![Sandwell Metropolitan Borough Council]

Agenda
Audit and Risk Assurance Committee

Thursday, 23 November 2023 at 6.00 pm
At Council Chamber - Sandwell Council House, Oldbury

Shokat Lal
Chief Executive
Sandwell Council House
Freeth Street
Oldbury
West Midlands

Distribution
Councillor Preece (Chair)
Councillors Ager, H Bhullar, Dhariwal, L Giles, V Smith, Tipper and HussainTrumpeter.
Mr Michael Ager and Mr Jay Hussain – co-opted members

Contact: democratic_services@sandwell.gov.uk

Information about meetings in Sandwell

If you are attending the meeting and require assistance to access the venue, please contact Democratic Services (democratic_services@sandwell.gov.uk).

If the fire alarm sounds, please follow the instructions of the officers present and leave the building by the nearest exit.

Only people invited to speak at a meeting may do so. Everyone at the meeting is expected to be respectful and listen to the discussion.

Agendas with reports with exempt information should be treated as private and confidential. It is your responsibility to ensure that any such reports are kept secure. After the meeting confidential papers should be disposed of in a secure way.

This meeting may be recorded and broadcast on the Internet. If this is the case, it will be confirmed at the meeting and further information will be provided.

You are allowed to use devices for the purposes of recording or reporting during the public session of the meeting. When using your devices they must not disrupt the meeting – please ensure they are set to silent.

Members who cannot attend the meeting should submit apologies by contacting Democratic Services (democratic_services@sandwell.gov.uk)

All agenda, reports, minutes for Sandwell Council's meetings, councillor details and more are available from our website

Minutes of
Audit and Risk Assurance Committee

21 September 2023 at 6.00pm
at Sandwell Council House, Oldbury

Present: Councillor Preece (Chair);
Councillors Bhullar, L Giles and Smith.
Mr Ager (Independent Vice-Chair) and Mr Hussain
(Independent Member).

In attendance: Brendon Arnold – Interim Director of Finance and Section
151 Officer, Sanjay Desor – Head of Technical Finance,
Peter Farrow – Audit Services and Risk Management
Manager, Kate Ashley – Strategic Lead Service
Improvement, Mark Stocks – Grant Thornton,Trisha Newton
– Deputy Democratic Services Manager and Johane
Gandiwa – Committee and Constitutional Services Lead
Officer.

36/23   **Apologies for Absence**

An apology was received from Councillor Tipper.

37/23   **Declarations of Interest**

There were no declarations of interest.

38/23   **Minutes**

Resolved that the minutes of the meeting held on 20 July
2023 be confirmed as a correct record.

ONE COUNCIL
ONE TEAM

39/23   **Urgent Additional Items of Business**

There were no urgent additional items of business.

40/23   **Improvement Plan Progress Report**

The Committee received a quarterly update on progress against the Improvement Plan agreed by Council on 7 June 2022. The Improvement Plan incorporated 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.

As part of the governance and assurance arrangements for the Improvement Plan, Audit and Risk Assurance Committee and Budget and Corporate Scrutiny Management Board reviewed progress of the Improvement Plan and utilised the plan for work programming purposes. Both Committees would consider progress at their meetings in September and any recommendations or comments presented for Cabinet's consideration.

Over this quarter, significant progress had continued to be made to deliver the actions within the Improvement Plan. A comprehensive monitoring tool had been developed which included a progress status rating for all actions. The monitoring tool provided 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.

In response to questions, the following was confirmed:-

-   progress continued to be monitored and the Council was still working towards the end of March timeline with significant progress being made. The Commissioners would be submitting a report to the Secretary of State in December;

ONE COUNCIL
ONE TEAM

- in relation to Oracle Fusion, the programme was running under budget and progress was on target with a planned go live date of April. Some aspects may be re-phased but this would not compromise the plan. A detailed report would be submitted to the next meeting;
- the Interim Director of Finance confirmed that there was a transformation team in place and he would be assessing the arrangements in place for overseeing the transformation journey. An update would be provided to a future meeting;
- the member/officer relationship survey had launched in April to provide a source of insight to aid continuous improvement activity, however, the survey had received a lower response rate from both officers and members than was expected. As a result, new plans had been formed for additional insight-gathering during the Autumn of 2023;
- in relation to stock condition surveys, additional information would be provided to the member;
- a report would be submitted to the next meeting in relation to concerns relating to the management structure and potential for instability;
- an update would be provided on the development of leadership values to a future meeting.

> **Resolved** that Committee notes progress of the Improvement Plan and the Risk Register and:-
>
> (1) a report on the progress of Oracle Fusion be submitted to the next meeting by the Interim Director of Finance;
>
> (2) the Interim Director of Finance would submit an update to a future meeting in relation to the transformation journey and arrangements/structure in place;
>
> (3) the Chief Executive be invited to provide an update in relation to the management structure be provided at the next meeting;
>
> (4) HR would be requested to provide a briefing note to members in relation to leadership values.

ONE COUNCIL
ONE TEAM

41/23   **Auditor's Interim Annual Report**

The Committee received the Grant Thornton's Interim Annual Report.

In response to members' comments and questions, the following points were clarified/noted:-

- the draft accounts for 2021/22 would be ready by October/November and it was anticipated that 2022/23 accounts would be drafted by end of January/February 2024;
- in terms of recurring errors, there had been significant improvements, however, the process had been improved with better controls and systems now in place in relation to property valuation;
- with regard to adult social care, there was a variation which needed to be managed down and carefully monitored;
- in view of recent news around a neighbouring authority, assurances were provided that there was no risk of a Section 114 notice for Sandwell;
- a risk register update would be submitted to all future meetings and would include the projected deficit.

42/23   **Audit Findings for Sandwell Council**

The Committee received Grant Thornton's Audit Findings for Sandwell Council.

43/23   **Strategic Risk Register Update**

The Audit Services and Risk Management Manager updated the Committee on the latest Strategic Risk Register. The register captured the top 20 risks. Of these, 8 were in the red category and were linked to compliance with the Data Protection Act and General Data Protection Regulations (GDPR), requests relating to Freedom of Information, cyber-security, climate change and Borough Achieves. Other risks related to the cost of inflation and the customer journey. A new risk was on workforce development.

ONE COUNCIL
ONE TEAM

3 risks had been de-escalated and were being managed at directorate levels - emergency planning, the Aquatic Centre and the Leisure Trust.

In response to members' comments and questions relating to electoral risks centred on new boundaries and the local government boundary review, it was confirmed that a working group was in place and an overview would be requested by way of member update.

44/23   **Audit and Risk Assurance Committee Annual Report 2022/23**

The Audit Services and Risk Management Manager updated the Committee on the Audit and Risk Assurance Committee Annual Report 2022/23.

The report summarised the main areas of work undertaken by the Audit and Risk Assurance Committee during 2022/23.

> **Resolved** that Audit and Risk Assurance Committee Annual Report 2022/23 be approved for submission to Full Council.

45/23   **CIPFA Audit Committee Update**

The Audit Services and Risk Management Manager provided the Committee with the latest CIPFA Audit Committee Update.

The Manager advised the committee that there were courses offered by CIPFA and if members were interested, they were free to contact his office.

46/23   **Work Programme for the 2023/24 Municipal Year**

The Committee noted the revised Work Programme for the 2023/24 Municipal Year.

ONE COUNCIL
ONE TEAM

47/23   **Cabinet Forward Plan**

The Committee noted the items contained in the Cabinet Forward Plan.

Meeting ended at 7.37pm

Contact: democratic_services@sandwell.gov.uk

ONE COUNCIL
ONE TEAM

Report to Audit and Risk Assurance Committee

23 November 2023

Subject:	Improvement Plan Progress
Director:	Chief Executive Shokat Lal
Contact Officer:	Strategic Lead – Service Improvement Kate Ashley Kate1_ashley@sandwell.gov.uk Lead Officer – Service Improvement Dawn Webster Dawn_webster@sandwell.gov.uk

1. Recommendations

1.1. That Audit and Risk Assurance Committee considers and comments upon the progress of the Improvement Plan and the Risk Register up to 1 November 2023.

1.2. That any recommendations or comments in relation to 1.1 above are reported to Cabinet.

1.3. That the Committee considers any additional areas of focus for its work plan.

2. Reasons for Recommendations

2.1 This report provides a quarterly update on progress against the Improvement Plan agreed by Council on 7 June 2022. The Improvement

ONE COUNCIL
ONE TEAM

Plan incorporates all recommendations from the Grant Thornton Governance Review, the LGA (Local Government Association) Corporate Peer Challenge and the CIPFA (Chartered Institute of Public Finance and Accountancy) Financial Management Review, as well as the Statutory Directions from the Secretary of State for Levelling Up, Housing and Communities.

2.2   On 28 June 2022, Audit and Risk Assurance Committee received the Improvement Plan and accompanying risk register and requested regular updates on progress. This report is the sixth quarterly progress report to Audit and Risk Assurance Committee.

2.3   As part of the governance and assurance arrangements for the Improvement Plan, Audit and Risk Assurance Committee and Budget and Corporate Scrutiny Management Board review progress of the Improvement Plan and utilise the plan for work programming purposes. Both Committees are due to consider progress at their meetings in November and any recommendations or comments will be presented for Cabinet's consideration.

