 21 Strategic Decision Director of Housing 01/08/2022 Change to delivery timescales (actions and milestones) Pilot of Town Co-ordinator role commences October, Likely change to action
This report has been delayed due to challenges of DirectorRegeneration and 01/08/2022 Change to delivery timescales (actions and milestones) Ins report has been delayed due to challenges of finalising list of surplus corporate assets. This is now scheduled for Cabinet in September as part of the AMS. SD.A2.10 Maximising Value out of surplus assets portfolio – Cabinet report Jul-22 Sep-22 10 Strategic Decision Director-Regeneration and 01/08/2022 Change of Delivery Lead(s) Growth SD.A2.5 Options for hub locations identified Change to joint owners. Needs to reflect buildings appraisal and service model. Regeneration and Cirowin to Unicotor-Housing.

CO.D3.5 -Implementation of recommendations from CPFa in telation to internal chances

Approve
Mar-23

December: Work ongoing through to March 2023. Approve
(Datal Reeded from Tony Micquiver). 25 Corporate Oversight DirectorRegeneration and Growth 04/08/2022 Change to delivery timescales (actions and milestones) 26 Procurement & PC.C2.3 (Asset management) Implementation Dec-22

| Doc type | Monitoring Document |
|------------|---------------------|
| | Sandwell Council |
| Project | Improvement Plan |
| Start date | Jul-22 |
| Owner | Leadership Team |



| | | Static data | | Owners | | | | Dates | N. | Main Action Risk | Progress against plan | Evidence of status rating | Progress against plan | Evidence of status rating |
|--|---------|--|--|--------------------------|--|--|----------------|--------------------|---------------------|---|------------------------------------|---|---|---|
| Workstream | Ref | Action | Director Lead | Cabinet Member | Other Leads | Update Owner (if different) | Start date | Due date | Main Action Risk | Description | Status (June 2022) | Update (June 2022) | Status (July 2022) | Update (Initial and Date) (July 2022) |
| ERP | CO.A1.0 | Implement Oracle Fusion | Director- Finance | Deputy Leader | Director- Business Strategy & Change Director- Law | | Dec-21 | Apr-23 | 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 | мя | Change Control - change implementation date to August 2023 |
| ERP | CO.A1.1 | Cabinet approval for action plan to continue implementation of Oracle Fusion | Director- Finance | Deputy Leader | Director- Business Strategy & Change | | | Complete | N/A | N/A | Complete | | Complete | |
| ERP | CO.A1.2 | Terminate implementation partner contract with InoApps | Director- Finance | Deputy Leader | Director- Law Director- Business Strategy & Change Director- Law | | | Complete | N/A | N/A | 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 | |
| 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 | |
| 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 | | Initial cohort trained in project management. (DS 30/06/22) | On Track- little or no slippage | Further training to be arranged if required. |
| ERP | CO.A1.6 | Procure new support provider to deliver Oracle Fusion | Director- Finance | Deputy Leader | Director- Business Strategy & Change Director- Law | | | Jul-22 | N/A | N/A | On Track- little or no slippage | Tender currently being evaluated. Due to be awarded in July. SH | Medium Progress- actual/ projected slippage of 1-2 months | Evaluation period extended by 3 weeks due to need to financial evaluation - clarifications needed from bidders. SH 28/07/2022 |
| ERP | CO.A1.7 | Support provider in place and delivery commences | Director- Finance | Deputy Leader | Director- Business Strategy & Change | | Jul-22 | Apr-23 | N/A | N/A | On Track- little or no slippage | Tender currently being evaluated. Due to be awarded in July. SH | Medium Progress- actual/ projected slippage of 1-2 months | As above. |
| 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 | MA | N/A |
| Improvement Planning, Monitoring and Learning | CO.B1.1 | Council approval of Improvement Plan | Leadership team | Leader of the Council | | Strategic Lead: Service Improvem ent | | Jun-22 | N/A | N/A | Complete | | Complete | |
| Improvement Planning, Monitoring and Learning | CO.B1.2 | Commissioners Report prepared | Commissioners | Leader of the Council | | Chief Of Staff- Commissi oner Team | | by 22 June 2022 | N/A | N/A | Complete | | Complete | |
| Improvement Planning, Monitoring and Learning | CO.B1.3 | Commissioners Report to Secretary of State | Commissioners | Leader of the Council | | Chief Of Staff- Commissi oner Team | | by 22 June 2022 | N/A | | Complete | | Complete | |
| 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 |
| Improvement Planning, Monitoring and Learning | CO.B2.1 | Council approval of Improvement Plan Phase 2 | Leadership team | Leader of the Council | | Strategic Lead: Service Improvem ent | | | N/A | N/A | Not due to start | | Not that to start | |
| Improvement Planning, Monitoring and Learning | CO.B3.0 | Continuous Improvement Plan | Director- Business Strategy & Change | Leader of the Council | | | | | Low Risk | Risk relates to timely development and approval linked to organisational culture theme | N/A | N/A | NA | 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 the to start | |
| 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 | | wa | N/A |
| Performance Management | CO.C1.1 | Council approval of PMF | Director- Business Strategy & Change | Deputy Leader | | Strategic Lead: Service Improvem ent | | Complete | N/A | N/A | Complete | Complete | Complete | Complete |

| | | | | | | T | | | | | | | | |
|---|----------|---|--|---------------|--------------------------------|--|--------|-----------|----------------|---|--|---|---|---|
| Performance Management | CO.C1.2 | Q1 performance report | Director- Business Strategy & Change | Deputy Leader | | Strategic Lead: Service Improvem ent | | Aug-22 | N/A | N/A | On Track- little or no slippage | RJ 05.07.22: Preparations underway and on track for Q1 report to be made to Cabinet in September. | On Track- little or no slippage | RJ 18.07.22: Preparations underway and on track for Q1 report to be made to Cabinet in September. |
| Performance Management | CO.C2.0 | Budget Monitoring | Director- Finance | Deputy Leader | | | Mar-22 | Ongoing | Low Risk | On track | N/A | N/A | 4.4 | N/A |
| Performance Management | CO.C2.1 | Report format agreed by Leadership Team | Director- Finance | Deputy Leader | | | | Complete | N/A | | 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 | On Track- little or no slippage | Not yet due | On Track- little or no slippage | On track |
| Performance Management | _ | Monthly Budget monitoring | Director- Finance | Deputy Leader | | | | Ongoing | N/A | N/A | On Track- little or no | On track | On Track- little or no | On track |
| Organisational | | | | | | | | | | - | slippage | | slippage | |
| | CO.D1.0 | Restructuring | Leadership Team | Deputy Leader | | | Dec-20 | Dec-22 | | Not yet rated | N/A | N/A | N/A | N/A |
| and Enabling Corporate Core | CO.D1.1 | Directorate Level restructuring | Director- Business Strategy & Change | Deputy Leader | | Head of HR | | | N/A | N/A | On Track- little or no slippage | This work is progressing, however requires designated ownership and oversight Requested decision that Director of Business Strategy and Change pick up owning this action and also embedding the organisational design principles put forward at Leadership Teamby the Head of HR | On Track-little or no slippage | As per June update. Decision req d by Lshp Team 04/08/22 regarding ownership of the action and to provide risk score. |
| 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 | On track | 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 | On Track- little or no slippage | Restructure approved and implemented. | Complete | Complete |
| Organisational | CO.D2.2 | Expectations on financial services section established | Director- Finance | Deputy Leader | | | | Jun-22 | N/A | N/A | On Track- little or no slippage | Budget Holder roles completed and launched and Service Manager Briefing | 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 Improvem ent Manager | | Sep-22 | N/A | N/A | On Track- little or no slippage | Will follow Restructure implementation | On Track- little or no slippage | On track |
| and Enabling Corporate Core | CO.D2.4 | KPIs and standards developed for financial services section | Director- Finance | Deputy Leader | Finance Improvement Manager | Finance Improvem ent Manager | | Aug-22 | N/A | N/A | On Track- little or no slippage | On track | On Track- little or no slippage | On track |
| 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 | u.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 | | | | Jun-22 | N/A | N/A | Medium Progress- actual/ projected slippage of 1-2 months | The CIPFA review is underway. Will not be complete by end of June | Complete | CIPFA initial review complete but recommendations arising from that will need further work. |
| and Enabling Corporate Core | CO.D3.3 | Review of corporate debt recovery processes completed | Director- Finance | Deputy Leader | | | | Jun-22 | N/A | N/A | Medium Progress- actual/ projected slippage of 1-2 months | Slippage as Revenues and Benefits SM has been focusing on Energy Rebate and Household Support Fund schemes due to government policies. Change to October 2022. | Medium Progress- actual/ projected slippage of 1-2 months | As June update |
| 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 | Business Analyst recruitment underway. Lean Review support and training procured. | On Track- little or no slippage | As June update |
| 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 | a.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 |
| 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 |
| 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 |
| 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 | Change | Deputy Leader | | | | Complete | N/A | N/A | Complete | Complete | Complete | Complete |
| Programme and Project | | | Director- | | | | | | | | | | | |

| Programme and Project Management | CO.E1.3 | Corporate Transformation PMO established | Director- Business Strategy & Change | Deputy Leader | | Late 2022 | N/A | N/A | | On Track- little or no slippage | NC - 19/7/2022 Interim AD - Transformation appointed, realignment of BSC direcotrate agreed enabling the establishment of a corporate transformation function |
|-------------------------------------|---------|--|--|---------------|--|-----------|-----|-----|--|------------------------------------|---|
| Programme and Project Management | CO.E1.4 | Programme and Project Management System Implementation | Director- Business Strategy & Change | Deputy Leader | | Late 2022 | N/A | N/A | | On Track- little or no slippage | NC 19/7/22 - Demonstratations and market testing of potential solutions has commenced |
| | | | | | | | | | | | |

Theme 3 -Strategic Direction

| Doc type | Monitoring Document | |
|------------|--------------------------------------|------------|
| Project | Sandwell Council Improvement Plan | MPROVEMENT |
| Start date | Jul-22 | PLAN 🏅 |
| Owner | Leadership Team | |

| | | | | | | | | | | | | | | July Update |
|--|----------|---|---------------------------------------|--|-------------|---|----------------|----------|---------------------|--|--|---|--|---|
| | | Static data | | Owners | | | | Dates | ı | Aain Action Risk | Progress against plan | Evidence of status rating | Progress against plan | Evidence of status rating |
| Workstream | Ref | Action | Director Lead | Cabinet Member | Other Leads | Update Owner (if different) | Start date | Due date | Main Action Risk | Description | Status (June 2022) | Update (June 2022) | Status (July 2022) | Update (Initial and Date) (July 2022) |
| 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 | |
| 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 | | TMG 27.06.22: On track: First Update will cover April - September 2022 and be available during November 222 | On Track- little or no slippage | First Update will cover April - September 2022 and be available during November 2022 |
| 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 | RJ 28.06.22: Updates within SDA1.3a-d. Amber overall rating reflects slippage in programme managament software procurement (SD.41.3b) | Medium Progress- actual/ projected slippage of 1-2 months | Amber status: Software procurement not yet taken place and interviews / recruitment to key Project Manager positions only just taken place but not in post yet. |
| Strategy development and refresh | SD.A1.3a | o Programme and Project Management Structures in place | Director- Regeneration & Growth | Cabinet Member for Regeneration and Growth | | | | | N/A | N/A | On Track- little or no slippage | Project and Programme Management Boards Terms of Reference agreed and all established. | On Track- little or no slippage | Project and Programme Management Boards Terms of Reference agreed and all established. |
| Strategy development and refresh | SD.A1.3b | o Programme Management Software Procurement | Director- Regeneration & Growth | Cabinet Member for Regeneration and Growth | | | | | N/A | N/A | Medium Progress- actual/ projected slippage of 1-2 months | TMG 27.06.22: Delay due to Corporate Directorate needs | Medium Progress- actual/ projected slippage of 1-2 months | This procurement has been delayed due to Corporate issues about software but now proceeding and preperation for procurement process now in train |
| Strategy development and refresh | SD.A1.3c | o Project Management Software procurement | Director- Regeneration & Growth | Cabinet Member for Regeneration and Growth | | | | | N/A | N/A | On Track- little or no slippage | TMG 27.06.22: MS Project is in place and used now. | On Track- little or no slippage | MS Project is the preferred project management software for key projects and is in use. This action should be closed now. |
| 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 | | | | | N/A | N/A | On Track- little or no slippage | TMG 27.06.22Supplier selected and On track with Comms and Regeneration | On Track- little or no slippage | Collating information to publish on Microsite and working with company to format and organise info and graphics. Aim is to go live in September 2022 |
| Strategy development and refresh | SD.A2.0 | Corporate Asset Management Strategy Development | Director- Regeneration & Growth | Cabinet Member for Regeneration and Growth | | Service Manager Strategi c 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 | | | 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 | On Track- little or no slippage | Not yet formally approved. | Medium Progress- actual/ projected slippage of 1-2 months | Funding has not been approved for further phase of WPV. Therefore, nothing is being taken forward at this stage until Project Board / CEO / Leader decide if the next phase is happening. |
|--|----------|---|---------------------------------------|--|---|--------|-----------------------------|-----|-----|--|--|--|--|
| Strategy development and refresh | SD.A2.3 | Transforming Local Services | 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.A2.4 | 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 |
| Strategy development and refresh | SD.A2.5 | Options for hub locations identified | Director- Regeneration & Growth | Cabinet Member for Regeneration and Growth | Service Manager- Strategic Asset & Land | Jun-22 | Sep-22 | N/A | N/A | On Track- little or no slippage | Local Hubs Workshop led by Director of Housing arranged with Cabinet in July 2022 | Medium Progress- actual/ projected slippage of 1-2 months | Community hub services have been broadly scoped, but locations not yet identified. |
| Strategy development and refresh | SD.A2.6 | Asset Review | 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.A2.7 | 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 | slippage of 1-2 | CH 04.07.22: On track for December but the programme is tight and the risk of slippage is | Medium Progress- actual/ projected slippage of 1-2 months | On track for December but the programme is tight and the risk of slippage is significant. |
| 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 | | Jul-22 | N/A | N/A | Medium Progress- actual/ projected slippage of 1-2 months | there have been delays in obtaining confirmation from service areas that none of the assets on the Surplus Assets list have potential to support service delivery. Given that many assets on the list were declared surplus many years ago, it is important to check that they are all still surplus. This exercise is taking time, but it is still intended to obtain Cabinet approval in the autumn to commence the detailed review. | Medium Progress- actual/ projected slippage of 1-2 months | This report has been delayed due to challenges of finalising list of surplus corporate assets. This is now scheduled for Cabinet in September as part of the AMS. |
| 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 | | Strategy is being drafted for Cabinet in September. | On Track- little or no slippage | Draft strategy discussed at Leadership Team on two occasions for Director input. Strategy document being further updated and informal session on this planned with Cabinet in September 2022 |

| 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 | | N/A | N/A | N/A | need a general update whilst milestones are being prepared |
|--|---------|--|---|-------------------------------|--|---|----------------|----------|----------------|--|--|--|--|---|
| 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 Procurem ent Strategy Manager | Autumn 2021 | Jul-22 | Low Risk | | N/A | | N/A | |
| Strategy development and refresh | SD.A4.1 | Procurement & Contract Procedure Rules approved | Director-Finance | Deputy Leader | | Interim Procurem ent Strategy Manager | | May-22 | N/A | N/A | On Track- little or no slippage | Review completed but may be slippage in Council approval to September following Governance Working Group | Complete | Completed - approved at July Council |
| Strategy development and refresh | SD.A4.2 | Training developed | Director- Finance | Deputy Leader | | Interim Procurem ent Strategy Manager | Aug-22 | Oct-22 | N/A | N/A | Medium Progress- actual/ projected slippage of 1-2 months | May be slippage if revised Contract Procedure Rules not approved by Council in July. SH 30/06 | On Track- little or no slippage | Now that Council has approved the CPR's training can now be prepared/planned |
| Strategy development and refresh | SD.A4.3 | Training delivered | Director- Finance | Deputy Leader | | Interim Procurem ent Strategy Manager | Autumn 22 | Dec-22 | N/A | N/A | Medium Progress- actual/ projected slippage of 1-2 months | May be slippage if revised Contract Procedure Rules not approved by Council in July. SH 30/06 | On Track- little or no slippage | As above |
| 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 | Change control - change target date to October 2022 |
| Strategy development and refresh | SD.A5.1 | Commercial Strategy Approved | Director-Finance | Deputy Leader | | | | Jul-22 | N/A | N/A | Medium Progress- actual/ projected slippage of 1-2 months | Commercial Strategy drafted but given limited opportunities arising from work so far, C Co are delivering training and then will revisit draft Strategy and action plan so likely to be a further iteration before approval SH 30/06 | Medium Progress- actual/ projected slippage of 1-2 months | C Co have delivered training and progressing with business case development. Strategy is in draft but will be reviewed following the above and approved by LT. 18 UA/G8/22: 4 Potential workstreams are in the draft strategy. LATC (Leisure provision) will be added as a strand to the commercial strategy. |
| Strategy development and refresh | SD.A5.2 | Business Cases Presented for commercial workstreams | Director- Finance | Deputy Leader | | | | Jun-22 | N/A | N/A | Medium Progress- actual/ projected slippage of 1-2 months | One business stream developed. Others to be revisited after training. | Medium Progress- actual/ projected slippage of 1-2 months | C Co are now developing business cases following the workshops and training. |
| 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 | On Track- little or no slippage | Review completed but has shown that stock condition surveys are required. These will now be procured. | Medium Progress- actual/ projected slippage of 1-2 months | Review of stock conditions data is complete but has identified that there is a need to procure 7,000 surveys to improve data quality. Decision to procure is scheduled in the Forward Plan for 28/9/22 |

| Strategy | SD.A6.2 | HRA Business Plan developed | Director- Housing | Cabinet Member for Housing | | May-22 | Mar-23 | N/A | N/A | On Track- little or no slippage | Workshop held with Savills June 2022 to provide content for business plan and | On Track- little or no slippage | Financial modelling has been produced but needs further work to |
|---|--|---|---|---|-----|-------------------------------|-------------------------------|-----------------|--|---|--|--|--|
| development and refresh Strategy | | | | | ADs | | | | | | check assumptions in the draft plan | | build in rent and service charges increases for 2023/24 and beyond. |
| 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 per A6.2 | On Track- little or no slippage | Work with Savills is on track |
| 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 |
| 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 | The strategy was launched on 17 March 2022 attended by 180 organisations and agencies. | Complete | |
| 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 | Medium Progress- actual/ projected slippage of 1-2 months | The Corporate Parenting Board will confirm the strategic priorities ahead of the September Board meeting. | Medium Progress- actual/ projected slippage of 1-2 months | As June update |
| Strategy development and refresh | SD.A8.2 | Corporate Parenting Strategy approved | Director- Children & Education | Cabinet Member for Children and Education | | | 22-Sep | N/A | N/A | Medium Progress- actual/ projected slippage of 1-2 months | The Corporate Parenting Strategy will be approved by Board Members in September 2022. | Medium Progress- actual/ projected slippage of 1-2 months | As June update |
| | | | | | | | | | If the Council does not | | | | |
| Equality and Diversity | SD.B1.0 | Equality and Diversity | Director- Law & Governance | Leader of the Council | | Autumn 2021 | Ongoing | Medium Risk | comply with the Equality Act 2010 there is a risk of reputational damage. | N/A | N/A | N/A | N/A |
| | SD.B1.0 SD.B1.1 | Equality and Diversity Continue to embed Equality, Diversity and Inclusion (EDI) staff networks | | Leader of the Council | | | | Medium Risk | comply with the Eqaulity Act 2010 there is a risk of | N/A On Track- little or no slippage | Ongoing. No | N/A On Track- little or no slippage | N/A Ongoing. No issues arising |
| Diversity Equality and | | | Governance Director- Law & | | | 2021 | | | comply with the Eqaulity Act 2010 there is a risk of reputational damage. | On Track- little | Ongoing. No issues arising Progressing the | On Track- little or | |
| Diversity Equality and Diversity Equality and | SD.B1.1 | Continue to embed Equality, Diversity and Inclusion (EDI) staff networks | Governance Director- Law & Governance Director- Law & | Leader of the Council | | Ongoing Jun-22 | Ongoing | N/A | comply with the Eqaulity Act 2010 there is a risk of reputational damage. | On Track- little or no slippage | Ongoing. No issues arising Progressing the establishment of the two new networks Ongoing. No | On Track- little or no slippage On Track- little or no slippage On Track- little or | Ongoing. No issues arising Progressing the establishment |
| Equality and Diversity Equality and Diversity Equality and Diversity Equality and | SD.B1.1 SD.B1.2 | Continue to embed Equality, Diversity and Inclusion (EDI) staff networks Establish Women's network and Faith & Belief staff network | Governance Director- Law & Governance Director- Law & Governance Director- Law & | Leader of the Council | | Ongoing Jun-22 | Ongoing Dec-22 Ongoing | N/A N/A | comply with the Equility Act 2010 there is a risk of reputational damage. N/A N/A | On Track- little or no slippage On Track- little or no slippage On Track- little | Ongoing. No issues arising Progressing the establishment of the two new networks Ongoing. No | On Track- little or no slippage On Track- little or no slippage On Track- little or | Ongoing. No issues arising Progressing the establishment of the two new networks |
| Diversity Equality and Diversity | SD.B1.1 SD.B1.2 SD.B1.3 | Continue to embed Equality, Diversity and Inclusion (EDI) staff networks Establish Women's network and Faith & Belief staff network Continue to deliver on Equalities Commission Board priorities | Governance Director - Law & Director - Law & Director - Law & | Leader of the Council Leader of the Council Leader of the Council | | Ongoing Jun-22 Ongoing | Ongoing Dec-22 Ongoing | N/A N/A | comply with the Equility Att 2010 there is a risk of reputational damage. N/A N/A N/A | On Track- little or no slippage Medium Progress- actual/ projected slippage of 1-2 | Ongoing. No issues arising. Progressing the establishment of the two new networks. Ongoing. No issues arising. Equalities Policy has been reviewed. Draft being prepared for new Equalities Policy. Due to be considered by Executive and Equalities Commission ahead of consideration by Council in October. Change delivery date. | On Track- little or no slippage Medium Progress- actual/ projected | Ongoing. No issues arising Progressing the establishment of the two new networks Ongoing. No issues arising. Equalities Policy has been reviewed. Draft being prepared for new Equalities Policy be considered by Executive and Equalities Commission ahead of consideration by Council in October. Change control: change delivery date from |
| Diversity Equality and Diversity | SD.81.1 SD.81.2 SD.81.3 SD.81.3 | Continue to embed Equality, Diversity and Inclusion (EDI) staff networks Establish Women's network and Faith & Belief staff network Continue to deliver on Equalities Commission Board priorities Equality Policy reviewed | Governance Director- Law & Governance | Leader of the Council Leader of the Council Leader of the Council Leader of the Council | | Ongoing Jun-22 Ongoing May-22 | Ongoing Dec-22 Ongoing Jun-22 | N/A N/A N/A N/A | comply with the Equility Act 2010 there is a risk of reputational damage. N/A N/A N/A N/A | On Track-little or no slippage On Track-little or no slippage On Track-little or no slippage Medium Progress- actual/ projected slippage of 1-2 months Significant issues / actual/projected d slippage- more than 2 wisses / | Ongoing. No issues arising. Progressing the establishment of the two new networks. Ongoing. No issues arising. Equalities Policy has been reviewed. Draft being prepared for new Equalities Policy. Due to be considered by Executive and Equalities Commission ahead of consideration by Council in October. Change delivery date. | On Track- little or no slippage Medium Progressactual/ projected slippage of 1-2 months Significant issues / actual/projected | Ongoing. No issues arising Progressing the establishment of the two new networks Ongoing. No issues arising. Equalities Policy has been reviewed. Draft being prepared for new Equalities Policy be to be considered by Executive and Equalities Commission ahead of consideration by Council in October. Change Control: change delivery date from June to October. as above. Due to be presented to Council in October. Change Control: change delivery date from June to October. |

| Equality and | | | | | | Summer | | | | On Track- little | Initial | On Track- little or | |
|--------------------------------|----------|---|---|-------------------------------|---|----------------|-------------|-------------|---|--|--|--|--|
| Diversity | SD.B1.8 | Review approach to Equality Impact Assessments | Director- Law & Governance | Leader of the Council | | 2022 | Autumn 2022 | N/A | N/A | or no slippage | consideration has commenced. | no slippage | Initial consideration has commenced. |
| 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 | | Not due to start | | Not due to start |
| 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 | Work is underway and is on track. | On Track- little or no slippage | Work is underway and is on track. |
| 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 | Looking at initial training with Members in Autumn and with Officers. Further training will follow in the new year. |
| Locality Working | SD.C1.0 | Developing a model for locality working | Director- Housing | Cabinet Member for Housing | Director – Business Strategy and Change | Mar-22 | твс | Medium Risk | 4 | N/A | | N/A | |
| Locality Working | SD.C1.1 | Cabinet Workshop to provide steer on community hubs model | Director- Housing | Cabinet Member for Housin | 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 Housin | Director – Business ⁶ Strategy and Change | Summer 2022 | Summer 2022 | N/A | N/A | Significant issues / actual/projecte d slippage- more than 2 months | Recruitment Unsuccessful. KB0 is picking up a conversation with the leader about whether the pilot is shelved and the potential for town co-ordinator is incorporated into the wider proposal for Community Hubs | Significant issues / actual/projected slippage-more than 2 months | This proposal is on hold. |
| Locality Working | SD.C1.3 | Customer Access Strategy Development Commences | Director- Housing | Cabinet Member for Housin | Director – Business | Sep-22 | Sep-22 | N/A | N/A | | Not due to start | | Not due to start |
| Locality Working | SD.C1.4 | Business Cases for hub locations progressed, as appropriate | Director- Housing | Cabinet Member for Housin | Director – Business | Sep-22 | Spring 2023 | N/A | N/A | | Not due to start | | Not due to start |
| 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 | On track for September Cabinet | N/A | N/A | N/A | N/A |
| MTFP & Capital Strategy | SD.D1.1 | Review concluded | Director- Finance | Deputy Leader | | | Jul-22 | N/A | N/A | On Track- little or no slippage | Change to September per headline action | On Track- little or no slippage | On track for September Cabinet |
| MTFP & Capital Strategy | SD.D1.2 | Approval of MTFP and Capital Strategy | Director- Finance | Deputy Leader | | | Autumn 2022 | N/A | N/A | On Track- little or no slippage | On track for September Cabinet SH 30/06 | On Track- little or no slippage | As above. |
| 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 | On track | 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 | On Track- little or no slippage | Completed | 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 | RJ 06.07.22 Survey for budget consultation due to launch in July | On Track- little or no slippage | Budget consulation launched. |
| 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 | RJ 06.07.22 Survey for budget consultation due to launch in July | On Track- little or no slippage | Feedback from survey due 16/09/2022 |
| 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 | | Not due to start | - | Launched in July. |
| | | | Director - Business | | | Autumn | | | N/A | | | | |
| Consultation and Engagement | SD.E2.2 | First report from Resident's Survey | Strategy and Change | Leader of the Council | | 2022 | Autumn 2022 | N/A | N/A | | Not due to start | | Not due to start |

Theme 4 - Decision Making

| Doc type | Monitoring Document |
|------------|--------------------------------------|
| | Sandwell Council Improvement Plan |
| Start date | Jul-22 |
| Owner | Leadership Team |



| | | | | | | | | | | | | | | July Update |
|---|---------|--|---------------------------------------|-----------------------|----------------|---|------------|----------|---------------------|---|--|---|------------------------------------|--|
| | | Static data | | Owners | | | Date | rs . | , | Main Action Risk | Progress against plan | Evidence of status rating | Progress against plan | Evidence of status rating |
| Workstream | Ref | Action | Director Lead | | Other Leads | Update Owner (if different) | Start date | Due date | Main Action Risk | Description | Status (June 2022) | Update (June 2022) | Status (July 2022) | Update (Initial and Date) (July 2022) |
| 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 | On Track- little or no slippage | Report prepared for Council 26th July to seek agreement to commence consultation. | Complete | |
| 4 Yearly Election Cycle | DM.A1.2 | Council Decision to implement | Director- Law & Governance | Leader of the Council | | | | твс | N/A | N/A | On Track- little or no slippage | Planning on October Council decision (subject to 26th July Council agreement to consult) | On Track- little or no slippage | Report to Council 26/07/22 to approve consultation. Further final decision report due October |
| 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 | | | On Track-little or no slippage | Incorporated within Member Development Programme and Management Development Programme and progress rating reflected within that action(see also updates to OC.82.1 and OC.D2.2 within Organisational Culture Themp! As individual constitutional changes are approved, training will be rolled out to follow. First approvals due at July Council. |
| 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 | On Track- little or no slippage | Preparing to take a report to Council in July, dependent on Member agreement to approach and engagement undertaken. Contingency to schedule a extraordinary Council meeting mid Aug if additional consultation with Members required | On Track- little or no slippage | Council agreed to consider changes on 26th July. |
| Constitution and Governance Framework | DM.B1.3 | Revised Financial Regs agreed | Director- Law & Governance | Leader of the Council | | | | Jul-22 | N/A | N/A | | Preparing to take a report to Council in July, dependent on Member agreement to approach and engagement undertaken. Contingency to schedule a extraordinary Council meeting mid Augif additional consultation with Members required | actual/projected slippage- more | Fin Regs are being reviewed. Key change required was in relation to thresholds for decisions and this component was approved by Council in July. Further amendments will be presented to Council by October. Change Control: |
| Constitution and Governance Framework | DM.B1.4 | Revised Council Procedure Rules | Director- Law & Governance | Leader of the Council | | | | Jul-22 | N/A | N/A | Medium Progress- actual/ projected slippage of 1-2 months | Preparing to take a report to Council in October following approval to approach from Governance and Constitution Member Working Group. Date to be amended through change control. 8.127.06.22: Protocol being | no slippage | Approved by Council in July— Note from PMO 01/09/22: An error was made in the July entry to incorrectly state that Council Procedure Rules were approved at Council in July. They are scheduled for October Council. Error is logged and August's monthly report will reflect correct commentary. |
| 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 | On Track- little or no slippage | prepared for Council approval in July alongside Financial Regulations | On Track- little or no slippage | Approved at July 2022 Council. Action is Complete now. |