2.4   As part of the council's assurance framework for the Improvement Plan, the LGA, Grant Thornton and CIPFA conducted follow-up reviews in Autumn 2022 to evaluate the council's progress on implementing the specific recommendations from those individual reviews. The responses to the findings from the follow-up visits from Grant Thornton and the LGA were reported to the Committee in March 2023. The response to the CIPFA FM Model Re-Assessment Report was reported to Committee in June 23.

2.5   The findings from the follow-up visits from Grant Thornton, LGA and CIFPA are incorporated into a refresh of the Improvement Plan which has been managed through the established change control process.

2.6   The Improvement Plan is intended to be a live document updated to take account of progress and relevant changes. Changes to the Improvement Plan are tracked through programme management mechanisms.

2.7   Under the Statutory Directions, the council is required to report progress against the Improvement Plan to the Department of Levelling Up, Housing and Communities every six months. Reports have been submitted in December 2022 and June 2023. With the third report due December 2023.

ONE COUNCIL
ONE TEAM

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 can deliver on the aims and priorities as set out in the Corporate Plan. The deliverables set out in this Improvement Plan will achieve long-term sustainable improvements in how the council operates and is able to make effective decisions focused on improving outcomes for residents and experiences of service users. Therefore, this impacts on the council's ability to deliver all the objectives in the Corporate Plan.

	Best start in life for children and young people
	People live well and age well
	Strong resilient communities
	Quality homes in thriving neighbourhoods
	A strong and inclusive economy
	A connected and accessible Sandwell

4   Context and Key Issues

1.1   Background

1.1.1 A single Improvement Plan was agreed by Council on 7 June 2022 to address recommendations from a Value for Money Review into the council's governance arrangements, a CIPFA financial management review, an LGA Corporate Peer Challenge, and Statutory Directions from the Secretary of State for Levelling Up, Housing and Communities. The single Improvement Plan replaced the Governance Review Improvement Plan which was approved in January 2022.

ONE COUNCIL ONE TEAM

1.1.2 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 management mechanisms.

1.1.3 This report is the sixth quarterly update to Audit and Risk Assurance Committee on progress of the Improvement Plan.

1.2 Improvement Plan Progress

1.3 Over the three months to 1 November, we have continued to deliver at pace and embed changes. We are seeing more evidence of the impact of our improvements. We have received an Area SEND inspection and have now moved up a level, we achieved a key milestone with the signing of our 2020-2021 accounts, and implemented our Asset Management System providing the tools for us to address an area of concern previously raised by external reviewers.

1.3.1 A comprehensive monitoring tool has been developed which includes a progress status rating for all actions. 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. The Improvement Plan Monitoring Tool is included at Appendix 1.

1.3.2 Progress against each theme of Improvement Plan is contained within Appendix 2. This includes a description of workstream progress including progress against milestones and achievements, and any progress issues. A summary by theme is provided below.

ONE COUNCIL ONE TEAM

1.4 Organisational Culture Theme

1.4.1 Achievements this quarter:
- Proposal of new approach to Employee Performance Review presented to Trade Unions to further embed the One Team Framework
- Forward plan of all Member briefings is in place for the next three sessions to ensure topics covered are relevant and timely.
- Social media policy completed with engagement/support of Trade Unions

1.4.2 Organisational Culture Progress Issues:

- **New Member Survey conducted, and any required amendments made to Member Development Programme (MDP)/New Member Induction programme**
  - Lower than expected return rate for New Member survey means results cannot be relied upon.
  - Members have been completing analysis after each training session.
  - Further analysis of these will be undertaken and this, along with findings from face-to-face Member sessions on the Member-Officer relationship and engagement with LGA will be used to inform the Autumn review of MDP and inform new Member induction for 2024-2025.
  - Review will commence in November.

- **Governance Training and Development**
  - 23 attendees completed Decision making training in October for key decision makers which included scenario-based learning on procurement and financial regulations, Training material and guidance available to all staff on intranet.
  - Regarding broader scenario-based learning, Officers involved in pulling training across finance, procurement and governance have undergone significant changes of personnel.
  - Next step is still to bring a new project team together to agree training detail and to diarise. Amber rating reflects need to bring project group together and progress the planning.

ONE COUNCIL
ONE TEAM

- **Delivery of Directorships and Trusteeships Training**
  - Training carried out 31 October, 20 members attended along with 5 officers. The training session was recorded and will be made available for others to view. This training will be delivered annually. Amber rating reflects that training date is later than originally intended.
  - The reason for the exception report is that training date is later than originally intended of July 2023.

1.5 Corporate Oversight Theme

1.5.1 Achievements this quarter
- Oracle Fusion approval for Gateway 2 Exit from Modelling phase for HR and Payroll
- Oracle Fusion system configuration for Finance, Procurement and EPM complete
- Q1 monitoring to Leadership Team, Scrutiny and Cabinet
- Workforce development plan skills gap analysis and training programme complete
- Corporate Debt Policy agreed
- 2020/21 accounts signed off by external auditor with no qualifications
- Verto project management software user acceptance testing complete

1.5.2 Corporate Oversight Progress Issues:

- **Develop a Continuous Improvement Framework**
  - Service planning approach developed to build corporate agendas and improvement areas into business planning discussion - evidence bundle to include performance, resident feedback, internal audit and risk management to identify improvement activity at service level.
  - Business planning workshops scheduled for November and December 2023.

ONE COUNCIL
ONE TEAM

- Approach to be reviewed in early 2024 following completion of workshops and business plans; continuous improvement built into service planning and performance management framework.

- **Directorate level restructuring and review of Spans and Layers- On hold**
    - Senior Leadership Team structure approved at Full Council 24/10/23 and analysis of spans and layers due to be discussed by senior officers in November 2023.
    - The new roles have gone out to advert on 9th November 2023 and a recruitment timetable is in place.

1.6 Strategic Direction Theme

1.6.1 Achievements this quarter
- Corporate Procurement Strategy action plan finalised
- Refreshed Corporate Procurement Strategy approved
- Corporate Narrative engagement carried out with stakeholders from across the organisations
- Contract commenced on Stock Condition Surveys for housing stock
- Equality, Diversity & Inclusion draft audit presented to Leadership Team
- Equality objectives approved

1.6.2 Strategic Direction Progress Issues

- **Customer Journey Strategy**
    - Customer engagement sessions need to take place but due to resourcing issues an external partner will be required.
    - Director of Finance along with Assistant Chief Executive has agreed funding will be provided for external support to produce Customer Engagement Strategy, due to limited resources and other commitments.
    - Specification work commenced but in early stages.

ONE COUNCIL ONE TEAM

- The reason for the exception report is that the there is a need to procure a delivery partner and delivery will take a longer time period than was originally planned.

1.7 Decision Making Theme

1.7.1 Achievements this quarter
- Scrutiny Committee's Annual Report presented to Council 24 October 2023

1.7.2 Decision Making Progress Issues
- No issues in this theme

1.8 Procurement and Commercial Theme

1.8.1 Achievements this quarter
- SEND Transport Project team members identified, launch meeting scheduled.
- Completion of Phase 2 Tech Forge Asset Management System implementation

2 Procurement and Commercial Progress Issues:
- **Performance Management System: Options Appraisal**
  - A performance management system is being explored to support improved business intelligence across the council and facilitate reporting within the performance management framework.
  - The reason for the exception report is that the original timescales to bring forward an options appraisal have been pushed back due to supplier availability for system demos. The final system demo was held August.
  - Options appraisal and business case are being finalised, further engagement with service areas being conducted to refine requirements.

ONE COUNCIL
ONE TEAM

2.1 Partnerships and Relationships Theme

2.1.1 Achievements this quarter
- Transitions Projects: Review of the transition from children's' to adults' services Benchmarking findings report complete and draft shared with Corporate Transformation Manager.

Partnerships and Relationships Progress Issues

- **Sandwell Childrens Trust- KPI's (along with accompanying tolerances) implemented in Q2**
  - KPIs and tolerances are currently under review by the DfE appointed independent chair of the SCT Improvement Board and in negotiation with the DCS and CEO of SCT.

- **Consultation on VCS Draft Strategy**
  - Annual report on 2022/23 grants produced and shared with Leader, Cabinet Member for Communities and Chair of Budget & Corporate Scrutiny Management. Further work in progress to develop approach for wider VCS engagement.
  - Relationship with VCS continues to be positive - second Cost of Living Summit involved 30 local partner organisations to launch the joint Tackling Poverty Plan

3 Statutory Recommendations

3.1 The Grant Thornton Value for Money Governance Review 2021 included three statutory recommendations (appendix 3) 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.