| 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 | | Preparing to take a report to Council in October following approval to approach from Governance and Constitution Member Working Group. | On Track- little or no slippage | Preparing to take a report to Council in October following approval to approach from Governance and Constitution Member Working Group. |
|---|----------|--|-------------------------------|-----------------------|--|---|------------|--------|-------------|--|------------------------------------|---|--|--|
| 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 discahrging legal obligations. | N/A | N/A | N/A | N/A |
| 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 | d slippage- | Review has been completed and will be circulated to Leadership Team in July. SCT is the only identified arms-length company. | 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 | On Track- little or no slippage | Review has been completed and will be circulated to Leadership Team in July. SCT is the only identified arms-length company. | Complete | Report has been circulated to Leadership Team |
| Constitution and Governance Framework | DM.B2.3 | Implement annual reporting arrangements | Director- Law & Governance | Deputy Leader | | | | Jul-22 | N/A | N/A | On Track- little or no slippage | In place for SCT. Briefing note to Leadership Team will include guidance and lessons learnt in the event of future | 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.C.1.0 | Review of scrutiny arrangements | Director- Law & Governance | Leader of the Council | | | | Oct-22 | N/A | N/A | On Track- little or no slippage | Work is ongoing with new Chair of Scrutiny. Agreement to next steps of review. Anticipate completion of review by October and implementation as part of continuous improvement. | On Track- little or no slippage | As per June update. No issues arising. Clir Moore presented Scring. Clir Moore presented Scring Report at Council on 25/07 and provided Members with an update on changes taking place this Municipal Year. Review due to complete in October and implementation as part of continuous improvement |
| 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 | On Track- little or no slippage | Events took place in June. All scrutiny boards have an agreed work programme and boards are in the process of delivering their work plans. | 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 | | | | Jul-22 | N/A | N/A | On Track- little or no slippage | Review due to complete in October. Actions will be implemented subsequently. Date to be altered via change control. | Medium Progress- actual/ projected slippage of 1-2 months | Review due to complete in October. Actions will be implemented subsequently. Date to be altered via change control (error in plan). |
| 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 |
| 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 | Procurement-related recommendations on track in line with award of contract from 1st September. (see also update in Procurement & Commercial) |
| Role and Function of Scrutiny and Audit | DM.C2.2 | Recommendations relating to Waste Contract concluded | Director- Borough Economy | Deputy Leader | Director- Law and Governan ce | | | Dec-22 | N/A | N/A | | AD 27.06.22 recommendations in progress. Some slippage on provision of key annual plans from Serco has been experienced. | On Track- little or no slippage | Annual plans now provided & review of contract started |

| Role and Function of Scrutiny and Audit | DW.C.3.0 | Manage position on historic issues through work with ARAC chair | Director- Law & Governance | Deputy Leader | | Dec-21 | Ongoing | Low Risk | to check risk description wi | | Work is ongoing with new Chair of ARAC. Regular meetings in place to discuss work programme and issues arising. Historic Issues have not featured. Follow up action required from the Executive relating to historic issues which is being progressed. | | As per June update. No issues arising. |
|---|----------|---|-------------------------------|---------------|--|--------|---------|-------------|--|-----|--|--|--|
| Role and Function of Scrutiny and Audit | DW.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 | DW.C4.1 | Completion of report and recommendations | Director- Law & Governance | Deputy Leader | | | Oct-22 | N/A | N/A | | | Medium Progress- actual/ projected slippage of 1-2 months | Rated is Amber moving to Green. A new procurement exercise has been undertaken following a specific criteria. A new framework has been developed - of 18 operators - 9 were successful and invited to bid for 13 contracts. 4 operators handed 5 contracts back citing capacity issues and were either re-offered or a mini competition has been undertaken. All contracts have now been offered and accepted. Lessons learnt regarding procurement exercises to take place. |

Theme 5- Procurement & Commercial





| | | | | | | | | July t | Jpdate | | | | | |
|----------------|---------|---|-------------------------------|--|-------------|-----------------|-----------------|----------|------------------|--|------------------------------------|---|------------------------------------|--|
| | | Static data | | Owners | | | Da | ates | Mai | n Action Risk | Progress against plan | Evidence of status rating | Progress against plan | Evidence of status rating |
| Workstream | Ref | Action | Director Lead | Cabinet Member | Other Leads | Update Owner (i | f Start date | Due date | Main Action Risk | Description | Status (June 2022) | Update (June 2022) | Status (July 2022) | Update (Initial and Date) (July 2022) |
| Waste Contract | PC.A1.0 | Introduction of a more focused framework for contract monitoring | | 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 | N/A | N/A | N/A | N/A |
| Waste Contract | PC.A1.1 | Contract Monitoring Framework agreed | Director - Borough Economy | Cabinet Member for Environment Services | | | | Complete | N/A | N/A | 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 | Q1 report provided in draft aligned to key contractual requirements | Complete | |
| 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 | Medium Risk | Service capacity to procure and manage contract review. Mitigated by appointment of interim waste manager from 11th | 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 | Awaiting contract document finalisation | 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 | Friths ready to start w/c 11/07/22 | On Track- little or no slippage | Friths start up meeting for contract review completed. Document request in progress. |
| 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 | i g |
| 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 | |
| Waste Contract | PC.A2.5 | Delivery of recommendations – as appropriate | Director - Borough Economy | Cabinet Member for Environment Services | | | | ТВС | N/A | N/A | 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 | |
|----------------|----------|---|-------------------------------|--|------------------------------------|-------------|----------|----------|---|------------------------------------|--|------------------------------------|---|
| Waste Contract | PC.A4.0 | Street Cleansing Recovery Plan – completion and implementation | Director - Borough Economy | Cabinet Member for Environment Services | | Autumn 2021 | Mar-23 | | | N/A | N/A | N/A | N/A |
| Waste Contract | PC.A4.1 | Recovery Plan approved by Waste Management Board | Director - Borough Economy | Cabinet Member for Environment Services | | | Waste | N/A | N/A | On Track- little or no slippage | Plan in draft & on agenda for July 14 meeting | On Track- little or no slippage | Date for implementation 1 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 | |
| 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 | | | N/A | N/A | N/A | N/A |
| 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 | Plan in delivery phase with dates into 2023 |
| 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 | 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 | This will be published at the beginning of the Framework, | 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 | On Track- little or no slippage | The current contract expires at the end of the summer term (23 July 2022) | Complete | Contacts awarded 26th July. Further mini- competition to be run for one lot due to supplier declining the |
| | PC.B1.5 | | Director- Finance | Dept Leader / Cabinet Member for Children and | Director – Children & Education | | Sep-22 | N/A | N/A | On Track- little or | We are currently on schedule for the new contract to commence 1 September 2022 | On Track- little or no slippage | As above |
| SEND Transport | T C.D1.5 | | | Education | a Eddedion | | | | | | | позпрраве | |

| 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 | The project board will continue to meet and the service has built in | On Track- little or no slippage | as above |
|---------------------------|---------|---|---|--|--|-------------|----------|-------------|---|------------------------------------|--|---|---|
| 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 | Complete | cess concluded, of | 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 |
| 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 recommendation s 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 September |
| SEND Transport | PC.B2.4 | ARAC recommendations implemented | Director- Law & Governance | DeptLeader / Cabinet Member for Children and Education | Director – Children & Education ARAC | | Oct-22 | N/A | N/A | | | Medium Progress actual/ projected slippage of 1-2 months | RAG rating is Amber but moving towards a Green. Of the 18 operators who applied to join the Framework, 9 were successful of an operators a lot of the successful of a contracts across 3 lots Despite being successful 4 operators handed 5 contracts back colling capacity as an issue and were either re-offered or a further mini competition has been undertaken, All contracts have now been offered and accepted. Next Steps: to capture lessons learner for future procurement exercises |
| 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 | |

| New System Procurement New System Procurement | PC.C1.1 | Options Appraisal Business Case and Implementation Plan Considered | Director- Business Strategy & Change Director- Business Strategy & Change | Deputy Leader Deputy Leader | Strategic Lead - Service Improvement Strategic Lead - Service Improvement | | Sep-22 TBC based on selected option | N/A N/A | N/A N/A | On Track- little or no slippage | NC 1/7/22 - initial market testing underway and systems demonstrations arranged | On Track- little or no slippage | NC 19/7/2022 - no further update |
|--|---------|---|--|--|--|-------------|-------------------------------------|-------------|---|---|---|---|--|
| 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 and 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 |
| New System Procurement | PC.C2.3 | Implementation | Director – Regeneration & Growth | Cabinet Member for Regeneration and Growth | | | Dec-22 | N/A | N/A | Medium Progress actual/ projected slippage of 1-2 months | 04/07/22 CH:On track for December but the programme is tight and the risk of slippage is significant. | Medium Progress actual/ projected slippage of 1-2 months | On track for December but the programme is tight and the risk of slippage is significant. |
| 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 | On Track- little or no slippage | In Progress - Terms for ED process nearly finalised between legal advisers | Medium Progress actual/ projected slippage of 1-2 months | Some slippage due to legal representatives of both sides taking longer than expected to agree terms for the ED. |
| 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 | On Track- little or no slippage | Yes; seperate submissions to the ED process will also set out the respective | On Track- little or no slippage | Responsibilities of each party are clearly set out |

| Leisure Contract | PC.E1.0 | | 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 | NI/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 | | | | N/A | | On Track- little or no slippage | AD 23.06.22: Action no longer required. SLT agreed to continue delivery to May 2023. | N/A | AD 23.06.22: Action no longer required. SLT agreed to continue delivery to May 2023. |
| Leisure Contract | PC.E1.4 | Option appraisal for future facility management options—Cabinet report | Director - Borough Economy | Cabinet Member for Leisure and Tourism | | | Summer 2022 | N/A | | On Track- little or no slippage | Decision made by Cabinet 22.06.22 to transfer services to LATC for the | On Track- little or no slippage | LATC decision in implementation phase |
| Leisure Contract | PC.E1.5 | Arrangement in place for future delivery of leisure facilities | Director - Borough Economy | Cabinet Member for Leisure and Tourism | | | May-23 | N/A | | On Track- little or no slippage | The decision to transfer to a LATC is planned to be implemented | On Track- little or no slippage | LATC transition in progress |
| | | | | | | | | | | | | | |

Improvement Plan Theme Progress Summary July 2022

| Page | Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug |
|------|------------------------|---|--|--|
| 131 | Organisational Culture | Progress is being made across all workstreams. Of the 16 main action areas, there are: • zero main actions with a red risk rating, • 7 main actions with an amber risk rating, • 8 main actions with a green risk rating. • 1 main action has not yet been risk rated (A clear and joint message from Chief Executive and Leader regarding Officer and Elected Member relationship delivered) Of the 7 actions with an amber risk rating: • All live sub-actions to deliver the action are on track • 2 sub-actions are not yet due to commence • 2 sub-actions have been completed this month | July: Dates for Member-Officer relationship sessions confirmed with LGA Star Chamber sessions arranged CEx recruitment search consultancy engaged June: | Budget Holder Role Profile agreed. Achieved New Member Induction Completed Employee Engagement Results. Achieved Meeting structures to support Senior Leadership (Officer and Member) confirmed. Due to be achieved within quarter Part 1 Engagement – starting the conversation Commenced Scope of Corporate Governance Training approved Commenced Corporate Governance Training – procurement of delivery partner Discussions ongoing with LGA around support |

| Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug |
|----------|--|--|---|
| Page 132 | Consultancy engaged. Champion recruitment underway Listening groups will commence late August Officer Learning and Development Management Development Programme is being Governance Training (which will follow the spen Officer-Member relationship in September (with Programme and revision to the Corporate Industrategy and Plan. Officer and Member Relationship Regular meetings between Cabinet and Leader Once Conservative Group whip identified, regular Member Relationship Sessions focusing on Officer-Member relation Approach around the cultural element of Ward Member Learning and Development Member Learning and Development Member Development Programme in place are positive feedback. Discussions taking place with LGA around asset Training in relation to employment of Chief Officernal Communications Regular internal communications being delive | ecific approvals at Council (July, On the Support from the LGA). A broade uction will be rolled out in 2023 followership Team in place for Municipal ular meetings will be scheduled with ship with LGA will take place in Sed and Casework management need and will be regularly reviewed. Membristance with delivery ficers planned for August | an initial suite of Corporate ct and Dec) and a focus on the er Management Development owing the approval of the OD Year ch Commissioners, MO, S151 and ptember discussion |

| Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug |
|---------------------|--|--|--|
| Page 133 | Employee Engagement Survey results shared at all Directorate Management Teal identifying actions to embed in improvement plan Initial Council-wide response and actions to EES findings Recruitment of Chief Executive Search consultancy support engaged. Chief Officer Terms and Conditions Committee scheduled 2 | s due for discussion by L | eadership Team on 30/08 |
| Corporate Oversight | Summary Statement: Progress is being made across all workstreams with some slippage of 1-3 months. There are: 1 main action with a red risk rating, 3 main actions with an amber risk rating 6 actions with a green risk rating. 1 main action has not yet been risk rated (Restructuring) and requires a discussion to confirm leadership of actions. Of the 1 action with a red risk rating, 1 sub-action is on track with little or no slippage: Performance Management Framework - Preparations are underway and on track for Q1 report on the Performance Management Framework to Cabinet in September. Of the 3 main actions with an amber risk rating: 1 has sub-actions that have or will experience medium slippage or issues. These actions relate to: | July: Business process reengineering resources have been approved. June: Improvement Plan approved. Commissioners report complete. | Establish Performance Management Framework Achieved – Achieved Improvement Plan approved – Achieved Q1 report on PMF to Cabinet in September 22. Directorate level restructuring - Decision required from Leadership regarding ownership of action. August 22 |

| Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug |
|----------|--|--------------------------------------|--|
| Page 134 | Oracle Fusion Procurement of the new Oracle Fusion provider evaluation period being extended by 3 weeks, due to the need for further financial evaluation, clarification needed from bidders. Due to the evaluation period extension, there is slippage on the support provider being in place and delivery. Actions with a green risk rating have areas of medium progress. These relate to: Reduction of Financial Transactional Activity CIPFA review is complete, however, recommendation will require further work on the review of internal charges. Corporate Debt Recovery Due to slippage in relation to Revs and Bens focussing on Energy Rebate and Household Support Fund Schemes, there is a delay on the corporate debt recovery process. Due date to be changed to October 2022. | | |
| | Corporate Oversight Workstream Updates | | |
| | ERP Further project management training to be arranged. The evaluation period has been extended by 3 weeks dunew support provider to deliver Oracle Fusions. Progress | | |
| | Improvement Planning, Monitoring and Learning | | |

| Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug |
|------------------------|--|---|---|
| | Council approved Improvement Plan Commissioners report prepared and submitted to Secretary Awaiting formal response from DLUHC. Delay to letter to (ahead of December submission to SoS). Performance Management Council approved the Performance Management frame Q1 reporting preparations are underway and on track, remotive Monthly Budget monitoring is taking place and on track Monthly Budget monitoring is taking place and on track Organisational Structure and Enabling Corporate Core Financial services sections restructure approved and im Budget holder roles completed and launched, process of the Work underway to provide capacity for process reviews restructure implementation, process is on track. Directorate level restructuring is progressing and on track Request that Director of Business Strategy and Change principles put forward by the Head of HR. To be approved Review of internal charges - CIPFA initial review complifurther work. Rated amber – due to slippage. Review of corporate debt has experience slippage due and household support fund schemes, due to change in | will impact on our timescan work (PMF) eport to be made to Cabi applemented and is now of track to reduce financial trans ck, however, requires december on the action and also red by Leadership Team ete, however, recommento revenues and benefits | ale to respond to additional actions and in September 22. In track. actional activity, will follow signated ownership and oversight. embed the organisational design 4.8.22 dations arising from this will need SM focussing on Energy rebate |
| Strategic Direction | Summary Statement: Progress is being made across workstreams with some slippage of 1-3 months in medium risk areas Of the 13 main action areas, there are: • zero actions with a red risk rating, | July: | Review of Medium Term Financial Plan Complete – on track for Sep Cabinet Corporate Procurement Strategy approved – Complete- approved at July Council |

| Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug |
|----------|--|--------------------------------------|---|
| Page 136 | 6 actions with an amber risk rating, 7 actions with a green risk rating. 8 live sub-actions to deliver the action are on track 7 sub-actions are not yet due to commence 0 sub-action have been completed this month 2 have sub-actions that have or will experience significant slippage or issues. These actions relate to: Equality and Diversity Equality Policy approved Developing a model for locality working Pilot of Town Co-ordinator role commences 4 have sub-actions that have or will experience medium slippage or issues. These actions relate to: Corporate Asset Management Strategy Development Confirmation of funding for remaining Workplace Vision components Implementation of new Asset Database Maximising Value out of surplus assets portfolio – Cabinet report Options for hub locations identified Develop and Implement the Commercial Strategy Commercial Strategy Approved Business Cases Presented for commercial workstreams Refresh Corporate Parenting Strategy | Budget Consultation Launched | Commercial Strategy approved – likely to need further iteration before approval Regular Resident Survey in place – budget consultation launched in July Equalities policy approved – slippage. Being prepared for October approval |

| | Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug |
|------|-------|--|--------------------------------------|--|
| ਨ੍ਹ | | Re-focusing of strategic priorities | | _ |
| Page | | Corporate Parenting Strategy approved | | |
| Ф | | Equality and Diversity | | |
| 137 | | ■ Equality Policy reviewed | | |
| | | Strategic Direction Workstream Updates | | |
| | | Strategy Development and Refresh | | |
| | | Regen Strategy and Pipeline: Monitoring of pipeline | projects is on track and firs | st update will be available during |
| | | November. | | ar ap accoming |
| | | Software procurement not taken place yet. Interviews | and recruitment to key Pro | ject Manager positions have taken |
| | | place but not in place yet. | Cabinat approval in Captor | nhar Funding for remaining |
| | | Corporate Asset Management Strategy: Target for 0 Workplace Vision components not approved, awaiting | | inber. Funding for remaining |
| | | Hub locations were due to be discussed with Cabinet i | | g Model (town-co-ordinator role) is |
| | | currently on hold. PMO query whether issues with tow | | |
| | | Asset Management Strategy ability to complete in Sep | | |
| | | Implementation of new asset database is on track; how has been delayed but it scheduled for Cabinet in September 1. | | gnilicant. Surpius assets portiolio |
| | | Procurement and Contract Procedure Rules review | | at July Council. CPR's training to |
| | | now be prepared and planned | ' '' | 3 |
| | | Commercial Strategy: Work ongoing with Commercial | | |
| | | training with C CO and approval by LT. 5 potential wor | kstreams are within the dr | aft. LATC (in relation to leisure |
| | | provision) will be added to the draft workstreams.Corporate Parenting: Strategic priorities to be confirm | nod by Corporato Parantin | a Roard shood of Sontombor |
| | | Board. Corporate parenting strategy due to be approve | • | • |

| | Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug |
|----------|--------------------|--|--|--|
| Page 138 | | HRA Business Plan: On track. Review of compliance are condition surveys will be procured. Workshop has been held and check assumptions in the draft plan. Equality and Diversity Equality, Diversity and Inclusion staff networks ongoing. Equalities Commission Board to continue delivering prior October – slippage from initial target of June. Work is underway on the Equality, Diversity and Inclusion Locality Working Pilot of Town Co-ordinator role recruitment was unsuccess Medium Term Financial Plan & Capital Strategy The Approval of MTFP and Capital Strategy is on track for Consultation and Engagement Survey for budget consultation launched in July. | neld with Savills on June and the strategy. Strategy. Ssful. This proposal is on | regarding the HRA Business e to be considered by Council in |
| | Decision Making | Summary Statement: Progress is being made across all workstreams with significant progress made this month through Council's approval of first wave of changes to Corporate Governance Documents, and agreement to consult on 4-yearly election cycle. There are zero main actions with a red risk rating, 5 main actions with an amber risk rating, and 2 actions with a green risk rating. | July: Council approval to start of consultation on 4-yearly election cycle Council approval of key Corporate Governance Documents: | Scrutiny work Planning event Complete Options paper to Leadership Team for 4 yearly election cycle – Complete Revised PCR, Sale of Land and Buildings Protocol – approved July Council Procedure Rules – Due in October |

| Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug |
|----------|---|---|---|
| Page 139 | Of the 5 main actions with an amber risk rating: • 9 live sub-actions to deliver the action are on track • 0 sub-actions are not yet due to commence • 2 sub-actions have been completed this month • 1 sub-action has or will experience significant slippage or issues • 1 sub-action has or will experience medium slippage or issues The sub-action that have or will experience significant slippage or issues. This action relates to: • In-depth review and revision to Corporate Governance Documents • Revised Financial Regulations The sub-action that have or will experience medium slippage or issues relates to: • Refresh decision making-arrangements including the role of Scrutiny • Approval of any changes to scrutiny (if required following review). A date change is proposed through change control due to an error in the due date recorded. • Completion of ARAC recommendations in relation to SEND Transport | Sale of Land and Buildings Procurement and Contract Procedure Rules Thresholds for Decisions June: Review of Arms Length Companies complete | - Revised Scheme of Delegation – slippage to October - Revised Financial Regs – slippage to October |
| | Decision Making Workstream Summary | • | |
| | 4 Yearly Election Cycle Council approved commencement of consultation on 26 | th July | |

| Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug |
|--------------------------|--|--|--|
| Page 140 | Further final decision report due at Council in October. Constitution and Governance Framework Council on 26th July approved revised procurement and protocol, thresholds for decisions. Financial regs are being reviewed. Priority for change was approved by Council in July. Further amends to Fin Reg Revised scheme of delegation being prepared for Council Role and function of Scrutiny and Audit Review of scrutiny arrangements are ongoing and comp Scrutiny work plans have been agreed and workplans as Implementation of recommendations regarding the waster relating to Serco annual plans was experienced but now No issues arising relating to historic issues | contract procedure rules, as in relation to threshold will be presented to Cou cil in October letion due October. Te in the process of being the contract and SEND trans | s for decisions which were ncil by October delivered. |
| Procurement & Commercial | Summary Statement: Progress is being made across all workstreams with some slippage of 1-3 months. There are zero actions with a red risk rating, 5 actions with an amber risk rating, and 4 actions with a green risk rating. Of the 5 actions with an amber risk rating: 2 sub-actions have or will experience medium slippage or issues. These actions relate to: Lion Farm Options Agreement – some slippage due to legal representatives of both sides taking | July: SEND contract awarded June: Contract Management Framework is in place for the Waste Contract Cabinet decision on future delivery | Waste and Recycling Recovery Plan Implementation Complete. Achieved Street Cleansing Recovery Plan approval. On track Option appraisal for future leisure management options. Achieved SERCO contract performance reporting embedded in PMF. On track |

| | Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug | |
|----------|-------|--|--|---|--|
| Page 141 | | longer than expected to agree terms for the Expert Determination process. Completion of ARAC recommendations in relation to SEND Transport All other sub-actions are on track or completed | of leisure services | Implementation of asset management system. On track but risk of slippage is high. Implementation of approved way forward on Lion Farm slippage | |
| | | Procurement and Commercial Workstream Summary | | | |
| | | alongside Q1 PMF report to Cabinet. Procurement for support to review the contract now composite of the contract of the contract now composite of the contract now contract now | stract Monitoring framework progressing well with an agreed framework in place. Performance was agreed Q1 PMF report to Cabinet. Curement for support to review the contract now completed and document request in progress. Let Cleansing Recovery Plan due for implementation October 22. Let replacement programme is in delivery phase with dates into 2023. | | |
| | | SEND Transport: On schedule for new contract to commence on 1 September Contract awarded however, Mini competition to be run for one lot due to supplier. Updates and recommendations have been provided to scrutiny and audit. On track to conclude procurement related recommendations in line with new contract from September 22. Update required on ARAC recommendations. Review SEND action tracker to Children and Education Scrutiny Board at each meeting – due September 22. Procurement recommendations for new contract due in September 22. | | | |

| Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug |
|------------------------------|--|--|--|
| Page 142 | New System Procurement: Initial market testing for Performance Management S Asset Management System is procured and is being Risk rating amber. Lion Farm: Action plan being implemented, however, there has be taking longer than expected. Terms for Expert Determination process is delayed determination. | implemented. Programme i | s tight and risk of slippage is high. |
| | Leisure Contract: • Decision made by Cabinet to transfer services to LAT • Implementation phase has commenced. • Action no longer required, for step in provider. SLT hat • LATC transition in progress for future delivery of leisure. | ave agreed to continue deli | |
| Partnerships & Relationships | Summary Statement: Progress is being made across workstreams with some slippage of 1-2 months Of the 6 main action areas, there are: • zero actions with a red risk rating, • 4 actions with an amber risk rating, • 1 action with a green risk rating. • 1 action has not yet been rated (Relationship with Voluntary & Community Sector (VCS) and Funding to Voluntary & Community Sector.) | July: o Attendance at WMCA, ABCA, and BCLEP meetings much improved since May and engagement with agenda issues has improved. June: • Member | Member representation to key regional and sub- |

| Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug |
|----------|--|---|--|
| Page 143 | Of the 4 actions with an amber risk rating: 5 live sub-actions to deliver the action are on track 0 sub-actions are not yet due to commence 0 sub-action have been completed this month zero have sub-actions that have or will experience significant slippage or issues. 4 have sub-actions that have or will experience medium slippage or issues. These actions relate to: 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 Revised KPI suite agreed Review of Contract concludes Contract Review with DfE Review partnership structures within the 'People's sphere' Initial scoping of work with partners around partnership structures in the children's sphere Develop Health & Wellbeing Strategy that builds on existing whole system approach to addressing health inequalities Test adequacy of partnerships and integration through Health Outcomes | key regional and sub-regional meetings agreed Ofsted judgment and specific comments around the improved governance and effective relationships between Council and Trust | Health and wellbeing board in September |

| | Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug |
|----------|-------|---|--|--|
| Page 144 | | Framework and system-wide thematic deep dives Of the main action that has not yet been rated, 1 subaction has or will experience medium slippage or issues. This relates to: Relationship with Voluntary & Community Sector (VCS) and Funding to Voluntary & Community Sector Corporate Review of Grant Funding | | |
| | | Partnerships and Relationships Workstream Summary Sandwell Children's Trust SMBC have drafted KPIs (Key Performance indicators) vincluded in the revised contract. Review of contracts to be concluded in Autumn to taking has happened, that we don't want to evoke the break claschedule. Monthly four-way meetings diarised throughout the year. Ofsted Judgement 'require improvement to be good' with effective relationships between Council and Trust. Regional and Sub Regional Presence A number of actions complete Attendance at and engagement within agenda issues at the structures. | into account the ability to use and to align with DfE a comments around the im | be more flexible (now Ofsted (Department for Education) approved governance and |
| | | Effective Local Structures | | |

| • | Theme | Summary | Achievements this period (June-July) | Milestones due (rolling 3 months) June – Aug |
|----------|-------|--|--|---|
| Page 145 | | Project manager to be appointed to the partnership restriction has been advertised. Partnership discussions taking place for scoping of work sphere. Joint approach between HWBB and SHCP (Sandwell He) HWB Draft Strategy in draft form and will be present to the Substance Misuse deep dive presented to SHCP board and strategy in the substance of the Substance Misuse deep dive presented to SHCP board and substance Misuse deep dive presented to SHCP board and substance of the subst | with partners around part ealth & Care Partnership). ne next Health and wellbe | nership structures in children's ing board in September |
| | | VCS (Voluntary and Community Sector) Relationship Reviews of some grants are underway and draft proposa prepared. Decision needed on how 2023/24 savings will be made | als for reform of grants and | d efficiency savings have been |

Theme Status Key

Green Theme: High and Medium Risk areas are on track. Green risk areas have a small number of sub-actions with amber/red progress. Amber Theme: High and Medium risk areas have some medium delivery issues and/ or green risk areas have medium/high delivery issues. Red Theme: High and Medium Risk areas have a number of medium/significant delivery issues and/or green risk areas have a number of significant delivery issues.

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Appendix 3 – Statutory Recommendation Status Summary July 2022

| Page | Statutory Recommendation | Summary | Achievements this month | Milestones due this quarter (June – Aug) |
|------|---|--|---|--|
| _ | 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 | Organisational Culture No actions in this theme Corporate Oversight ERP Initial cohort trained in project management, further training to be arranged if required. Tender evaluation period extended by 3 weeks due to need for financial evaluation clarifications from bidders. | Street Cleansing Recovery Plan considered by Waste Management Board Serco Annual Plan received | Waste and Recycling Recovery Plan Implementation Complete - Achieved Street Cleansing Recovery Plan approval - On track |
| | report (including SLT, SCT, the waste service, the ERP system, and Lion Farm) and | Strategic Direction Strategy Development and Refresh Regen Strategy and Pipeline: Monitoring of pipeline projects is on track and first update will be available during November. Slippage on procurement of programme | | Option appraisal for future leisure management options - Achieved |
| | prioritise corporate effort in managing the issues identified and embed the solutions into the Council | management software. Corporate Parenting: Strategic priorities to be confirmed by Corporate Parenting Board ahead of September Board. Corporate parenting strategy due to be approved in September 22 by Board Members Decision Making | | SERCO contract performance reporting embedded in Performance Management Framework - On track |
| | | Role and function of Scrutiny and Audit | | |
| | | Review of scrutiny arrangements are ongoing and completion due October. | | Scrutiny work Planning event - Complete |

| Statutory Recommendation | Summary | Achievements this month | Milestones due this quarter (June – Aug) |
|-----------------------------|---|-------------------------|---|
| Page 148 | Scrutiny work plans have been agreed and workplans are in the process of being delivered. Implementation of recommendations regarding the waste contract and SEND transport is in progress. Slippage relating to Serco annual plans was experienced, but annual plan has now been received. Procurement & Commercial Waste Contract: Contract Monitoring framework progressing well with an agreed framework in place. Performance will be reported alongside Q1 PMF report to Cabinet. Work commenced on review of the contract. Street Cleansing Recovery Plan due considered by Waste Management Board and date for implementation – 1st October. Delayed fleet replacement programme is being delivered SEND Transport: On schedule for new contract to commence on 1 September New System Procurement: Initial market testing for Performance Management | | quarter (ourse 744g) |
| | System and demonstration underway Asset Management System is procured and is being implemented Lion Farm: | | |

| Statutory Recommendation | Summary | Achievements this month | Milestones due this quarter (June – Aug) |
|---|--|---|---|
| Page 149 | Action plan being implemented. Some slippage due to legal representatives on both sides taking longer than expected. Responsibilities for council and developer are clearly set out. Leisure Contract: | | |
| | Decision made by Cabinet to transfer services to Local Authority Trading Company (LATC) Implementation phase has commenced | | |
| | Partnerships & Relationships Sandwell Children's Trust SMBC have drafted Key Performance Indicators (KPIs) which are being reviewed by the Trust to include in new Contract Review of contracts to be concluded in line with Department for Education schedule (Autumn) Monthly four-way meetings diarised throughout the year. | | |
| S2 - The Council must ensure that the learning in relation to commercial decisions, procurement and contract management | Organisational Culture Officer Learning and Development A consolidated approach to fundamental training for Managers on Corporate Governance matters including finance and procurement is being developed for delivery Autumn onwards. Member Learning and Development New Member Induction Complete | Approval of: • Sale of Land and Buildings Protocol o Procurement and Contract Procedure Rules o Thresholds for Decisions | Budget Holder Role Profile agreed - Achieved Establish Performance Management Framework - Achieved |

| Statutory Recommendation | Summary | Achievements this month | Milestones due this quarter (June – Aug) |
|--|--|-------------------------|--|
| highlighted in this report are understood through the organisation | Member Development Programme approved by Ethical Standards and Member Development Committee Corporate Oversight Performance Management Council approved the Performance Management framework Q1 reporting preparations are underway and on track for Cabinet in September Monthly Budget monitoring is taking place Strategic Direction | | Corporate Procurement Strategy approved – Achieved Commercial Strategy approved – likely to need further iteration before approval Regular Resident Survey in place – budget consultation due launched |
| | Corporate Asset Management Strategy: Target for Cabinet approval in September including surplus assets list. Funding for remaining Workplace Vision components not yet agreed. Implementation of new asset database is on track; however, risk of slippage is significant. Surplus assets portfolio is taking time, however, Cabinet approval to be obtained in the Autumn to commence a detailed review. Procurement and Contract Procedure Rules approved in July Commercial Strategy: Work ongoing with Commercial Strategy, however, may be delayed due to further iteration before approval. One business stream has been developed, however, others to be revisited. | | Revised PCR, and Sale of Land and Buildings Protocol – approved Financial Regs – due for Council approval in December Revised Scheme of Delegation – due for |

| Statutory Recommendation | Summary | Achievements this month | Milestones due this quarter (June – Aug) |
|--|--|---|--|
| Page 157 | HRA Business Plan: On track. Review of compliance and stock data has been completed; however, stock condition surveys are being procured. | | Council approval in October |
| | Decision Making Constitution and Governance Framework Approval in July to revised procurement and contract procedure rules, thresholds for decisions, sale of land and buildings protocol, Report to Council in October on Scheme of Delegation, Financial Regulations and Council Procedure Rules Procurement & Commercial New System Procurement: Asset Management System is procured and is being implemented | | |
| | Partnerships & Relationships No actions in this theme | | |
| S3 - Senior leadership, both officers and members, must demonstrate that they can continue to work together effectively, that | Organisational Culture Establishing Organisational Culture • Consultancy engaged and Champion recruitment underway Officer Learning and Development • A consolidated approach to fundamental training for Managers on Corporate Governance matters including | Member Development Programme – Member attendance good to date and positive feedback | Meeting structures to support Senior Leadership (Officer and Member) confirmed - Due to be achieved within quarter |

| Statutory Recommendation | Summary | Achievements this month | Milestones due this quarter (June – Aug) |
|--|---|-------------------------|---|
| with 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. | finance and procurement is being developed for delivery Autumn onwards. Officer and Member Relationship Regular meetings between Cabinet and Leadership Team in place for Municipal Year LGA sessions scheduled 6 and 20 September Member Learning and Development New Member Induction Complete Member Development Programme approved 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 | | New Member Induction - Completed |

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Improvement Plan Risk Register

July 2022



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 | Current risk score (July 2022) | Target risk score | Progress to Date (incl. current risk mitigating controls and further actions t be taken to manage risk) | Key Sources of Assurance |
|-------------|---|---|----------------------|---|--|
| Page 158 | Improvement Plan objectives and member / officer engagement in those objectives 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. | 6 (Green) | 3 (Green) | 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) Further Actions Communications Plan delivered Staff and member engagement through Organisational Culture change programme | Across all risks, sources of assurance are: 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 | Current risk score (July 2022) | Target risk score | Progress to Date (incl. current risk mitigating controls and further actions t be taken to manage risk) | Key Sources of Assurance |
|-------------|---|---|----------------------|--|-----------------------------|
| age 159 | Programme management arrangements If appropriate programme management arrangements are not put in place then there is a risk that: • 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) | 4 (green) | Current and Ongoing Controls 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 Site Approach and processes for change control and issues in place Further Actions Terms of Reference for internal Improvement Plan Review Meeting updated to reflect government intervention, single Improvement Plan and assurance framework Establishment of dedicated Programme Management Office Exception reporting format to be confirmed via highlight report standard template | As above |

| Risk Ref | Risk Title and Description | Current risk score (July 2022) | Target risk score | Progress to Date (incl. current risk mitigating controls and further actions t be taken to manage risk) | Key Sources of Assurance |
|-------------|---|---|----------------------|--|-----------------------------|
| Page 160 | Allocation of sufficient resources to project management and project delivery/ maintaining Business as Usual while delivering the Improvement plan 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. | 8 (Amber) | 4 (green) | Current and Ongoing Controls PMO support being provided by existing experienced resources within Service Improvement 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 Further Actions Establishment of dedicated Programme Management Office | As above |
| | | | | Recruitment to posts following allocation of funding | |

| T. | Risk Ref | Risk Title and Description | Current risk score (July 2022) | Target risk score | Progress to Date (incl. current risk mitigating controls and further actions t be taken to manage risk) | Key Sources of Assurance |
|----------|-------------|---|---|----------------------|--|-----------------------------|
| Page 161 | IP4 | Project and risk governance assurance arrangements 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. | 6 Green | 3 (green) | Current and Ongoing Controls 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 GT visit September, LGA October Roles of Cabinet, Scrutiny and Audit agreed with Chairs Further Actions Update Terms of Reference for internal Improvement Plan Review Meeting following agreement of Cabinet/Scrutiny/Audit arrangements Reports to Cabinet, Scrutiny and Audit Review update visit by Grant Thornton arranged for Autumn 2022 | As above |
| | IP5 | Communication Strategy If a robust communications strategy is not put in place detailing how, when and what information is shared with the | 8 (Amber) | 4 (green) | Current and Ongoing Controls Communications Approach set out in Improvement Plan approved by Council 07/06/22 | As above |

| Risk Ref | Risk Title and Description | Current risk score (July 2022) | Target risk score | Progress to Date (incl. current risk mitigating controls and further actions t be taken to manage risk) | Key Sources of Assurance |
|-------------|---|---|----------------------|---|-----------------------------|
| Page 162 | 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. | | | Key messages document for stakeholders in place Further Actions Communications plan prepared including specific activities e.g. Live event, Improvement Plan briefings Communication with stakeholders to share details of Improvement Plan | |
| IP6 | Investment and Financial Resources 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. | 12 (Red) | 8 (Amber) | 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 to be reviewed regularly by Leadership Team and register maintained Further Actions Recruitment to posts following allocation of funding | As above |

| Risk Ref | Risk Title and Description | Current risk score (July 2022) | Target risk score | Progress to Date (incl. current risk mitigating controls and further actions t be taken to manage risk) | Key Sources of Assurance |
|-------------|---|---|----------------------|---|--|
| Page 163 | Organisational Culture 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. Impact of Covid 19 on the Project Resources If there is a continued impact of Covid 19 on resource availability, then this will impact the programme delivery plan. | 8 (Amber) 6 (Green) | 4 (green) | Current and Ongoing Controls Specific theme in place within Improvement Plan Corporate Governance Theme timescales revised to allow for additional engagement activity around Corporate Governance changes Further Actions Actions agreed for organisational culture theme Current and Ongoing Controls PMO resourcing in place from within Service Improvement Resource gaps / pressures associated with actions within the Improvement Plan are being identified Further Actions Single dependencies to be identified within resourcing plan | As above plus Employee Engagement Survey As above |
| IP9 | Constitutional Changes If key governance documents and procedures (such as the Financial Regulations, Land | 9 (Amber) | 3 (green) | Current and Ongoing Controls • Key corporate Governance Documents are being reviewed and are scheduled | As above |

| | Risk Ref | Risk Title and Description | Current risk score (July 2022) | Target risk score | Progress to Date (incl. current risk mitigating controls and further actions t be taken to manage risk) | Key Sources of Assurance |
|----------|-------------|---|---|----------------------|---|-----------------------------|
| Page 164 | | 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 be in place and progress will be limited. | | | 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 Further Actions • Engagement with Members around proposed changes | |
| 1 | IP10 | Performance Management Framework (PMF) and Data Quality 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. | 12 (Red) | 8 (amber) | 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 Resources approved by Council to address staffing resources required to sustain PMF Further Actions Evidence framework to be produced to support IP Q1 Performance Report made to start to consolidate and embed PMF Performance Management System options appraisal and procurement to provide capability for performance management | As above |

| | Risk Ref | Risk Title and Description | Current risk score (July 2022) | Target risk score | Progress to Date (incl. current risk mitigating controls and further actions t be taken to manage risk) | Key Sources of Assurance |
|----------|-------------|--|---|----------------------|---|-----------------------------|
| Page 165 | | | | | Recruitment to posts | |
| 1 | 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) | 4 (green) | Current and Ongoing Controls 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 Further Actions Lessons learnt framework to be introduced. Lessons learnt to be collated relating to historic issues and shared across organisation Grant Thornton review of progress against historical issues | As above |

| Risk Ref | Risk Title and Description | Current risk score (July 2022) | Target risk score | Progress to Date (incl. current risk mitigating controls and further actions t be taken to manage risk) | Key Sources of Assurance |
|---|--|---|----------------------|--|-----------------------------|
| P12 | Risk approach and progress monitoring (optimism bias): 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. | 9 (Amber) | 6 (Green) | Current and Ongoing Controls 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 Further Actions Assurance to be provided through monitoring approach (including consistent use of RAG rating) to ensure that progress monitoring is presenting a realistic view and reflecting risk associated with actions as well as progress against plans External Reviews to provide assurance | As above |

Changes to the Improvement Plan - July 2022

1. Changes agreed due to **errors** in the Improvement Plan

| Chang | Theme | Action Title | Description |
|-------|--|--|---|
| e ref | | | |
| 13 | Decision Making | Approval of any changes to scrutiny (if required following review) | Start date to read October- 22 (in line with conclusion of scrutiny review), end date 2023 (specific timescale for implementation will be determined once review concluded) |
| 22 | Partnerships and Relationship s | Develop Health and Wellbeing Strategy | change reference number to match workstream PR.C1.3 |
| 23 | Partnerships and Relationship s | Test adequacy of partnerships and integration through Health Outcomes Framework and systemwide thematic deep dives | change reference number to match workstream PR.C1.4 |

2. Changes agreed to **delivery timescales**

| Chang | Theme | Action Title | Description |
|-------|------------------------|---|--|
| e ref | | | |
| 2 | Corporate Oversight | Review of corporate debt recovery processes completed | Slippage as Revenues and Benefits SM has been focusing on Energy Rebate and Household Support Fund schemes due to government policies. Change to October 2022. |
| 16 | Corporate Oversight | Procure new support provider to deliver Oracle Fusion | Evaluation period extended by 3 weeks due to need to financial evaluation - clarifications needed from bidders. |

| | - | T | |
|-----|--------------------|--------------------------|--|
| 0.4 | Corporate | | Change implementation |
| 24 | Oversight | Implement Orgale Fusion | date. Date tbc following |
| | | Implement Oracle Fusion | appointment of provider. |
| | | Revised Financial Regs | Approval to change decision making thresholds took |
| | | Agreed | |
| | | | place in July. Further revisions to Fin Regs being |
| 12 | Decision | | prepared for Council in |
| 12 | Making | | October. Content of |
| | | | Management Development |
| | | | Programme to be |
| | | | sequenced accordingly. |
| | Partnership | | |
| | | 0 1 10 1 11 00 | The contract review process |
| 14 | Relationship | Contract Review with DfE | requires a revised end date |
| | S | | to November 22 |
| | Partnership | | Action to be concluded in the |
| 15 | & | Review of Contract | autumn to align with the DfE |
| 13 | Relationship | concludes | schedule and statutory |
| | S | | direction. |
| | | | C Co have delivered training |
| | | | and progressing with |
| 18 | Strategic | Commercial Strategy | business case development. |
| | Decision | Approved | Strategy is in draft but will be |
| | | | reviewed following the |
| | | Business Cases | above and approved by LT. C Co are now developing |
| 19 | Strategic | Presented for commercial | |
| | Decision | workstreams | workshops and training. |
| | Strategic | | On track for September |
| 20 | Decision | MTFP Review concluded | Cabinet |
| | | | Slippage to timescales- |
| | Stratogia | | Equalities Policy has been |
| 3 | Strategic Decision | Equality Policy reviewed | reviewed. Draft being |
| | DECISION | | prepared for new Equalities |
| | | | Policy. |
| | Strategic | | Due to be presented to |
| 6 | Decision | Equality Policy approved | Council in October. 2 phase |
| | | | approach. |
| | Otract | Davies of the P | Revise end date. |
| 7 | Strategic | Review of compliance | Compliance review |
| | Decision | and stock data | completed in April. 2nd |
| | | | action is procurement of |

| | | | stock surveys (they will be completed June 2023). Add new action. |
|----|--------------------------|---|---|
| 21 | Strategic Decision | Pilot of Town Co- ordinator role commences | Proposal is on hold in order to align with community hubs work. Decision required on new strategy by October. Likely change to action |
| 11 | Strategic Decision | Maximising Value out of surplus assets portfolio – Cabinet report | This report has been delayed due to challenges of finalising list of surplus corporate assets. This is now scheduled for Cabinet in September as part of the AMS. |
| 26 | Procurement & Commercial | (Asset management) Implementation | Asset Management System to go live by end of December. Work ongoing through to March 2023. |

3. Changes agreed to add new actions to the Improvement Plan

| Chang | Theme | Action Title | Description |
|-------|-----------|--------------------|---|
| e ref | | | |
| | Corporate | Review of internal | CO.D3.5 -Implementation of recommendations from |
| 25 | Oversight | charges | CIPFA in relation to internal |
| | | | charges |

4. Changes agreed to **delivery leads**

| Chang | Theme | Action Title | Description |
|-------|-----------------------|--------------------------------------|--|
| e ref | | | |
| 10 | Strategic Decision | Options for hub locations identified | Change Delivery Lead to Joint Leads: Director- Regeneration and Growth and Director- Housing. |



Report to Budget and Corporate Scrutiny Management Board

14 September 2022

| Subject: | Equality, Diversity and Inclusion Policy 2022 - | |
|-------------------------|---|--|
| | Update | |
| Director: | Surjit Tour, Director - Law and Governance and | |
| | Monitoring Officer | |
| Contact Officer: | EDI Manager, Koser Shaheen | |
| | Koser_Shaheen@sandwell.gov.uk | |

1 Recommendations

- 1.1 That the Board considers and comments upon the draft Equality, Diversity and Inclusion Policy 2022 as set out in Appendix 1.
- 1.2 That the Board notes the proposal to utilise the Local Government Association Equality Framework (Appendix 2) to develop the council's Equality, Diversity and Inclusion strategy.

2 Reasons for Recommendations

- 2.1 The council must comply with its legal duties and obligations arising under the Equality Act 2010. Obligations require the council to set out its objectives in discharging its public sector equality duties.
- 2.2 Adopting the Equality, Diversity and Inclusion Policy 2022 makes clear the council's commitment to promote equality and challenge discrimination and intolerances in all its forms.
- 2.3 The policy will assist all employees to understand the council's ambitious vision, mission, and compitments in relation to Equality, Diversity and inclusion (EDI).



- 2.4 The Local Government Association (LGA) Corporate Peer Challenge Feedback report recommended a review of our 2011 Equality Policy.
- 2.5 A review of the Equality Policy is a key strategic deliverable in the Sandwell Improvement Plan.
- 2.6 Updating our Equality Policy is the first step towards adopting best practice in implementing the improvement modules of the LGA Equality Framework for Local Government (EFLG).
- 3 How does this deliver the objectives of the Corporate Plan?
- 3.1 The Corporate Plan is at the heart of everything that the Council does. Implementing the Equality, Diversity and Inclusion Policy 2022 will help the Council to meet its legal obligations under the Equality Act 2010 and Public Sector Equality Duty (PSED). This in turn will contribute to the successful delivery of each of the priorities that make up the Corporate Plan.



One Council One Team – Systems and Governance

We will deliver the Equalities Commission and implement its recommendations in order to ensure we meet our specific equalities duties and drive the equalities agenda at the heart of our organisation.