3.2 In their follow up review 2022, Grant Thornton recognised progress against all three statutory recommendations.

3.3 **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 (Sandwell Children s Trust), the waste service, the ERP system, and

ONE COUNCIL ONE TEAM

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.
- Sandwell Leisure Trust – agreement reached to extend SLT's operation of leisure centres to March 2027.
- Handover of Sandwell Aquatic Centre to SLT
- Sandwell Children's Trust – Governance arrangements remain in place. Joint work in place with SCT in relation to corporate parenting and early help. Revised contract commenced April 2023
- Waste Contract – Contract Monitoring framework progressing well and embedded in PMF (Performance Management Framework) reporting. Review of the Contract is complete.
- ERP (Oracle Fusion) – support provider in place and implementation commenced. Project Management and Governance arrangements are in place.
- Regeneration Strategy and Pipeline to underpin significant regeneration in Sandwell approved by Cabinet 23 March 2022. Monitoring provided to Cabinet in November 2022 and July 2023.

3.4 **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 first phase of the Governance Review has completed with the Constitution refresh.
- Corporate Governance Training - Programme of training and development commenced in September 2022 on effective decision-making, good governance, and revised contract procedure rules. Next phase of Corporate Governance Development is being rolled out during 2023-2024.
- Commercial Strategy approved in March 2023.
- Corporate Asset Management Strategy approved by Cabinet in November.
- SEND Transport lessons learnt completed and shared with Wider Leadership Team

ONE COUNCIL ONE TEAM

3.5 **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 arrangements are in place. Member Development Programme is being regularly reviewed by Ethical Standards and Member Development Committee. Member Handbook created for Municipal Year 2023-24.
- Officer Development – A consolidated programme of fundamental training for managers on Corporate Governance matters has commenced. A broader Management Development Programme will be rolled out in 2023 following the approval of the Workforce Strategy.
- Organisational Culture – Extensive engagement held to inform the One Team Framework (Values and Behaviours) which was approved in March 2023. Values and behaviours launched.
- Meeting structures to facilitate Cabinet Member and Leadership Team cross-working in place and meeting needs.

4 Specific Recommendations from External Reviews relating to Audit

4.1 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 In their follow-up review in Autumn 2022, Grant Thornton commented on the positive progress to improve the culture and professionalism of key Council committees and commenting that the Audit Committee has continued to operate throughout the year in a manner focussing on significant governance matters.

4.3 In the original Value for Money Governance Review (2021) Grant Thornton set out four recommendations that relate to scrutiny and audit. Grant Thornton made an additional recommendation relating to audit in their 2022 follow-up review relating to the Executive confirming their position on historic matters. Appendix 4 sets out an overview of progress

ONE COUNCIL
ONE TEAM

against the recommendations made by Grant Thornton in relation to scrutiny and audit.

5 External Reviews

5.1   External assurance continues to play a part in our improvement journey to monitor our progress in addressing the recommendations made through external reviews. Grant Thornton, LGA and CIPFA conducted follow up reviews in late 2022. Audit and Risk Assurance Committee received the follow up review reports in January 2023.

5.2   Reports from Sandwell's Commissioners have been submitted to the Secretary of State on a six-monthly basis. In their June 2023 report, Commissioners noted the considerable progress made over the first fifteen months of the intervention towards addressing the significant challenges facing the authority. In their third report, the Commissioners outlined that their focus over the coming months will be in the following areas:

- Developing the strategic capacity of the organisation
- Implementation and embedding of the council's values and behaviours (One Team Framework)
- Establishing a comprehensive transformation programme linked to the delivery of the medium-term financial strategy
- Approval of the 2020/21 accounts by the external auditors and a clear timetable for approval of the 2021/22 accounts

5.3   Grant Thornton returned to Sandwell in October 2023 to conduct a further follow up review and monitoring the council's further progress in addressing the Statutory Recommendations made in 2021 and the additional key and improvement recommendations made in 2022. Following the receipt of the second follow-up report, the Improvement Plan will be reviewed to ensure the council is addressing any further recommendations at either corporate level or within 'business as usual' mechanisms. Changes to the Improvement Plan will be reported to members through the normal quarterly reporting schedule.

ONE COUNCIL
ONE TEAM

6   Changes to the Improvement Plan

6.1   The Improvement Plan is intended to be a live document updated to take account of progress and relevant changes.

6.2   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.

6.3   The list of all changes is provided in Appendix 5. Where new actions have been added to the Improvement Plan, these are displayed within the monitoring tool with red font colour.

6.4   The changes made are summarised below.
   - 3 changes made to action delivery timescales (with 1 being more than three months)
   - 1 assurance action has been added
   - 7 sub-actions have been added (marked in red within IP).
   - 4 main actions are proposed to be closed (2 action closures will result in closure of workstream)
   - 3 Assurance actions are proposed to close
   - 3 changes to delivery lead

7   Risk Management

7.1   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 and Audit & Risk Assurance Committee.

7.2   The current risk register is attached as Appendix 6. The main risks are associated with:
   - **Resources** – for delivery of key components of the plan including the corporate programme management office. The financial resources

ONE COUNCIL
ONE TEAM

required have been identified and were approved by Council in June. To provide additional capacity across improvement activities, the Improvement Reserve is being used to fund graduate placements within the National Graduate Development Programme which will commence from September 2023.

- **Communication** – to ensure everyone is aware of their respective roles and responsibilities. Communication is taking place through a range of methods including briefings, live events, and regular messages.
- **Investment and Financial Resources** – to ensure financial resources are made available resource gaps/ pressures associated with the Improvement Plan have been identified
- **Constitutional Changes-** If key governance changes (agreed during 2022) are not embedded throughout the organisation then opportunities will be missed. First round of training has been delivered along with revised templates and guidance. Phase 2 of the Corporate Governance Review is underway, and this will focus on embedding the constitutional changes

7.3 Since the last report to Audit and Risk Assurance Committee, no risks have reduced.

7.4 Since the last quarterly report to Audit and Risk Assurance Committee, no risks have been closed.

8 Reporting Framework and Governance

8.1 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 7 sets out the governance framework.

8.2 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. Reports have been submitted in December 2022 and June 2023. The next report is due December 2023

ONE COUNCIL ONE TEAM

8.3 Member-led committees, such as the Governance & Constitution Review Committee, Audit & Risk Assurance Committee and Scrutiny Committees, are used for providing a steer and maintaining oversight of the actions and implementation of the Improvement Plan.

8.4 The Governance & Constitution Review Committee and cross-party Working Group have been integral to the development and review of the governance documents, ahead of decisions taken by Council last year.

8.5 Audit & Risk Assurance Committee receive quarterly updates on the Improvement Plan and the Improvement Plan Risk Register.

8.6 Budget & Corporate Scrutiny Management Board has included several elements of the Improvement Plan on their work programme as well as regular reports on overall progress. This has included a 'deep dive' focus on the work under the Organisational Culture theme and engagement with the workforce.

8.7 Any recommendations or comments from Audit & Risk Assurance Committee and Budget & Corporate Scrutiny Management Board will be reported to Cabinet.

9 Implications

Resources:	The monitoring of the Improvement Plan is being carried out within existing resources. Council's approval of the single Improvement Plan included allocation of resources to ensure delivery of the Improvement Plan. These resources are monitored regularly by the Programme Management Office and Leadership Team.
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.

ONE COUNCIL
ONE TEAM

	The delivery of actions within the Plan agreed by Council in June 2022, as well as any subsequently identified actions, will support the council to achieve sustainable improvement. This will support the end of government intervention. 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.
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 is in place and 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 will be reported monthly to Leadership Team, quarterly to Cabinet and will be regularly reported to Audit and Risk Assurance Committee.
Equality:	The successful delivery of this 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.

ONE COUNCIL
ONE TEAM

Health and Wellbeing:	The underpinning objective of the Improvement Plan is to ensure the council can 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 the 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.
Climate Change	The underpinning objective of the Improvement Plan is to ensure the council can achieve the strategic priorities as set out in the Corporate Plan. Green in everything we do is one of the Fairer Sandwell principles running throughout the Corporate Plan. Any improvements to the council's governance structures will strengthen the council's ability to embed this principle and further the climate change agenda.
Corporate Parenting:	The underpinning objective of the Improvement Plan is to ensure the council can achieve the strategic priorities as set out in the Corporate Plan. These priorities include being a good Corporate Parent for the children in our care and supporting young people once they leave care. Therefore, any improvements to the council's governance structures will strengthen the council's ability to be a good Corporate Parent.