4 Context and Key Issues

Equality Policy - Current Position

- 4.1 Sandwell Council is committed to celebrating and promoting the rich and diverse backgrounds and cultures of its employees and residents across all six towns in the Borough and embedding equality in all that it does.
- 4.2 Sandwell Council is committed to driving improvement with regards to its EDI agenda. Under section 149 of the Equality Act 2010, Public Sector Equality Duty (PSED), a public authority must, in the exercise of its functions, have due regard



to the need to-

- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 4.3 The council's ambition is to not only meet these obligations but exceed them through the work that will be carried out by Sandwell's Equalities Commission.
- 4.4 Following the LGA Peer Group Review recommendation to review the council's Equality Policy 2011, an officer working group was established and reviewed the policy. The review included benchmarking various policies from other local authorities (LAs), considering best practice and guidance from external orginisations, namely the LGA and ACAS.
- 4.5 The views and the thoughts of the recognised Trade Unions were also canvassed and considered in the preparation of the revised Equality Policy. Officers also engaged with the West Midlands Local Authority Equality Network which is a cross collaboration of approximately 14 LAs.
- 4.6 From the benchmarking exercise undertaken, the LAs which were successful and proactive in their EDI agendas had implemented the roadmap methodology of LGA EFLG to help design and deliver their EDI policy and strategies.
- 4.7 The benchmarking exercise also considered alternative equality policies, including from other local authorities. The Equality Policy template as recommended by ACAS formed the basis of the proposed Sandwell Equality, Diversity and Inclusion Policy 2022. The purpose of the policy is to provide equality, fairness and respect for all in our employment. The new policy specifically clarifies eight equality commitments.



4.8 The updated Equality, Diversity and Inclusion Policy 2022 is set out in Appendix 1.

Consultation process

- 4.9 Sandwell Council is committed to working with its recognised Trade Unions.
- 4.10 The Equality, Diversity and Inclusion Policy 2022 was developed in conjunction with Sandwell Council's recognised Trade Unions. The Trade Unions were afforded the opportunity to comment upon the proposed policy. The policy set out in Appendix 1 has the support of Trade Unions.

LGA Equality Framework for Local Government (EFLG)

- 4.11 The EFLG framework helps local councils to meet their obligations under the Equality Act 2010 including the PSED.
- 4.12 The framework is intended to help councils:
 - Deliver accessible, inclusive and responsive services to customers and residents in their communities including those from under-represented groups.
 - Employ a workforce that reflects the diversity of the area they are serving.
 - Provide equality of opportunity for all staff.
- 4.13 The EFLG sets out four modules for improvement, underpinned by a range of criteria and practical guidance that can help a council plan, implement, and deliver real equality outcomes for employees and the community. This framework will be used for the council to self-assess its progress. For each module there are three Levels: Developing, Achieving and Excellent. The levels are progressive and cumulative so an organisation can plan and chart its progression against different priorities. Councils can be at different levels of the framework for different modules or themes. The council can also ask the LGA to review its progress against the framework.





















4.14 The four modules are:

- understanding and working with your communities
- leadership, partnership and organisational commitment
- responsive services and customer care
- diverse and engaged workforce
- 4.15 The updated Equality, Diversity and Inclusion Policy 2022 is phase one of the council's EDI improvement journey. The EFLG framework and improvement modules will be used to produce an EDI Roadmap (phase two) which will set out the timeline, design and delivery of the council's first EDI Single Framework Strategy (phase three).
- 4.16 The EDI Roadmap (phase two) will be developed between October and December 2022. A further report will then be presented to Cabinet in respect of the EDI Roadmap.
- 4.17 The EDI Roadmap will provide a clear timeframe within which the EDI Single Framework Strategy will be developed. It is anticipated that the strategy will be for either a three or five year period to enable time to embed the EDI agenda within the council and deliver various EDI initiatives across the borough working with our partners, stakeholders and residents. As part of the EDI strategy development, a comprehensive Equality, Diversity and Inclusion Policy will be constructed and embedded within the strategy.

5 Implications

| Resources: | There are no specific financial implications arising from the contents of this report. |
|--------------------------|--|
| Legal and Governance: | The Council must comply with its legal duties and obligations arising under the Equality Act 2010. Section 149 of the Equality Act 2010 enacts a single general public sector equality duty (PSED) which applies to public authorities exercising public functions. The duty on public authorities to have "due regard" to the PSED in section 149(1) of the Equality |
| | |



| | Act 2010 is more than simply a requirement to have general regard. Real thought must be given to the PSED and its requirements. |
|-----------------------|--|
| Risk: | A review of the Equality Policy is a key deliverable outlined in the council's Improvement Plan. Failure to implement an up to date policy will risk jeopardising Improvement Plan progress and result in the loss of confidence and trust in the Council's ability to deliver its Equalities priorities. Failure to comply with our legislative obligations leaves the council open to potential claims and or significant reputational damage. |
| Equality: | The Equality implications are detailed within the main body of the report. |
| Health and Wellbeing: | By taking a proactive approach in updating the council's Equality Policy, we will be supporting employees by promoting equality and challenging discrimination and intolerances in all forms. The council will break down barriers prohibiting an inclusive society by confidently tackling unfairness caused by inequality and encouraging community cohesion through increased understanding and awareness. |
| Social Value | This policy will encourage EDI in the workplace as a matter of good practice. It will promote a positive working environment free of bullying, harassment, victimisation and discrimination. It will promote dignity and respect for all. |
| | The council does require when contracting with third parties that they have appropriate EDI policies in place. Where possible, the council encourages third parties to actively promote and embed their EDI duties and obligations. |

6 Appendices

6.1 Appendix 1 - Equality, Diversity and Inclusion Policy 2022 Appendix 2 - LGA Equality Framework for Local Government



















EQUALITY, DIVERSITY AND INCLUSION POLICY 2022

Contents

| Introduction | 1 |
|---------------------------------|------------------------------|
| Our policy's purpose | 1 |
| Our commitments | 2 |
| Agreement to follow this policy | Error! Bookmark not defined. |

Introduction

Sandwell Metropolitan Borough Council is committed to encouraging equality, diversity and inclusion (EDI) among our workforce, and eliminating discrimination.¹

Sandwell Council is committed to celebrating and promoting the rich and diverse backgrounds and cultures of its employees and imbedding EDI in all that it does. The aim is for our workforce to be truly representative of all our communities in Sandwell and for all of our employees to feel respected.

With a strategic goal to deliver a 'Fairer Sandwell', the Council established an Equalities Commission to drive the Council's ambitious EDI agenda within the Council and across the Borough, Region and National stage.

Sandwell Equalities Commission EDI Vision

"An open, fair and inclusive Borough that embraces and celebrates Sandwell's rich and diverse communities, cultures, and traditions; and where everyone is treated fairly and given opportunities to make the most of their talents and realise their aspirations"

Sandwell Equalities Commission EDI Mission

"To promote equality and challenge discrimination and intolerances in all its forms. To break down barriers prohibiting an inclusive society by confidently tackling unfairness caused by inequality and encouraging community cohesion through increased understanding and awareness."

Our policy's purpose

This policy's purpose is to:

1. Provide equality, fairness and respect for all in our employment, whether temporary, part-time or full-time.

¹ Under the Equality Act 2010, in some limited circumstances discrimination can be justified if there is objective justification and it can be shown that this is a proportionate means of achieving a legitimate aim.

EQUALITY, DIVERSITY AND INCLUSION POLICY 2022

- 2. Not discriminate on the grounds of the following protected characteristics as set out in the Equality Act 2010:
 - age
 - disability
 - gender reassignment
 - · marriage or civil partnership
 - pregnancy and maternity
 - race (including colour, nationality, and ethnic or national origin)
 - religion or belief
 - sex
 - sexual orientation
- 3. Oppose and avoid all forms of discrimination. This includes in:
 - pay and benefits
 - terms and conditions of employment
 - · dealing with grievances and discipline
 - dismissal
 - Trade Union activities
 - redundancy
 - · leave for parents
 - requests for flexible working
 - selection for employment, promotion, training or other developmental opportunities

Our commitments

Sandwell Metropolitan Borough Council commits to:

- 1. Encourage EDI in the workplace as a matter of good practice.
- 2. Create a working environment free of bullying, harassment, victimisation and discrimination, promoting dignity and respect for all, and where individual differences and the contributions of all staff are recognised and valued.
- 3. Take seriously complaints of bullying, harassment, victimisation and discrimination by fellow employees, residents, suppliers, visitors, the public and any others in the course of the organisation's work activities.
- 4. Make opportunities for training, development and progress available to all staff, who will be helped and encouraged to develop their full potential, so their talents and resources can be fully utilised to maximise the efficiency and effectiveness of the organisation.
- 5. Make decisions concerning staff recruitment and promotion based on merit (apart from in any necessary and limited exemptions and exceptions allowed under the Equality Act 2010).

EQUALITY, DIVERSITY AND INCLUSION POLICY 2022

- 6. Review employment practices and procedures when necessary to ensure fairness, and also update them and the policy to take account of changes in the law.
- 7. Monitor the make-up of the workforce including age, sex, ethnic background, sexual orientation, religion or belief, gender reassignment, gender identity,_and disability in encouraging EDI, and in meeting the aims and commitments set out in the Equality, Diversity and Inclusion Policy.
- 8. Monitor Equality, Diversity and Inclusion data in disciplinaries and grievances.



Equality Framework for Local Government (EFLG) 2021



The Equality Framework has been updated to reflect the latest legislation affecting equality such as Gender Pay Gap reporting, the changing context of the local government sector and equality in Britain as well as in response to other significant issues that might affect equality including the UK's decision to leave the European Union, the increased focus on race equality as a result of the Black Lives Matter movement and the health inequities highlighted by the Coronavirus pandemic.

Equality frameworks 01 Nov 2021

Introduction

The equality framework is intended to help councils:

- Deliver accessible, inclusive and responsive services to customers and residents in their communities including those from under- represented groups.
- Employ a workforce that reflects the diversity of the area they are serving.
- Provide equality of opportunity for all staff.
- Meet the requirements of the Public Sector Equality Duty and support any aspirations to exceed these.

It seeks to do this by:

- Identifying the areas of activity that councils need to address to deliver good equality outcomes.
- Helping councils to understand how they can build equality into processes and practices.
- Supporting organisations to become inclusive employers.
- Enabling councils to informally self-assess their progress on the equality improvement journey and determine where and how they need to improve.

Providing the framework for an LGA Equality peer challenge.

Underlying principles

- The EFLG is part of the LGA's sector support programme offer to the local government sector and as such engagement with the framework is voluntary.
- The framework can help with compliance with the Public Sector Equality Duty which is a legal obligation of the Equality Act 2010.
- The framework references the nine legally protected characteristics: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation. It also encourages councils to consider other issues that might be affecting their staff such as caring responsibilities as well as issues affecting communities like socio-economic inequality and isolation including rural isolation.
- The EFLG is supportive of the Equality and Human Rights Commission's six selected domains of equality
 measurement which it has identified as the areas of life that are important to people and that enable them to flourish.
 They are: education, work, living standards, health, justice and personal security, and participation.

₽ Print ∧ Top

- The modular design of the framework reflects the fact that councils come in all shapes and sizes with different resources, communities and priorities. It recognises that action on all equality issues at once is not always possible.
- Developing EDI processes and practices is an ongoing process for all councils, regardless of what level a council is performing at (even in excellence there is room for improvement).
- The framework supports the LGA's Equality peer challenge and other peer challenges.

The framework sets out four modules for improvement, underpinned by a range of criteria and practical guidance that can help a council plan, implement and deliver real equality outcomes for employees and the community. The four modules are:

understanding and working with your communities
leadership, partnership and organisational commitment
responsive services and customer care
diverse and engaged workforce

For each module there are three Levels. Developing, Achieving and Excellent. The levels are progressive and cumulative so an organisation can plan and chart its progression against different priorities. Councils can be at different levels of the framework for different modules or themes.

Developing - The developing level criteria contain the basic building blocks for each priority. An organisation at the Developing level has made an organisational commitment to improving equality. It is putting in place processes to deliver on equality issues and is working towards meeting or is meeting the statutory requirements.

Achieving - An organisation at the Achieving level has policies, processes and procedures in place and is delivering some good equality outcomes. It is not only meeting but can demonstrate exceeding statutory requirements.

Excellent - An organisation at the Excellent level has mainstreamed equality throughout the organisation and can demonstrate that it is delivering significant outcomes across its services that are making a difference in its communities. The organisation not only exceeds statutory requirements but is an exemplar council for equality and diversity in the local government and wider public sector.

Underlying each module are a number of themes, each with a short descriptor at each level of the framework. Each theme has a set of indicators or criteria that can be used to self-assess or plan activity.

Understanding and working with your communities

- collecting and sharing information
- analysing and using data and information
- effective community engagement
- · fostering good community relations
- participation in public life.

Leadership, partnership and organisational commitment

- political and officer leadership
- priorities and working in partnership
- using equality impact assessment
- performance monitoring and scrutiny.

Responsive services and customer care

- · commissioning and procuring services
- integration of equality objectives into planned service outcomes
- service design and delivery.

Diverse and engaged workforce

- workforce diversity and inclusion
- inclusive strategies and policies
- collecting, analysing and publishing workforce data
- learning, development and progression
- health and wellbeing.

Understanding and working with your communities

Collecting and sharing information

Developing category

| Developing (1.1) | Criteria |
|---|---|
| The organisation has gathered and published information and data on the profile of its communities and the extent of inequality and disadvantage. Plans are in place to collect, share and use equality information with partners. | The organisation is clear about what sources of information (both local and national) are relevant and useful. The organisation knows what information is already being collected – internally and by its partners, including voluntary and community sector stakeholders. Some information and data have been gathered and published. The organisation is working with its partners to ensure information is shared effectively. Partners ensure efficient collection of data that avoids duplication. The authority is compliant with GDPR legislation in its collection, analysis storage and use of data and information. |

Achieving category

| Achieving (1.2) | Criteria |
|---|---|
| Relevant, proportionate and appropriate information about the local communities and their protected characteristics is being gathered. Information is shared appropriately across the organisation and with partners, informing the planning of services and contributing to better outcomes. | Information is analysed on the basis of different communities, including those sharing protected characteristics. Quantitative and qualitative research methods are used to gather data and information. National and regional data is used and analysed. Information from ward councillors is gathered in a systematic way. Data is easily accessed, shared and used by departments across the organisation. The organisation is working with partners to address identified gaps in information. Data is disaggregated using the same or similar categories. Information is being shared to identify and measure equality needs and to understand and measure outcomes for the area. There are robust and effective protocols in place for sharing information between partners and within the council and to ensure data protection. Information is being captured about health and the social determinants of health including socio-economic deprivation and other inequalities. |

| Excellent (1.3) | Criteria |
|--|--|
| A comprehensive set of information about local communities/groups with protected characteristics needs and outcomes is regularly updated and published and used to identify priorities for the local area. | The council is working with partners to continuously develop new and innovative data sharing platforms. The organisation has a sophisticated understanding of the differences between the equality profiles of their local area and how that translates to inequalities for different groups. Changing needs are identified and prioritised across a wide range of services and outcomes by, for example, referring to the Equality and Human Rights Commission's Equality Measurement Framework. Data is regularly updated and used to set priorities across the organisation and in different services, by geographical area and by protected and other characteristics such as intersectionality, deprivation etc. There is evidence of a continuous improvement of the quality of the data. Voluntary and community sector partners/health colleagues and stakeholders access and use the information. |
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Analysing and using data information

Developing category

| Developing (2.1) | Criteria |
|--|--|
| Systems are being developed to analyse soft and hard data/intelligence about communities, their needs and aspirations. | The organisation is developing and improving systems for collating and analysing the different sets of data being collected. Information is collected by front-line staff or key decision makers and taken account of. Information captured about inequalities is used in decision making. The authority is compliant with GDPR legislation, analysis and use of data and information. |

Achieving category

| Achieving (2.2) | Criteria |
|--|--|
| Information and data is disaggregated and analysed to support the assessment of local need, impacts of changes to services and priorities. | Data is used to inform the setting of relevant equality objectives, and these are regularly monitored. Data is used in service planning, commissioning and decision making. Data is continuously gathered and analysed. Information is disaggregated in a meaningful way, by relevant protected characteristic and other factors (such as deprivation or rurality) and analysed on a regular basis. Information is used to identify and prioritise on the basis of need. Information and data is used effectively as part of impact assessment/risk assessment ensuring due regard is given to the public sector equality duty. Performance data is monitored against equality objectives and outcomes with key partners and other stakeholders. Equality outcomes for commissioned and procured services are monitored and reported on. |

Excellent category

| Excellent (2.3) | Criteria |
|---|--|
| Up to date and comprehensive equality data is used regularly to plan, predict and assess impacts of decisions and business as usual practice. Impacts are monitored and reviewed. | The organisation and its partners are using data in innovative ways such as data insight methods to target service interventions. Data is being used appropriately and accurately to predict and measure demand for services. Achievement of outcomes are measured and there is evidence of gaps being narrowed in the areas identified by local people as their priorities. |

Effective community engagement

Developing category

| Developing (3.1) | Criteria |
|---|---|
| A whole council approach to the development of inclusive community engagement structures is being developed throughout the organisation. There are opportunities for communities to be involved in decision making. | The organisation has an agreed approach to engagement. It is clear about different levels of engagement (i.e. informing, consulting, participating, co-producing) and when these are appropriate. Engagement structures are in place. There are opportunities for underrepresented groups to engage with decision making. The organisation can evidence examples of these opportunities. Shared engagement structures/mechanisms are in development with partners. There are some shared engagement activities with partners. |

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| Achieving (3.2) | Criteria | ₽ Print 	 Top |

| Achieving (3.2) | Criteria |
|-----------------|----------|
|-----------------|----------|

Integrated engagement mechanisms and structures are in place to involve stakeholders in scrutinising service delivery, decision-making and progress. The organisation engages with all its communities when making decisions, including those from under- represented groups.

People from under-represented groups are encouraged and enabled to participate in decision making. A range of engagement methodologies are used. Priorities have been changed as a result of community engagement with a clear and demonstrable evidence basis. The organisation and its partners share information and the results of engagement activities to ensure that particular groups are not being over consulted with. There is an increase in the involvement of underrepresented groups. Engagement with the community and voluntary sector and the wider community effectively inform decisions. There are processes and plans throughout the organisation and with partners to increase stakeholder and voluntary and community sector involvement in informing priorities. Feedback is given and people in the community are able to challenge and have their views taken account of.

Excellent category

| Excellent (3.3) | Criteria |
|---|--|
| Formal and informal interactions take place between the organisation and its diverse and under-represented communities. All under-represented groups are actively participating in and influencing decision making and intersectionality is explored and accounted for. | There are a range of innovative approaches involving communities and arrangements are made to meet specific or individual needs. Vulnerable people/communities are participating including those that are seldom heard in the community. There is evidence that mainstream engagement mechanisms are increasingly involving previously under-represented groups. Communities are encouraged or supported to influence or make decisions. Staff and stakeholders are able to describe levels of influence within the community and changes made as a result. Key decision makers are involved in the engagement process. There is evidence of partnership arrangements for engagement leading to improved outcomes in participation. Partners are open to challenge and constructive criticism and there is openness in considering the views of different groups and stakeholders without bias towards the loudest voice(s). Where there is very limited or no actual representation within a local demographic, the ability to cater for difference is in evidence. |

Fostering good community relations

Developing category

| Developing (4.1) | Criteria |
|---|---|
| Structures are in place within the organisation and across partnerships to understand community relationships and map community tensions. | There are joint partnerships responsible for monitoring community tensions. The Community Safety Strategy considers the issue of community cohesiveness. Council communications/ promote positive relations. |

Achieving category

| Achieving (4.2) | Criteria |
|---|---|
| The organisation and its partners have a strong understanding of the quality of relations between different communities and collectively monitor relations and tensions. The organisation and its partners are actively engaged in planning and delivering activities that foster good relations. | Harassment and hate crimes are monitored and analysed regularly. Appropriate action is taken to address the issues that have been identified. Members play a role in monitoring community relations and reporting intelligence. Data is available, and it is disaggregated to cover the protected characteristics. Data and intelligence is regularly analysed and acted upon. Stakeholders and communities are involved in the monitoring of community relations and cohesion. |

| Excellent (4.3) | Criteria |
|---|--|
| The organisation takes a sophisticated approach to fostering good relations which has resulted in measurable improvements in relationships between diverse communities. | Information is available to show there has been an improvement in community relations. The organisation works with others to improve performance on good relations between diverse communities. The council's leaders maintain a high profile on community relations. The council makes use of members' links with different communities depending on circumstances. The council plays a leading role in bringing the partners and the community together if there are serious incidents of hate crime. There is obvious and demonstrable cross over between equality, diversity and community cohesion. |

Participation in public life

Developing category

| Developing (5.1) | Criteria |
|---|--|
| The organisation has a clear understanding of the level of participation in public life by different communities/protected characteristics. This can include involvement in local democracy and representation e.g. school governors, councillors, board members of voluntary/statutory sector organisations. | Information and data is gathered about the extent of involvement in public life. |

Achieving category

| Achieving (5.2) | Criteria |
|---|---|
| Local people are encouraged to participate in public life or in other activities where they are under-represented. The council uses a range of different methods and it is able to innovate and find new ways to extend participation in certain communities. | The organisation actively informs and involves local people, including under- represented groups, in opportunities for public participation. The range of participation is wide - from involvement in service consultations to participation in community-based forums, to becoming school governors etc. Outreach work or public campaigning has been undertaken to increase levels of participation by protected groups. |

Excellent category

| Excellent (5.3) | Criteria |
|--|--|
| There is an improvement in the participation rates of under-represented groups in public life. The organisation can demonstrate that people across a range of protected characteristics are able to influence decisions. | There is evidence that improvements have been achieved. More people from under-represented groups are participating across a wider and more diverse range of activities. There is evidence of improvements to services as a result of this greater participation. Decision makers are from a wider range of backgrounds. |

Leadership, partnership, and organisational commitment

Political and officer leadership

|--|

| Developing (6.1) | Criteria |
|---|---|
| The political and executive leadership have publicly committed to reducing inequality, fostering good community relations and challenging discrimination. | Senior leaders in the organisation have stated their commitment to a diverse workforce and have made clear what is expected from staff when delivering services to the community. Leadership on equality is demonstrated in a way that is recognised and understood by the organisation and local communities. Leaders have publicly committed to improving equality in their area. There is some evidence of action, not just 'talking about it'. The organisation has established and publicised a strong business case for its equality work. There is evidence that the organisation is aware of the socio-economic duty within the Equality Act 2010. The organisation regularly communicates its commitment to promoting equality to staff and the community. There is evidence that publications reflect the organisation's commitment to equality and fostering good relations. There is adequate resourcing and some expertise for EDI work across the organisation. |

| Achieving (6.2) | Criteria |
|---|---|
| Political and executive leaders demonstrate personal knowledge and understanding of local communities and continue to show commitment to reducing inequality. | Senior leaders can demonstrate their commitment to equality in decision making and how this informs the way the organisation responds to challenges. Senior leaders demonstrate knowledge and commitment to equality issues. They 'walk the talk'. There is evidence that equality considerations inform their decision making. Senior leaders understand the value and impact good communications can have and ensure that publications, websites and other communications channels are as diverse as possible. The organisation promotes a positive narrative around equality and good relations across the whole community. It has influence in wider communities and partnerships, on a range of cohesion issues such as countering far right extremism. The council has adopted some of the key policies of the socio-economic duty when taking decisions. There are examples of where the organisation and its partners have had to take unpopular decisions and can evidence how it has involved the community in reaching the decision. The organisation is up to date with language and concepts and has the cultural competence and confidence to have difficult conversations around EDI issues. The organisation has taken steps to counter negative stereotypes or dispel myths. |

| Excellent (6.3) | Criteria |
|---|--|
| Leaders have gained a reputation within the community and with the Council's partners for championing equality, balancing competing interests and fostering good relations. | The organisation is able to show that even when making difficult decisions it continues to demonstrate a clearly articulated and meaningful commitment to equality. Senior leaders have and own clear knowledge of local equality priorities and how and why they are being addressed. Senior leaders act as ambassadors for the equality agenda. When appropriate they have made a bold public stance on values led equality issues such as race or transgender equality. This is done even in the face of vociferous and negative public comments. Senior leaders visibly personally challenge inequalities and drive an improvement agenda. Local communities believe that the senior leadership is successfully challenging inequality. Staff, the community or the voluntary and community sector can offer good examples of how effective communication and engagement with the council has enabled the organisation to prevent or manage tensions between different equality groups. The organisation plays a role in ensuring that all stakeholders collectively manage the conflicting needs of their communities. The council routinely takes account of the socioeconomic duty when taking decisions and can describe outcomes as a result. |
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Priorities and partnership working

Developing category

| Developing (7.1) | Criteria |
|---|--|
| Partnership working arrangements are being reviewed with the voluntary and community sector and the wider community to ensure that local equality priorities are addressed. | Corporate and partnership documents capture the commitment of the organisation and partners to equality. Equality objectives are reflected in local strategic planning. There is support and investment in the voluntary and community sector that it is able to work as a network or collective with the council. |

Achieving category

| Achieving (7.2) | Criteria |
|---|---|
| There is a coherent, shared vision of equality for the local area, with clear priorities which have been agreed and understood by all key stakeholders, including the voluntary and community sector. | Key stakeholders have been involved in developing the shared vision of equality for the area. The shared equality priorities, objectives and outcomes for the local area are understood and acted on at all levels within the organisation. The council looks beyond traditional partners and includes the voices of smaller influencing organisations. The organisation and its partners monitor, review and evaluate performance against equality priorities, including inequality and an intersectional understanding of health inequality. The results of these activities contribute directly to the development of the organisation's objectives. |

Excellent category

| Excellent (7.3) | Criteria |
|--|--|
| The organisation can demonstrate success in working with partners in the public, private, community and voluntary sectors to address equality priorities, which are reviewed on a regular basis. | Staff, the community and the voluntary and community sector can give good examples of improved outcomes/reduced inequality/improvements on a range of issues including intersectional health inequality. Review mechanisms are in place. There is an 'equality dashboard' approach with outcomes/performance data for the area, shared across partners. There is evidence that cross-organisational learning is taking place. The community and voluntary sector say that they are treated as equal partners by the council. |

Using equality impact assessment

Developing category

| Developing (8.1) | Criteria |
|---|---|
| Due regard is taken to the aims of the general equality duty when conducting business as usual, making decisions and when setting policies. | The organisation has an agreed approach to conducting equality analysis/impact assessment of policy and service decisions. This process includes both business as usual issues and decision making. Training and support on equality analysis and impact assessment is available for staff. Impact assessments take account of the views of those affected by the policy or decision. There is a process for ensuring that equality impact assessments are sufficiently robust. |

| Achieving (8.2) |
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|-----------------|

| Achieving (8.2) | Criteria |
|--|--|
| Equality analysis/impact assessment is integrated systematically into planning, decision making and performance reviews across the organisation. | The agreed approach to conducting equality analysis/impact assessment of policy and service decisions is used across the whole organisation. Assessments are undertaken at an appropriate stage. There is senior level commitment to using and understanding equality analysis/impact assessment to inform planning and decision making. The majority of the organisation's assessments are accessible, robust and meaningful. There is evidence that members and senior leaders routinely take account of equality analysis/impact assessment when making decisions. Members challenge poor quality equality assessments. Decisions around budget cuts and savings have taken account of cumulative impact. The findings, recommendations and conclusions are shared effectively to inform decisions and planning. Mitigating actions are identified where appropriate. |

Excellent category

| Excellent (8.3) | Criteria |
|--|--|
| The organisation can demonstrate that improvements in equality outcomes are being delivered as a result of effective equality analysis/impact assessment, and that negative impacts have been mitigated. | Where necessary there is evidence of reports and policies being rejected by members and officers if not accompanied by an assessment that has been taken at an appropriate stage. The organisation can demonstrate how equality analysis/impact assessment has been used to identify needs and improve outcomes/reduce inequality. The organisation can provide evidence of how or where equality analysis/impact assessment has informed decision-making and led to different, tailored services that have improved outcomes. All of the organisation's assessments are accessible, robust and meaningful. The organisation captures information about what budget/service cuts mean to people's lives. The organisation is willing to take managed risks to pursue a progressive equality agenda. Impact assessments are embedded as an ongoing practice across the council. |

Performance monitoring and scrutiny

Developing category

| Developing (9.1) | Criteria |
|---|---|
| Appropriate structures are in place to ensure delivery and review of equality objectives. | There is an appropriate and accountable leadership group/board/forum who have responsibility for the equality agenda. There are dedicated resources for supporting equality work. |

Achieving category

| Achieving (9.2) | Criteria |
|---|--|
| The setting and monitoring of equality objectives is subject to challenge, including through any organisational bodies or groups and the political overview and scrutiny process. | The overview and scrutiny function is used to support and challenge progress on equality. This can include scrutinising and challenging equality analysis/impact assessment, reviewing objectives that are being set and monitoring progress. The public and partners are enabled to monitor progress. Progress and responses are reported regularly to the leadership of the organisation, officers and members. Corrective action is taken if outcomes are not being achieved. |

| Excellent (9.3) | Criteria | |
|-----------------|----------|--|
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| Excellent (9.3) | Criteria |
|--|---|
| The organisation uses the scrutiny process as a driver for change. The organisation benchmarks its achievements against comparable others and shares its experience in developing good practice. | The organisation assesses its performance and outcomes against comparable organisations. Review mechanisms are in place. Some outcomes and priorities have changed as a result of a scrutiny review. The organisation is approached on a regular basis to provide examples of – or showcase - its good practice. Equality work is appropriately resourced across the council. |

Responsive services and customer care

Commissioning and procuring services

Developing category

| Developing (10.1) | Criteria |
|--|---|
| The organisation ensures that procurement and commissioning processes and practices take account of the diverse needs of clients, and that providers understand the requirements of the public sector Equality Duty. | Guidance is available for suppliers on the equality requirements for the procurement and commissioning process. There are standard equality clauses for contracts. Procurement is based on known analysis of communities' needs. The organisation has started to consider how it can measure the social value of its contracts and procured services and goods. |

Achieving category

| Achieving (10.2) | Criteria |
|--|--|
| Mechanisms are in place to ensure that equality standards are embedded throughout the procurement cycle. | The organisation considers the equality impacts of how the public pound is spent with regard to local procurement and influence on the local economy. Specifications take account of the different needs of users. Fo example, through equality analysis/impact assessments. Monitoring requirements are built into contracts to ensure equality issues are addressed. These are then monitored and reported on. The organisation has an established Social Value Framework which includes equality outcomes. The social value of contracts is measured. The performance of sub- contracting arrangements is measured. |

Excellent category

| Excellent (10.3) | Criteria |
|--|--|
| The organisation can demonstrate that commissioned/procured services are helping it achieve its equality priorities. | There is evidence that contracts are being monitored using quantitative and qualitative analysis. The results are considered by both the supplier and client. There is evidence of providers meeting the organisation's equality objectives. Providers understand and can articulate a commitment to their own and the council's equality agenda. The organisation sets stretching targets for social value in equality from its contracts and these are being achieved. Local procurement is positively influencing and improving equality outcomes within the local economy. |

Integration of equality objectives into planned service outcomes

| Developing (11.1) |
|-------------------|
|-------------------|

| Developing (11.1) | Criteria |
|--|--|
| Equality objectives for the organisation have been set and published in accordance with the requirements to support the public sector Equality Duty. | Structures are in place to ensure equality outcomes are integrated into business objectives. Objectives are underpinned by robust equality analysis. Equality analysis is fed into planning and assessment of service plans. Objectives are SMART (Specific, Measurable Realistic, Achievable and Timely). An Annual Equality report is published and shared. The specific duty to publish equality objectives has been met. Service plans are monitored regularly to ensure that equality objectives are being met. Customer care policies highlight the needs of protected groups. |

| Achieving (11.2) | Criteria |
|---|---|
| Specific and measurable equality objectives have been integrated into organisational strategies and plans and action is being taken to achieve them. Outcomes are measured and monitored regularly by senior leaders. | Equality objectives are integrated into organisational strategies and plans. There is evidence of a link between equality objectives, business planning and performance management. Equality objectives are integrated into service plans across the organisation, with progress towards them managed by key decision makers. Steps are taken if deficiencies are identified. Members are kept informed of progress against equality objectives. Objectives address equality gaps and have specific timescales. The needs of protected groups are taken account of. Service users have opportunities to comment on how services are planned. Resource implications have been properly assessed. Key decision makers demonstrate that they continuously monitor, review and evaluate performance of equality objectives. |