ONE COUNCIL
ONE TEAM

10 Appendices

1. Improvement Plan Monitoring Tool October 2023
2. Improvement Plan Theme Summary October 2023
3. Statutory Recommendations Reporting October 2023
4. Scrutiny and Audit Recommendations Reporting October 2023
5. Changes to the Improvement Plan October 2023
6. Improvement Plan Risk Register October 2023
7. Improvement Plan Governance Diagram

11 Background Papers

- Sandwell Council Improvement Plan
- Approval of Sandwell Council Improvement Plan Report to Council 7 June 2022

- Reports to the Secretary of State for Levelling up Housing and Communities:
  - June 2022 Reports
  - Sandwell Council Report to Secretary of State for Levelling up, Housing and Communities, June 2022

  - December 2022 Reports:
  - Sandwell Council Report to Secretary of State for Levelling up, Housing and Communities, December 2022
  - Sandwell Council Commissioners: second report to Secretary of State for Levelling up, Housing and Communities, December 2022 (published March 2023)
  - Ministerial response to second letter (March 2023)

  - June 2023
  - Sandwell Council Commissioners: third report to Secretary of State for Levelling up, Housing and Communities, June 2023 (published July 2023)
  - Ministerial response to third letter (July 2023)

ONE COUNCIL
ONE TEAM

- Improvement Plan Progress Reports:
    - To Council:
        - [13 June 2023](#)
        - [13 December 2022](#)
    - To Cabinet:
        - [September 2023](#)
        - [June 2023](#)
        - [March 2023](#)
        - [December 2022](#) including LGA Corporate Peer Challenge Progress Review Report Nov 2022
        - [September 2022](#)
    - To Audit and Risk Assurance Committee
        - [September 2023](#)
        - [June 2023](#)
        - [March 2023](#)
        - [January 2023 (External Review Reports)](#)
        - [November 2022](#)
        - [September 2022](#)
        - [June 2022](#)
    - To Budget and Corporate Scrutiny Management Board
        - [September 2023](#)
        - [June 2023](#)
        - [March 2023](#)
        - [November 2022](#)
        - [September 2022](#)

- External Review Reports
    - [Grant Thornton Value for Money Governance Review Follow-up Report 2022](#)
    - [Grant Thornton Value for Money Governance Review December 2021 – reissued October 2022](#)
    - [LGA Corporate Peer Challenge Progress Review Report 2022](#)
    - [LGA Corporate Peer Challenge Report February 2022](#)
    - [CIPFA Financial Management Report January 2022](#)

ONE COUNCIL ONE TEAM

This page is intentionally left blank

IMPROVEMENT PLAN

Progress against Plan Status Rating	Definition	Leadership Team Action as a result
On Track	Progress against the action is good and there is i) a low level of issues; and/or ii) progress is in line with the delivery date with no/ minor slippage (e.g. less than 1 months)	Leadership Team note progress and seek assurance that on track
Medium progress	Progress on the action is being made but there is i) a medium level of issues and/or ii) slippage (actual / projected) of 1-2 months	Leadership Team watching brief and review impact on dependencies
Significant issues / slippage	There is a significant level of issues and/or slippage (e.g. more than 2 months)	Leadership Team review and remedy
Not due to start	Work on the action is not due to start	N/a
Complete	Action is complete	N/a
Closed	Action is complete and there is evidence that the measures of success have been fulfilled	Evidence to be provided
N/A	Update not required at this time	N/a
On hold	Action placed on hold due to different approach being considered	

Theme 1 -Organisational Culture

	Static data		Owners				Dates		Focus	Progress against plan	Evidence of status rating	October Update Due	
												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	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
Establishing Organisational Culture	OC.A2.0	Create the right environment for that organisational culture to thrive	Chief Executive	Deputy Leader					Focus 1	N/A	N/A	N/A	N/A
Establishing Organisational Culture	OC.A2.1	Workforce Strategy approved	Chief Executive	Deputy Leader		Head of HR	Dec-22	Sep-23	N/A	On Track- little or no slippage	Workforce Strategy themes and priority documents on track for Leadership Team 17.10.23. DS	Medium Progress- actual/ projected slippage of 1-2 months	People Strategy has been presented to Leadership Team on 17.10.23. Discussions and steer to amend and add some additional points. Also need to incorporate Organisational narrative
Establishing Organisational Culture	OC.A2.3	Project Plan for launch of One Team Framework and alignement to people management practices - Launch and share events with people managers (June & July 2023) - Alignment of One Team framework values and behaviours in people practices and L&D offer .	Chief Executive	Deputy Leader		Head of HR	Mar-23	Jul-23	N/A	On Track- little or no slippage	Update or programme containing all workstreams was presented to Leadership Team 7.9.23. DS	On Track- little or no slippage	Projects to embed continue to progress as per plan presented in September (DS.11.10.23)
Establishing Organisational Culture	OC.A2.4	Employee performance review and objective setting, linked to Corporate Plan and Directorate Plans (Appraisal) a) confirm approach for 2023 b) determine fully refreshed approach for 2024 onwards	Chief Executive	Deputy Leader		Head of HR	Mar-23	Mar-24	N/A	On Track- little or no slippage	Entering phase on consultation for the new approach to Appraisals with key stakeholders. Potential dependency/risk around TU consultation. Also dependency on Oracle Fusion module role out and whether the performance module	On Track- little or no slippage	Proposal of a new approach presented to Trade Unions to commence information and consultation. Further meeting planned next month with TUs to continue dialogue. Change management support and training being developed. Risk to technical/process
Officer Learning and Development	OC.B2.0	Develop a clear programme of management development	Chief Executive	Deputy Leader	Director- Law & Governance				Focus 2	N/A	N/A	N/A	N/a
Officer Learning and Development	OC.B2.5	Senior Leadership Development Programme Scope, Content and Budget Agreed	Chief Executive	Deputy Leader		Head of HR HR Team Manager L&D/OD		TBC	N/A				Further discussions around scope and desired outcomes required with SL/JM and to align to Leadership restructuring plans. Research into potential providers and good practice from other councils has been explored.(DS. 17.10.23)
Officer and Member Relationship	OC.C4.0	Assurance Activity to sustain positive Officer and Member Relationship	Director - Law & Governance	Leader of the Council			Jan-23		Focus 2	N/A		N/A	
Officer and Member Relationship	OC.C4.1	Identify mechanisms for ongoing insight and assurance around the Officer and Member Relationship	Director - Law & Governance	Leader of the Council			Jan-23	Dec-23	N/A	On Track- little or no slippage	Due to launch face to face sessions with a random sample of Members in October underpinned by a survey open to all Members. Questions for Officers embedded in EES. Following this insight gathering consideration will be given to ongoing insight mechanism.	On Track- little or no slippage	Emails have been sent to members to offer face to face interviews and a survey link. Questions for Officers embedded in EES. Following this insight gathering consideration will be given to ongoing insight mechanism.
Officer and Member Relationship	OC.C4.2	Compile insight into the Member-Officer Relationship in preparation for Autumn sessions with LGA around the Member-Officer Relationship	Director - Law & Governance	Leader of the Council			Jul-23	Nov-23	N/A	On Track- little or no slippage	Sessions with LGA will be confirmed following the insight gathering on EES and Member face to face sessions. Expected end November.	On Track- little or no slippage	Sessions with LGA will be confirmed following the insight gathering on EES and Member face to face sessions. Expected end November. Democratic services are compiling feedback from member training sessions to analyse.
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					Focus 2	N/A	N/A	N/A	N/A
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	Jun-23	N/A	Complete	Forward plan of all Member briefings is in place for next 3 sessions. Agendas are routinely discussed by Leadership Team. [ST to confirm the forward plan	Complete	complete
Member Learning and Development	OC.D5.0	Member development programme	Director - Law & Governance						Focus 2	N/A	N/A	N/A	N/A

		Static data					Dates		Focus	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	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
Member Learning and Development	OC.D5.2	New Member Survey conducted and any required amendments made to MDP / New Member Induction programme	Director - Law & Governance	Ethical Standards and Member Development Committee			Jul-23	Aug-23	N/A	Medium Progress- actual/ projected slippage of 1-2 months	New Member survey conducted. 1 return. Members have been completing analysis after each training session. Further analysis of these training evaluation forms will be undertaken and this, along with findings from face to face Member sessions on the Member-Officer relationship and engagement with LGA will be used to inform the Autumn review of MDP and inform new Member induction for 2024-2025. MDP Review will commence in November. New action req'd around review of MDP and its completion in March.	Complete	New Member survey conducted. 1 return. Members have been completing analysis after each training session. Further analysis of these training evaluation forms will be undertaken and this, along with findings from face to face Member sessions on the Member-Officer relationship and engagement with LGA will be used to inform the Autumn review of MDP and inform new Member induction for 2024-2025. MDP Review will commence in November. New action req'd around review of MDP and its completion in March.
Member Learning and Development	OC.D5.3	New action: Review of MDP	Director - Law & Governance	Ethical Standards and Member Development Committee			Nov-23	TBC	N/A	New Action Added	New action october	New Action Added	New action october
Member Learning and Development	OC.D5.4	New action: Agreement of revised MDP	Director - Law & Governance	Ethical Standards and Member Development Committee				Mar-23	N/A	New Action Added	New action october	New Action Added	New action october
Internal Communications	OC.E2.0	**Deliver the communications strategy to assist with more effective internal communications**	**Chief Executive**	Leader of the Council			Feb-22	Ongoing	Focus 2	N/A	N/A	N/A	N/A
Internal Communications	OC.E2.4	Formal Employee Recognition Scheme - approach and resources identified	Chief Executive	Leader of the Council	Strategic Lead- Service Improvement		Mar-23	Oct-23	N/A	On Track- little or no slippage	Development of Employee Recognition Scheme is being linked to values and behaviours roll out. Aiming for October for proposal for scheme.	Medium Progress- actual/ projected slippage of 1-2 months	Development of Employee Recognition Scheme is being linked to values and behaviours roll out and exploring options for building recognition into future all staff briefing events. Timescale for development of proposal to be extended to allow for involvement of volunteer staff from the Launch & Share Task & Finish groups in the development. Further call for action at All Staff Briefing 26/10/23. Aiming for November for proposal for scheme.
Internal Communications	OC.E2.7	Review social media policy and create guidance/ protocol for working with MPs	Chief Executive	Leader of the Council	Strategic Lead - Communications AD - HR		Jan-23	23-Aug	N/A	Complete	Complete	Complete	Complete
Internal Communications	OC.E2.8	Protocol For working with MPs	Chief Executive	Leader of the Council					N/A	New Action Added	New action october	New Action Added	New action october
Embedding Constitutional Changes	OC.G1.0	**Governance review training Phase 2**	**Director - Law & Governance**	Leader of the Council			Jan-23	TBC	Focus 2	N/A		N/A	
Embedding Constitutional Changes	OC.G1.3	Governance Training and Development	Director - Law & Governance	Leader of the Council	Director-Finance		Jan-23	May-24	N/A	Medium Progress- actual/ projected s	Decision making training in place early October for key decision makers. Regarding broader scenario-based learning, Officers involved in pulling training across finance, procurement and governance have undergone significant changes of personnel. Next step is bring a new project team together to agree training detail and to diarise. Intention to deliver in November. Overall timeline is still achievable. Amber rating reflects need to bring project group together and progress the planning over September and October.	Medium Progress- actual/ projected s	Regarding broader scenario-based learning, Officers involved in pulling training across finance, procurement and governance have undergone significant changes of personnel. Next step is bring a new project team together to agree training detail and to diarise. Intention to deliver before the end of the year in November/ December. Overall timeline is still achievable. Amber rating reflects need to bring project group together and progress the planning over September and October.
Embedding Constitutional Changes	OC.G1.4	Annual Refresher of Corporate Governance Training	Director - Law & Governance	Leader of the Council			June 2023	Dec-23	N/A	On Track- little or no slippage	ST will update with date for delivery	On Track- little or no slippage	Scheduled to the end of Dec with CIPFa to carry out the Code of corporate governance training.