Excellent category

| Excellent (11.3) | Criteria |
|--|--|
| The organisation can demonstrate a clear link between meeting their equality objectives and positive outcomes for its communities. | The organisation can demonstrate that improvements and equality outcomes are being delivered across the business. Service plans are designed and written with equality objectives in mind. Business plans review past performance, demonstrate how past objectives have been achieved, review performance and set new objectives. Actions to achieve priority outcomes are reviewed by senior leaders and members and regularly updated. Stakeholders and staff are involved in the setting and monitoring of objectives and their feedback is considered as part of assessing progress. Gaps have been identified in terms of who may not be using services and why. Action has been taken to change services in response. There is evidence of improved or improving outcomes, disaggregated where appropriate to demonstrate the effects on different communities/protected groups. |

Service delivery and design

| Developing (12.1) |
|----------------------|
|----------------------|

| Developing (12.1) | Criteria |
|---|---|
| The organisation has systems to collect, analyse and measure how satisfied all sections of the community are with all services. | There are mechanisms in place for service users to be consulted about service development and delivery. Social Value and collaborative principles are reflected in the organisations practical service delivery. The organisation is able to analyse and measure whether all sections of the community are able to access services. It is clear who service users are. Services carry out mapping exercises to identify and review current participation and to highlight gaps. The organisation collects data about user satisfaction with its services. The mapping and satisfaction data collected is disaggregated by different equality groups or vulnerable communities. Complaints are disaggregated by protected groups. There are mechanisms in place to enable staff to introduce business improvements. Appropriate mechanisms are in place to ensure that Human Rights considerations are identified when planning services and that customers and citizens are treated with dignity and respect. Consideration has been given to the links between equalities and safeguarding in relevant services. |

| Achieving (12.2) | Criteria |
|--|---|
| There is evidence that services are meeting the needs of a diverse community, and that take up of services is representative of the wider community. | The organisation has systems in place to use monitoring data and citizen feedback to redesign or adapt services to ensure equity of access and can demonstrate where this has been done. Service users are consulted effectively before services are developed. Issues such as social prescription and social value involve measuring outcomes which are not delivered by the organisation. Access to and appropriateness of services is monitored regularly by senior leaders and decision makers. Senior leaders and decision makers demonstrate that they continuously review and evaluate access to services. Data about access to services and user satisfaction is used in equality analyses/equality impacts assessment. A scrutiny/evaluation process of services is in place. Human Rights issues are understood and considered when delivering services to customers and clients. Human Rights guidance is available for staff and decision makers have up to date knowledge. Equalities are accounted for within safeguarding policies, particularly in social services, education, commissioning and non-upper-tier responsibilities like housing and community safety. |

Excellent category

| Excellent (12.3) | Criteria |
|--|---|
| Service design and delivery is producing equality outcomes for all under- represented groups in the community. | Services are co-produced with service users wherever possible and service users are able to influence changes. Initiatives such as Community Asset Transfers and Community Right to Challenge may be in evidence as delivered by local communities instead of the local authority. There is evidence of how levels of customer satisfaction with services and associated outcomes have improved over time. Take up of services is representative of the community in proportions that would be expected. There are examples of how different customers' experiences are analysed and acted upon to improve services. Where the human rights of individuals have been threatened the organisation has ensured that they are safeguarded. There is evidence of improved safeguarding outcomes for under-represented groups. |

Diverse and engaged workforce

Workforce diversity and inclusion

Developing category

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| Developing (13.1) | Criteria |
|--|---|
| The organisation understands its local labour market and has mechanisms in place to monitor its workforce against protected characteristics. | The organisation is clear about its local labour market. The organisation has begun to identify the steps it needs to take to achieve a diverse workforce. These are reflected in recruitment policies and procedures. The progress of protected groups through the organisational hierarchy is monitored and reported on. Equality mapping data is used as part of the analysis. Recruitment and selection is monitored at all stages of the process by protected characteristics. |

| Achieving (13.2) | Criteria |
|---|--|
| The organisation can demonstrate movement towards greater diversity in its workforce profile compared with previous years, including increasing the levels of previously underrepresented groups at all levels of the organisation. | Where there is evidence of disproportionality, any barriers have been identified and action taken to reverse the trends. There are initiatives aimed at increasing workforce diversity in underrepresented areas of the organisation. There is some evidence that gaps are being narrowed. There are career development and retention strategies for under-represented groups into management roles. There is a developing understanding of the local labour market/community profile, the barriers equality groups face and the impact this has on achieving a diverse workforce. Succession plans and recruitment processes address under-representation. Specific and measurable employment targets have been set to improve workforce diversity. Selection panels are trained in good selection practices including how to avoid bias. This includes senior recruitment panels where members are involved. |

Excellent category

| Excellent (13.3) | Criteria |
|---|--|
| The organisation actively ensures that the profile of its workforce (including the profile of major providers of commissioned services) broadly reflects the community it serves/local labour market. | There are appropriate examples of positive action to improve diversity. There is evidence that the workforce profile at all levels broadly matches the local labour market/community profile. This is continually monitored. There are reasonable explanations for gaps (e.g. the community profile is constantly changing or largely retired population) and what the organisation is doing about it. Good use is made of flexible working arrangements and targeted career pathway initiatives to address potential barriers and under representation. |

Inclusive strategies and policies

| Developing (14.1) | Criteria |
|--|--|
| The organisation's workforce strategies and policies include equality considerations and objectives. | All employment policies and procedures comply with equality legislation and employment codes of practice. The organisation's workforce strategy identifies equality issues. Targets and objectives are based on internal monitoring, staff consultation and the assessment of the local labour market and barriers to employment. New/changing employment policies and procedures are assessed for their impact on people with protected characteristics. All employment and training related policies are regularly reviewed. The organisation recognises and acknowledges that staff from protected groups may experience issues such as micro-aggression from colleagues or service users. The council is using its workforce data to develop training and development strategies that can support a wider equalities agenda for employees. A range of inclusive structures are in place to engage and involve staff. Policies and systems are in place to identify, prevent and deal effectively with harassment and bullying at work. |

| Achieving (14.2) | Criteria |
|--|---|
| The equality objectives contained within workforce strategies are implemented and monitored. | The organisation has a basic set of policies and practices to enhance workforce equality and diversity including reasonable adjustments, equal pay, flexible working and family friendly policies. The equality aspects of the organisation's workforce strategy are being implemented and tracked. When necessary, policy changes have been made as a result of equality analysis findings. Managers apply policies and practices across the authority in a consistent manner for all staff. Harassment and bullying incidents are monitored and analysed regularly. Appropriate action is taken to address the issues that have been identified. There is evidence that discipline, grievance and capability procedures are not disproportionately being applied to staff from protected groups. There are processes in place to address and monitor specific complaints of staff from protected groups about issues like micro-aggression from colleagues or service users. There are toolkits and guidance documents provided to help staff and their managers discuss sensitive issues such as race, gender identity and religion. Exit interviews are monitored and analysed with appropriate action taken to address any issues identified. Staff are engaged positively in employment and service transformation and in developing new roles and ways of working. Trade unions and partners are involved. The training and development offer supports a wider equalities agenda for the organisation. Training courses and development interventions are meeting the needs of different groups and are making a difference in getting underrepresented groups of staff up the leadership ladder. Staff led equality networks have been established. |

Excellent category

| Excellent (14.3) | Criteria |
|---|---|
| Prioritised equality outcomes for the whole workforce are being achieved. | The organisation has an excellent set of policies and procedures in place which are actively promoted to staff from all protected groups and used by managers to promote equality. Strategic, innovative and holistic approaches have been considered to improve outcomes. Staff say that they are able to have difficult conversations with their managers about aspects of equality at work and in the wider world that affect them and their colleagues. Staff are involved in developing and monitoring workforce policies. Positive and tangible equality outcomes have been delivered as a result of the implementation of a wide range of policies and practices. Outcomes are systematically communicated to staff in a range of formats including targeted and tailored communication to employees in particular roles and specific equality groups. The organisation has high satisfaction levels across all staff groups in respect of staff engagement. Harassment and bullying at work is dealt with effectively and staff say that they are treated with dignity and respect. Training and development strategies are proven to be making a significant difference to the wider equality agenda for employees and for workforce diversity. Staff involved in equality networks are satisfied that they are listened to and that they are able to make a difference in the organisation. |

Collecting, analysing and publishing workforce data

Developing category

| Developing (15.1) | Criteria |
|---|--|
| Systems are in place to collect and analyse employment data across a range of practices (recruitment, training, leavers, grievance and disciplinaries etc). | The organisation reports annually on its Gender Pay Gap. People are encouraged to provide data and there are initiatives in place to increase the disclosure of equality information by staff. Employee data is analysed organisationally and service by service. Diversity monitoring information is separated from recruitment decisions and held securely. GDPR processes are in place and regulations are being met. |

| Achieving (15.2) | Criteria | | |
|------------------|----------|--|--|
|------------------|----------|--|--|

| Achieving (15.2) | Criteria |
|--|--|
| The organisation regularly monitors, analyses and publishes employment data in accordance with its statutory duties. | Data on applicants, people shortlisted and the composition of the workforce is systematically collected. This can be disaggregated by the protected characteristics. There has been success in encouraging staff to disclose equality information and there are no significant gaps in employee data. Where there are low numbers of any protected group, ways are found to overcome this. e.g. boosted sampling, grouping ethnicities or looking regionally/nationally as well as making more use of qualitative information. The organisation publishes its race pay gap and is addressing any race and disability pay gaps. Its' gender pay gap is reducing. There is evidence that workforce data is analysed and reported to senior leaders regularly. Workforce information is published to cover basic legal requirements and includes analysis of pay/job evaluation outcomes. Action has been taken as a result of monitoring, trends are being identified and used to help establish objectives. |

Excellent category

| Excellent (15.3) | Criteria |
|---|---|
| The authority uses a robust and comprehensive set of employment data to inform its workforce strategy and management practice, as well as benchmarking and sharing good practice. | Workforce data includes a wide range of information and protected characteristic profiles including pay levels, training opportunities, appraisal ratings. Sufficient information exists about staff to inform robust equality analysis. The organisation considers and is addressing pay gaps across other areas of inequality such as religion and belief/ age, LGBT+ etc. The organisation understands the effects of employment policy and practice on its workforce. The organisation has sufficient information about staff to inform robust equality analysis. The workforce profile is updated regularly. It is possible to analyse data by all the protected characteristics whilst ensuring that there are appropriate safeguards in place to protect from any risk of personal identification. |

Learning, development and progression

Developing category

| Developing (16.1) | Criteria |
|---|--|
| The organisation carries out regular assessments of the training, learning and development needs of members and officers in order that they understand their equality duties and take action to deliver equality outcomes. Consideration is given to the progression of under-represented groups. | An assessment has been made as to what equality-related training, learning or development is required in the organisation. Appropriate behavioural competencies have been identified for the workforce. The learning and development plan/strategy take account of equality issues including the progression of under-represented groups. Induction training for new members includes equality and all members are offered equality training. Appraisal processes ensure staff and managers are aware of their equality-related responsibilities and accountabilities. |

| Achieving (16.2) | Criteria | | |
|------------------|----------|--|--|
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Achieving (16.2)

and

Criteria

The organisation provides a range of accessible learning and development opportunities to support members and officers in achieving equality objectives and outcomes. The organisation's learning and development strategy supports the progression of under-represented groups.

Equality and diversity forms part of the training and development for key decision makers. There is evidence that equality issues are mainstreamed into all training (e.g. training on customer care) and rooted in clear organisational values and behaviours. Employees are confident that they can deliver services to diverse customers. They are made aware of equality objectives and/or any changes or improvements. Different methods are used to promote learning to a wide audience (e.g. standard courses, coaching, mentoring). There are specific development programmes to promote and support the progression of under-represented groups in the workplace. Management and individual appraisals include specific equality objectives for the service area.

Excellent category

Excellent (16.3)

Criteria

Decision makers understand the importance of equality when making decisions and in how they use resources. Services are provided by knowledgeable and well-trained staff who are equipped to meet the diverse needs of local communities. The organisation actively promotes progression for underrepresented groups.

Managers and staff are accountable for ensuring equality outcomes. They can give examples of improved equality outcomes they have contributed to. Good performance is recognised in the appraisal process and more generally. Managers feel that their training has enabled them to address issues relating to protected characteristics and equality practice confidently and effectively. Staff feel their skills have improved and that they are able to relate effectively with a range of clients. Staff can answer questions about the council's equality priorities. Feedback from service users in protected groups is positive about the skills of staff in dealing with their issues. The learning and development offer goes beyond traditional equalities training and includes emerging areas of good practice such as cultural awareness. Development programmes to support under- represented groups of staff have delivered the outcomes that were set and are making a difference to the workforce profile.

Health and wellbeing

Developing category

| Developing (17.1) | Criteria |
|--|--|
| The organisation has begun to consider how equality, diversity and inclusion issues are linked to employee health and wellbeing. | The organisation uses workforce data and other information from staff to determine what its health and wellbeing priorities are. Staff in protected groups have opportunities to inform these considerations. The organisation has assessed all aspects of the working environment to ensure that the health and safety needs of all its employees are met including around COVID-19. A range of inclusive mechanisms are in place to engage and involve staff. The organisation has considered working arrangements and patterns in the light of the COVID pandemic. The organisation has a policy for reasonable adjustments for staff and members and managers are trained to implement it. Occupational health services are provided. The organisation has started to address mental health issues in the workplace. |

| Achieving (17.2) |
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|------------------|

| Achieving | |
|-----------|--|
| (17.2) | |
| | |

Criteria

The organisation promotes the health and well-being of staff via its policies. The intersectionality of health and wellbeing and equality, diversity and inclusion is recognised.

There is a coherent and joined up approach to Health and Wellbeing that addresses a range of related issues. Improvements have been made to the working environment. In the post-pandemic world, homeworking and working more flexibly is now the default position in the organisation. Staff from protected groups say there is a safe working environment which supports their wellbeing and resilience where they are impacted by racism and other discrimination. Harassment such as racism is recognised as a safeguarding/wellbeing issue which can be a cause of trauma. Staff are engaged positively in employment and service transformation and in developing new roles and ways of working. Reasonable Adjustments are provided in a timely fashion consistently across the organisation. Occupational health works closely with HR to identify and address absence trends. Managers have received training on mental health awareness and say they are equipped to address staff issues. Staff from protected groups say that their specific needs are taken into account by their managers when COVID-19 risk assessments are undertaken.

Excellent category

| Excellent |
|-----------|
| (17.3) |

Criteria

There is a positive health and wellbeing culture throughout all levels and areas of the organisation which supports all employees sense of identity and selfesteem.

Approaches to health and wellbeing are innovative. Links are made between health and wellbeing and EDI based on evidence and there are strategies in place to address these issues. The organisation understands the concept of different models of disability. Its policies are designed in partnership with disabled staff and disability organisations which encompass a range of views and lived experience. Disabled staff feel well supported by their managers and the policies of the organisation. There have been significant outcomes in the health and wellbeing of all staff including those with protected characteristics. There are high satisfaction levels with the working environment across all staff groups particularly those with protected characteristics. The organisation has high satisfaction levels across all staff groups in respect of staff engagement. Staff from protected groups are confident that the organisation understands and responds appropriately to their specific health concerns about COVID-19.