		Static data		Owners				Dates		Focus	Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating
													October Update Due	
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date		Main Action Risk	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
Embedding Constitutional Changes	OC.G1.5	Delivery of Directorships and Trusteeships Training	Director - Law & Governance	Deputy Leader			Jan-23	Jul-23	N/A		Medium Progress- actual/ projected s	Date confirmed 31st October. Offer to be extended to Officers with council appointments to boards etc. Amber rating reflects later than planned delivery of training.	Medium Progress- actual/ projected s	Date confirmed 31st October. Offer to be extended to Officers with council appointments to boards etc. This training will be delivered annually. Amber rating reflects later than planned delivery of training.

Theme 2- Corporate Oversight

		Static data						Dates		Focus	Progress against plan	Evidence of status rating	October Update Due	
													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	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
ERP	CO.A1.0	**Implement Oracle Fusion**	**Director- Finance**	**Deputy Leader**	**Director- Business Strategy & Change** **Director- Law**		Apr-22	Apr-24	Focus 2	N/A	N/A	N/A	N/A
ERP	CO.A1.9	Completion of the modelling phase	Director- Finance			PMO lead	Feb-23	Sep-23	N/A	Complete	Programme Board on 21st Sep provided approval for: Gateway 2 Exit from Modelling Phase for HR & Payroll.	Complete	complete
ERP	CO.A1.10	Go live	Director- Finance	**Deputy Leader**		PMO Lead	Apr-24	Apr-24	N/A	On Track- little or no slippage	Go Live still planned from April 2024.	On Track- little or no slippage	Finance and Procurement will go-live in April 2024. HR & Payroll will go-live in July 24.
ERP	CO.A1.11	Programme benefits will be defined during the duration of the programme and agreed with the programme board -a process will be agreed for monitoring and reporting the benefits -benefit realisation will take place post go live.	Director- Finance	**Deputy Leader**		PMO lead	Feb-23	quarterly May Aug Nov Feb	N/A	On Track- little or no slippage	Benefit rationalisation taking place across the Programme workstreams following completion of Design Phase. Benefit profiles will be developed and baselined ahead of Go-Live.	On Track- little or no slippage	Benefit rationalisation taking place across the Programme workstreams following completion of Design Phase. Benefit profiles will be developed and baselined ahead of Go-Live. Working group established with HoS to progress financial benefits.
ERP	CO.A1.12	New action: Completion of realisation phase/development stage					Sep-23		N/A	On Track- little or no slippage	Programme Board on 21st Sep provided approval for: Gateway 2 Exit from Modelling Phase for HR & Payroll. Gateway 3 Exit from Realisation Development Phase and entry to SIT for Finance, EPM and Procurement. The programme will continue in to work in a phased approach with SIT commencing on time on 25th September.	On Track- little or no slippage	Programme Board on 21st Sep provided approval for: Gateway 2 Exit from Modelling Phase for HR & Payroll. Gateway 3 Exit from Realisation Development Phase and entry to SIT for Finance, EPM and Procurement. The programme will continue in to work in a phased approach with SIT commencing on time on 25th September.
Improvement Planning, Monitoring and Learning	CO.B1.0	**Single Improvement Plan Phase 1**	**Leadership Team**	**Leader of the Council**			Mar-22	Ongoing	Focus 2	N/A	N/A	N/A	N/A
Improvement Planning, Monitoring and Learning	CO.B1.4	Ongoing Monitoring of Improvement Plan (Monthly Monitoring by Leadership Team, Quarterly Monitoring by Cabinet, ARAC regular review of IP and IP Risk Register, Scrutiny regular review of IP)	Leadership Team	Leader of the Council	Strategic Lead: Service Improvement		Ongoing	Monthly assurance	N/A	On Track- little or no slippage	Report due to Cabinet 6 Dec, Scrutiny 30 Nov, ARAC 30 Nov and Council 12 Dec.	On Track- little or no slippage	Report due to Cabinet 6 Dec, Scrutiny 30 Nov, ARAC 30 Nov and Council 12 Dec.
Improvement Planning, Monitoring and Learning	CO.B1.5	6 monthly report to Secretary of State	Leadership Team	Council	Strategic Lead: Service Improvement		Dec-22	June & December each year throughout intervention	N/A	On Track- little or no slippage	Next report due in December 2023	On Track- little or no slippage	Next report due in December 2023
Improvement Planning, Monitoring and Learning	CO.B1.6	**Employee Engagement Survey Action Plan monitored and reviewed by Leadership Team**	**Chief Executive**	**Deputy Leader**			Jan-23	Jan July each year	Focus 2	Complete	complete	Complete	complete
Improvement Planning, Monitoring and Learning	CO.B1.7	**Conduct Employee Engagement Survey for 2023 and consider actions required in response to the findings**	**Chief Executive**	**Deputy Leader**	**AD - HR Strategic Lead - Service Improvement**		Jul-23	early 2024	Focus 2	On Track- little or no slippage	Employee Engagement Survey being conducted currently; initial report to IPRM on 02/11/23	On Track- little or no slippage	Employee Engagement Survey closed at end September 2023, results being analysed. Session arranged with Directors and Wider Leadership Team in early November to receive corporate level results and consider actions required in response to the findings.
Improvement Planning, Monitoring and Learning	CO.B3.0	**Continuous Improvement**	**Chief Executive**	**Leader of the Council**			Autumn 2022	Oct-23	Focus 2	N/A	N/A	N/A	N/A

Static data			Owners				Dates		Focus	Progress against plan	Evidence of status rating	October Update Due	
												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	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
Improvement Planning, Monitoring and Learning	CO.B3.1	Develop a Continuous Improvement framework	Chief Executive	Leader of the Council			Autumn 2022	Oct-23	N/A	Medium Progress- actual/ projected slippage of 1-2 months	Resource allocated to development of LUP leading to delay in overall continuous improvement framework. Service planning approach developed to build corporate agendas and improvement areas into business planning discussion - evidence bundle to include performance, resident feedback, internal audit and risk management to identify improvement activity at service level. Planning of improvement activity and assurance at corporate level for period of post-intervention in progress	Medium Progress- actual/ projected slippage of 1-2 months	Service planning approach developed to build corporate agendas and improvement areas into business planning discussion - evidence bundle to include performance, resident feedback, internal audit and risk management to identify improvement activity at service level. Business planning workshops scheduled for November and December 2023. Approach to be reviewed in early 2024 following completion of workshops and business plans; continuous improvement built into service planning and performance management framework
Improvement Planning, Monitoring and Learning	CO.B3.2	Develop a lessons learnt framework	Chief executive	Leader of the Council			23-Jan	Oct-23	N/A	On Track- little or no slippage	Lessons learnt template and guidance prepared. Shared with business planning and performance management groups to disseminate.	On Track- little or no slippage	Further promotion required to encourage use of lessons learned template and guidance.
Performance Management	CO.C1.0	Performance Management Framework (PMF)	Chief Executive	Deputy Leader			Sep-22	Ongoing	Focus 2	N/A	N/A	N/A	N/A
Performance Management	CO.C1.3	Quarterly Performance Reports made to Cabinet	Chief Executive	Deputy Leader	Strategic Lead: Service Improvement		Ongoing action	Quarterly monitoring to ensure approach embedded	N/A	On Track- little or no slippage	Q1 report went to leaders meeting in september and will fo to Cabinet next month (october)	On Track- little or no slippage	Q1 Report went to Budget and Corporate Scrutiny Management Board in October and scheduled to go to Cabinet on the 18th October. Q2 report is being prepared and will go to Leadership Team on the 28th November.
Performance Management	CO.C1.4	Review Corporate KPIs for organisational health to reflect workforce strategy	Chief Executive	Deputy Leader	Strategic Lead: Service Improvement		January 2023	Mar-24	N/A	Complete	Organisational Health KPIs have been reviewed and are now included in the quarterly reports.	Complete	complete
Performance Management	CO.C1.8	Corporate performance team in place	Chief Executive	Deputy Leader	Strategic Lead: Service Improvement		dec 22	Sep-23	N/A	On Track- little or no slippage	Senior Lead Officer in place since February. G Grade post to start in September, F Grade post to be re-evaluated following some minor changes to the job spec, with the view to this going out later in the year.	On Track- little or no slippage	Senior Lead Officer in place since February. G Grade post to start in September, F Grade post to be re-evaluated following some minor changes to the job spec, with the view to this going out later in the year.
Performance Management	CO.C1.9	Consider integrating revenue, Capital and Performance reporting	Director-Finance	Deputy Leader	Strategic Lead: Service Improvement		Mar-24	Aug-24	N/a	Not due to start	Not due to start	Not due to start	Not due to start
Performance Management	CO.C2.0	Budget Monitoring	Director- Finance	Deputy Leader			Mar-22	Ongoing	Focus 2	N/A	N/A	N/A	N/A
Performance Management	CO.C2.4	Assurance action: Quarterly Budget Monitoring Reports made to Leadership Team, Cabinet and Scrutiny	Director-Finance	Deputy Leader			Ongoing action- March, June, Sep, Dec	Quarterly monitoring to ensure approach embedded	N/A	Assurance Action	Q1 monitoring to Cabinet and Leadership team. Scruinty due in a couple of weeks.	Assurance Action	due december 23
Performance Management	CO.C2.5	Assurance action: Where budget pressures identified, assurance provided that action has/is being taken (monthly summary comment from S151 Officer / raise issues)	Director-Finance	Deputy Leader			Ongoing action	Monthly monitoring	N/A	Assurance Action	Budget pressures and mitigations are discussed at LT each month	Assurance Action	
Performance Management	CO.C2.6	Embed financial benchmarking in budget planning	Director-Finance	Deputy Leader			Apr-23	Jan-24	N/A	On Track- little or no slippage	Benchmarking used in budget planning up to date. Next round is starting now.		

		Static data		Owners				Dates		Focus	Progress against plan	Evidence of status rating		Progress against plan	Evidence of status rating
													October Update Due		
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date		Main Action Risk	Status (September 2023)	Update (Initial and Date)(September 2023)		Status (October 2023)	Update (Initial and Date)(October 2023)
Organisational Structure and Enabling Corporate Core	**CO.D1.0**	**Restructuring**	**Leadership Team**	**Deputy Leader**			**Dec-20**	**on hold**		**Focus 2**	N/A	N/A		N/A	N/A
Organisational Structure and Enabling Corporate Core	CO.D1.1	Directorate Level restructuring	Chief Executive	Deputy Leader		Head of HR	TBC	TBC		N/A	Action on Hold			Action on Hold	Senior Leadership Team structure presented to Full Council 24/10/23 for approval - WILL NEED UPDATE FOLLOWING THIS
Organisational Structure and Enabling Corporate Core	CO.D1.2	Review of spans and layers across Council's managerial structures in line with LGA Guidance (likely to be incorporated within Target Operating Model Programme in due course)	Chief Executive	Deputy Leader		Head of HR	July 23	TBC		N/A	On Track- little or no slippage	C.Co work underway. Head of HR meeting C.Co lead 29.09.24. LT update to follow		On Track- little or no slippage	Report to Leadership Team scheduled for 14 November 2023 (KA)
Organisational Structure and Enabling Corporate Core	**CO.D2.0**	**Embedding Finance Business Partner role**	**Director- Finance**	**Deputy Leader**			**Jan-22**	**Jul-23**		**Focus 2**	N/A	N/A		N/A	N/A
Organisational Structure and Enabling Corporate Core	CO.D2.3	Workforce development plan implemented for financial services section	Director- Finance	Deputy Leader		Finance Improvement Manager		Jul-23		N/A	Complete	Complete		Complete	Complete
Organisational Structure and Enabling Corporate Core	CO.D2.5	Assurance Action: Performance against KPIs for financial services section	Director- Finance	Deputy Leader		Finance Improvement Manager	Quarterly	Jun Sep Dec Mar		N/A	Assurance Action			Assurance Action	update missing from september
Organisational Structure and Enabling Corporate Core	**CO.D3.0**	**Reduction of financial transactional activity**	**Director- Finance**	**Deputy Leader**			**Jan-22**			**Focus 2**	N/A	N/A		N/A	N/A
Organisational Structure and Enabling Corporate Core	CO.D3.6	Implement recommended processes for a single view of debt	Director- Finance	Deputy Leader			Jun-23	Mar-24		N/A	On Track- little or no slippage	The Corporate Debt Policy has been completed and includes all types of debts the council collects. This will go to Cabinet in February for approval for 24/25. A process has been created and signed of for dealing with the council's top debtors (highest). In order to contact these residents and provide		On Track- little or no slippage	The Corporate Debt Policy has been completed and includes all types of debts the council collects. This will go to Cabinet in February for approval for 24/25. A process has been created and signed of for dealing with the council's top debtors (highest). In order to contact these residents and provide
Organisational Structure and Enabling Corporate Core	CO.D3.4	Programme of end to end process reviews	Director- Finance	Deputy Leader			May-22	May-23		N/A	On Track- little or no slippage	The project team is collaborating with Directorate nominees, who have provided details of core business support processes. The review of the processes is on target to commence in September for completion in accordance with project plan.		On Track- little or no slippage	C.co report due 4.11.23 re future model.
Organisational Structure and Enabling Corporate Core	CO.D3.5	Implementation of Recommendations from CIPFa in relation to internal charges	Director- Finance	Deputy Leader			Oct-22	Apr-24		N/A	Complete	Complete		Complete	Complete
Organisational Structure and Enabling Corporate Core	CO.D3.7	Develop Business case for Transactional Finance Unit	Director- Finance	Deputy Leader				TBC		N/A	On Track- little or no slippage	Work continues to develop the Transactional Finance Unit, the activity analysis has been issued to relevant staff and completed returns are being analysed. The project remains on target.		On Track- little or no slippage	C.co report due 4.11.23 re future model.
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**	**AA- ongoing**		**Focus 1**	N/A	N/A		N/A	N/A

		Static data						Owners			Dates		Focus	Progress against plan	Evidence of status rating	October Update Due	
Workstream	Ref	Action		Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Status (September 2023)	Update (Initial and Date)(September 2023)	Progress against plan	Evidence of status rating			
													Status (October 2023)	Update (Initial and Date)(October 2023)			
Organisational Structure and Enabling Corporate Core	CO.D4.4	Assurance Action: GT sign-off of 2020/21 Accounts (assurance that previous issues raised have been resolved)		Director-Finance	Deputy Leader			Monthly monitoring	Monthly monitoring	N/A	Complete	complete	Complete	complete
Organisational Structure and Enabling Corporate Core	CO.D4.5	Assurance Action: Preparation of Draft Accounts for 2021/2022 (assurance that approach to completion and sign-off of final accounts is becoming embedded)		Director-Finance	Deputy Leader			Monthly monitoring	Monthly monitoring	N/A	Assurance Action	The 2021/22 accounts are in production at the moment. The organisation has closedown timetable processes that it adopts for each financial year and these are being completed having started after the 2020/21 accounts were	Assurance Action	as September 23- The 2021/22 accounts are in production at the moment. The organisation has closedown timetable processes that it adopts for each financial year and these are being completed having started after the
Corporate Transformation	CO.E1.0	Corporate Transformation programme		Director- Finance	Deputy Leader			Dec-21		Focus 1	N/A	N/A	N/A	N/A
Corporate Transformation	CO.E1.3	Corporate Transformation PMO established - Local Partnerships Review Concludes - Establishment of PMO		Director-Finance	Deputy Leader		AD-Transformation		Sep-23	N/A	On Track- little or no slippage	PMO framework currently being revised to reflect local assurance/governance arrangements. Review of current CTO structure / roles to align to PMO&CTO function moving forward	Medium Progress- actual/ projected slippage of 1-2 months	On Track for completion Novemberr 23
Corporate Transformation	CO.E1.4	Programme and Project Management System Implementation		Director-Finance	Deputy Leader		AD-Transformation		TBC following 08/08/2023 meeting	N/A	On Track- little or no slippage	Format for testing currently being established and identification of end users to be involved.	On Track- little or no slippage	User acceptance testing complete, refinements underway. Verto launch date for CTO early November
Customer Journey	CO.F5.0	Customer Journey Programme		Director – Regeneration & Growth	Deputy Leader		Transformation Programme Manager	22-Sep	TBC	Focus 1	N/A		N/A	
Customer Journey	CO.F5.4	Ward and Casework Management - Member Engagement held		Director – Regeneration & Growth			Strategic Lead - Customer	TBC	TBC	N/A	On Track- little or no slippage	Strategic Improvement Manager will be feeding back initial solutions being worked on at the next Cabinet Member, Town & Vice Chair Meeting on the 2 October 2023.	On Track- little or no slippage	Meeting with Cabinet Member, Town & Vice Chairs on 2 October 2023, work to date shared on issues raised and further work planned. Agreed to attend all upcoming Town Meetings to provide feedback to all Members.

	Static data			Owners				Dates		Focus	Progress against plan	Evidence of status rating		Progress against plan	Evidence of status rating
													October Update Due		
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date		Main Action Risk	Status (September 2023)	Update (Initial and Date)(September 2023)		Status (October 2023)	Update (Initial and Date)(October 2023)
Customer Journey	CO.F5.5	Ward and Casework Management - Action plan in place Plan for Responsiveness re: Ward & Casework Management 2023/24.	Director – Regeneration & Growth			Strategic Lead - Customer	TBC	TBC		N/A	On Track- little or no slippage	See above update. LT are also continuing to receive weekly updates on Cllr Portal cases.		On Track- little or no slippage	See above update. LT are also continuing to receive weekly updates on Cllr Portal cases. Once all meetings have been attended, to attend future quarterly meetings to gain any further feedback as an on-going improvement mechanism. Also trialing new 'Member stall' event Pre Full Council as a further way to improve Officer/Member relationships and information sharing. New Ward Co-ordinators have commenced in post and will be working closely with Members to come up with Ward Plans & Priorities and ensure a live action plan is in place for all Wards.
Strategic Planning framework	CO.G1.0	Strategic Planning framework	Chief Executive					2024		Focus 2	N/A	new action		N/A	new action
Strategic Planning framework	CO.G1.1	Refresh of partnership wide vision 2030	Chief Executive			Strategic Lead - Service Improvement		early 2024		N/A	On Track- little or no slippage	Key messages shared with Cabinet and LT at their Away Day 19 September. To be shared with WLT on 28 September. On track for partnership event 30 November.		On Track- little or no slippage	Workshop with analysts from across the council being held on 25 October to examine State of Borough report in further detail - with view to planning content of partnership wide event on 30 November.
Strategic Planning framework	CO.G1.3	Refresh appraisal process	Chief Executive			AD - HR Strategic Lead - Service Improvement		TBC		N/A	On Track- little or no slippage	Entering phase on consultation for the new approach to Appraisals with key stakeholders. Potential dependency/risk around TU consultation. Also dependency on Oracle Fusion module role out and whether the performance module actually goes live 1.4.24 . DS		On Track- little or no slippage	Proposal of a new approach presented to Trade Unions to commence information and consultation. Further meeting planned next month with TUs to continue dialogue. Change management support and training being developed. Risk to technical/process recording as Oracle Talent module may not be live until July 2024 (Ds. 11.10.23)
Strategic Planning framework	CO.G1.4	Pilot an approach to service planning	Chief Executive			Strategic Lead - Service Improvement		TBC		N/A	On Track- little or no slippage			On Track- little or no slippage	Following LT direction to implement BP's at AD level three workshops are planned for Nov/Dec with the aim being to drive quality and consistency.

Theme 3 -Strategic Direction

Static data			Owners				Dates		Focus	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	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
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	Focus 2	Complete	complete -removed sept change contol	Complete	complete -removed sept change contol
Strategy development and refresh	SD.A3.0	Communications and Corporate Affairs Strategy Development and Delivery	Chief Executive	Leader of the Council		Strategic Lead - Communications	Autumn 2021	Ongoing	Focus 2	On Track- little or no slippage	Narrative workshops with LGA held. Draft narrative engagement with staff representatives has commenced	On Track- little or no slippage	Engagement with staff on the corporate narrative will conclude this month. All staff briefing being held to update colleagues on the progress of the improvement plan and the next steps on how we become an outstanding council as we get ready for exiting intervention.
Strategy development and refresh	SD.A4.0	Refresh and embed the Corporate Procurement Strategy	Director- Finance	Deputy Leader		Interim Procurement Strategy Manager	Autumn 2021	Jul-23	Focus 2		update required- new action required- when is procurement strategy to be signed off.-		update required- new action required- when is procurement strategy to be signed off.
Strategy development and refresh	SD.A4.4	Action Plan to address gap analysis in strategy to be completed	Director- Finance	Deputy Leader		Interim Head of Procurement	Apr-23	Jul-23	N/A	Complete	Complete	Complete	Complete
Strategy development and refresh	SD.A5.0	Develop and Implement the Commercial Strategy	Director- Finance	Deputy Leader			Autumn 2021	Ocr 23	Focus 2	N/a		N/a	

	Static data			Owners			Dates		Focus	Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating
												October Update Due	
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
Strategy development and refresh	SD.A5.3	Complete Full Business Cases for identified Business Steams in line with Commercial Project Plan approved by Leadership Team	Director- Finance					Oct-23	N/A	Significant issues / actual/projected slippage- more than 2 months	Dedicated PM recruited to support leads and sponsors to develop business cases, monitor progress and produce highlight reports. Update on commercial workstreams to be presented at 09.10.23 CTB	On Track- little or no slippage	The 4 workstreams are at various stages. Education commercial services – BC in development, completion date end of October H&S – scoping underway Neutral vendor – Pre OBC activity due to commence Pest control – alternative options been considered. Updates to be presented at next CTB
Strategy development and refresh	SD.A5.4	Recruit Commercial Project Officer	Director- Finance					Sep-23	N/A	On Track- little or no slippage	Commercial PM recruited via Hays.. Introductory meetings with business leads in progress	Complete	Complete
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	Jun-23	Focus 2				
Strategy development and refresh	SD.A6.4	Procurement of stock condition surveys	Director- Housing	Cabinet Member for Housing				Sep-23	N/A	Complete	contract has commenced for the first tranch of stock condition surveys	Complete	complete
Strategy development and refresh	SD.A6.5	Stock Condition Surveys Undertaken to inform HRA business plan	Director- Housing	Cabinet Member for Housing			Sep-23	Sep-24	N/A	On Track- little or no slippage	Contract has started for the first 5000 stock condition surveys		
Strategy development and refresh	SD.A6.6	New action:refresh of HRA Business plan?	Director- Housing	Cabinet Member for Housing			TBC	TBC	N/A	New Action Added	new action sept	New Action Added	new action sept
Strategy development and refresh	SD.A6.7	New action: Procurement of second tranche of Stock condition Surveys	Director- Housing	Director- Housing			TBC	TBC	N/A	New Action Added	new action sept	New Action Added	new action sept

	Static data			Owners				Dates		Focus	Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating
													October Update Due	
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)		Start date	Due date	Main Action Risk	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
Strategy development and refresh	**SD.A7.0**	**Refresh the Early Help Strategy**	**Director- Children & Education**	**Cabinet Member for Children and Education**				**Autumn 2021**	**ongoing**	Focus 2				
Strategy development and refresh	SD.A7.2	Early Help Strategy to be reviewed annually at the early help partnership board	Director- Children & Education	Cabinet Member for Children and Education				**Apr-23**	**Annually**	N/A	Assurance Action	Due April 24	Assurance Action	Due April 24
Strategy development and refresh	**SD.A8.0**	**Refresh Corporate Parenting Strategy**	**Director- Children & Education**	**Cabinet Member for Children and Education**				**Jan-22**	**Ongoing**	Focus 2	N/A	N/A	N/A	N/A
Strategy development and refresh	SD.A8.3	Corporate Parenting Strategy - yearly assurances provided to the Corporate Parenting Board	Director- Children & Education	Cabinet Member for Children and Education				**Sep-23**	**Annually**	N/A	Assurance Action	This action (assurance) forms part of the CPB work programme and led by the Cabinet Member, CYP and Education.	Assurance Action	due sept 2024
Equality, Diversity and Inclusion	**SD.B1.0**	**Equality, Diversity and Inclusion**	**Director- Law & Governance**	**Leader of the Council**				**Autumn 2021**	**Ongoing**	Focus 2	N/A		N/A	
Equality, Diversity and Inclusion	SD.B1.14	Equality, Diversity and Inclusion Assessment - appointment of consultant for data analysis - appointment of consultant for strategy development	Director- Law & Governance			Manager, Equality, Diversity and Inclusion Team		Feb-23	Jul- 24	N/A	On Track- little or no slippage	Draft Audit was presented to Leadership Team on 8 August. It was then shared on 9 August with directorates for further comment/amendments. The EDI audit was finalised on 25 August. An update report is scheduled with Leadership for 10 October to present an action plan for next steps. On track for strategy approval in July 2024. No issues to report	On Track- little or no slippage	Revision of equality objectives approved at leadership 10 October. The update report has been rescheduled with Leadership for mid November to present an action plan for next steps. On track for strategy approval in July 2024. No issues to report
Equality, Diversity and Inclusion	SD.B1.15	Equality, Diversity and Inclusion Strategy approved and published	Director- Law & Governance	Leader of the Council		Manager, Equality, Diversity and Inclusion Team		Jun-24	Jul-24	N/A	Not due to start	due July 24	Not due to start	due July 24

		Static data		Owners				Dates		Focus	Progress against plan	Evidence of status rating	October Update Due	
													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	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
MTFP & Capital Strategy	**SD.D1.0**	**Fundamental review of the Medium Term Financial Plan (MTFP) and Capital Strategy**	**Director- Finance**	**Deputy Leader**			**Jan-22**	**Ongoing**	**Focus 1**	N/A	N/A	N/A	N/A	N/A
MTFP & Capital Strategy	SD.D1.3	New Assurance Action (strategy implemented through budget plans): Budget Report to Cabinet (2023-2026) reflects funding gaps identified in MTFP	Director- Finance	Deputy Leader			Feb-23	and annually thereafter	N/A	Assurance Action	Due feb 2024	Assurance Action	Due feb 2024
MTFP & Capital Strategy	SD.D1.4	New Assurance Action (embedding the approach): MTFP and Capital Strategy refreshed and approved in October each year	Director- Finance	Deputy Leader			October 2023	and annually thereafter	N/A	Assurance Action	Due October 2023	Assurance Action	MTFS currently being refreshed - due to Cabinet 15 November 2023. Capital programme being reviewed
Consultation and Engagement	**SD.E2.0**	**Incorporate Public Consultation Results into Performance Management Framework**	**Chief Executive**	**Leader of the Council**			**Autumn 2022**		**Focus 2**	N/A	N/A	N/A	N/A
Customer Journey	SD.F1.0	Customer Journey Strategy	Director- Regeneration & Growth	Deputy Leader	Director Business Strate	Strategic Lead - Customer	Oct-22	Mar-24	Focus 2	Significant issues / actual/projected slippage- more than 2 months	Proposal to look at external resource for this was discussed at CJ Programme Board on the 15 September, request was to put on hold for 4 weeks but to work on producing a Specification in the meantime.	Medium Progress- actual/ projected slippage of 1-2 months	Director of Finance along with ACE has agreed funding will be provided for external support to produce CES, due to limited resources and other commitments. Specification work commenced but in early stages.

Theme 4 - Decision Making

		Static data			Owners				Dates		Focus	Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating
														October Update Due	
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk			Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
Role and Function of Scrutiny and Audit	DM.C3.0	Manage position on historic issues through work with ARAC chair	Director- Law & Governance	Deputy Leader			Dec-21	Ongoing	Focus 2			n/a	n/a	n/a	n/a
Role and Function of Scrutiny and Audit	DM.C3.1	Assurance action: Watching brief to ensure that historic matters do not re-surface	Director- Law & Governance	Deputy Leader			Quarterly	Sep Dec Mar June	N/A			Assurance Action	No issues to report relating to historic reports.	Assurance Action	Scrutiny committee have produced the annual report which will go to council in October. (update due dec)

Theme 5- Procurement & Commercial

Static data			Owners				Dates		Focus	Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating
												October Update Due	
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
Waste Contract	**PC.A1.0**	**Introduction of a more focused framework for contract monitoring**	**Director - Borough Economy**	**Cabinet Member for Environment Services**			**Autumn 2021**	**Aug-22**	**Focus 2**	Complete	assurance actions in place	Complete	assurance actions in place
Waste Contract	PC.A1.3	Assurance Action- Report provided to Officer Leadership on a quarterly basis. Regular reporting through PMF	Director - Borough Economy	Cabinet Member for Environment Services			Feb-23	quarterly (from Feb) Feb May Aug Nov	N/A	Assurance Action	Due November 23	Assurance Action	Due November 23
Waste Contract	PC.A1.4	Assurance Action- Annual report on leisure and waste contracts going through to cabinet member	Director - Borough Economy	Cabinet Member for Environment Services			Nov-22	annually	N/A	Assurance Action	Due November 23	Assurance Action	Due November 23
Waste Contract	PC.A1.5	The large contracts in BE for waste/street cleansing, and both leisure providers will be added to the Intend contract management module.	Director - Borough Economy	Cabinet Member for Environment Services				monthly	N/A	On Track- little or no slippage	Work progressing with Intend	On Track- little or no slippage	Work continues with Intend - scheduled go-live end October.

Static data			Owners				Dates		Focus	Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating
												October Update Due	
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
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	Focus 2	N/A	N/A	N/A	N/A
Waste Contract	PC.A2.5	Delivery of recommendations – as appropriate	Director - Borough Economy	Cabinet Member for Environment Services			Apr-23	Mar-24	N/A	Complete	Complete	Complete	Complete
Waste Contract	PC.A4.0	Street Cleansing Recovery Plan – completion and implementation	Director - Borough Economy	Cabinet Member for Environment Services			Autumn 2021	Mar-23	Focus 2	N/A		N/A	

Static data			Owners				Dates		Focus	Progress against plan	Evidence of status rating	October Update Due	
												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	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
Waste Contract	PC.A4.3	Assurance Action- Senior management meeting - annual plans requested- service delivery plan from SERCO is contractually compliant and includes elements of street cleansing.	Director - Borough Economy	Cabinet Member for Environment Services			22-Nov	quarterly (from Nov) Nov Feb May Aug	N/A	Assurance Action	due november 23	Assurance Action	due november 23
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**	**End 2023**	**Focus 2**	N/A	N/A	N/A	N/A
Waste Contract	PC.A5.2	Fleet replacement complete	Director - Borough Economy	Cabinet Member for Environment Services				End 2023	N/A	On Track- little or no slippage	Next tranche of fleet replacement remains due end 2023	On Track- little or no slippage	Next tranche of fleet replacement remains due end 2023
Waste Contract	PC.A5.3	Assurance Action- Monthly fleet steering group taking place where the documentation considered by the group is contractually compliant.	Director - Borough Economy	Cabinet Member for Environment Services			22-Nov	quarterly (from Nov) Nov Feb May Aug	N/A	Assurance Action	Due November 23	Assurance Action	Due November 23
SEND Transport	**PC.B3.0**	**Procurement of 2024 SEND Transport Contract**	**Director - Children and Education**				**Nov-22**	**Apr-25**	**Focus 2**	N/A	n/a	N/A	n/a
SEND Transport	PC.B3.2	Mobilise project team and establish project governance	Director - Children and Education	Cabinet Member for Children and Education Dept Leader	Director - Law & Governance Director - Finance	Group Head - Education	Aug 23	Sept 23	N/A	Not due to start	not due to start	On Track- little or no slippage	Project Team members identified/ lauch meeting diarised / ToR's to be agreed

	Static data			Owners				Dates		Focus	Progress against plan	Evidence of status rating	October Update Due	
Workstream	**Ref**	**Action**	**Director Lead**	**Cabinet Member**	**Other Leads**	**Update Owner (if different)**		**Start date**	**Due date**	**Main Action Risk**	**Status (September 2023)**	**Update (Initial and Date)(September 2023)**	**Status (October 2023)**	**Update (Initial and Date)(October 2023)**
SEND Transport	PC.B3.3	Commence Procurement	Director - Children and Education	Cabinet Member for Children and Education Dept Leader	Director - Law & Governance Director - Finance	Group Head - Education		Jan-24	Sep 23	N/A	Not due to start	Procurement to commence January 2024	On Track- little or no slippage	SEND 3 to be a strand of the overall transformation plan / Task & Finish Group to drive delivery
SEND Transport	PC.B3.4	Working with contract managment consultant to introduce and embed robust contract management arrangements	Director-Finance	Dept Leader / Cabinet Member for Children and Education	Director – Children & Education			Jan-23	Ongoing	N/A			On Track- little or no slippage	Report findings to be considered by Transformation Project Team with agreed recommendation embedded in SEND 3
New System Procurement	**PC.C1.0**	**Explore implementation of a corporate performance management system**	**Chief Executive**	**Deputy Leader**				**Jun-21**		**Focus 2**	N/A	N/A	N/A	N/A
New System Procurement	PC.C1.1	Options Appraisal	Chief Executive	Deputy Leader		Strategic Lead - Service Improvement			Oct-23	N/A	On Track- little or no slippage	Options appraisal is being drafted.	Medium Progress- actual/ projected slippage of 1-2 months	Options appraisal and business case being finalised, further engagement with service areas being conducted to refine requirements.
New System Procurement	PC.C1.2	Business Case and Implementation Plan Considered	Chief Executive	**Deputy Leader**		Strategic Lead - Service Improvement			TBC based on selected option	N/A	Not due to start	Not due to start	Not due to start	Not due to start

	Static data			Owners				Dates		Focus	Progress against plan	Evidence of status rating	Progress against plan	Evidence of status rating
													October Update Due	
Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)		Start date	Due date	Main Action Risk	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
Leisure Contract	PC.E1.0	Governance arrangements to manage, develop and support the current and future delivery of leisure services across the borough, including the new Aquatic Centre	Director - Borough Economy	Cabinet Member for Leisure and Tourism				Autumn 2021	May-23	Focus 2	N/A	N/A	N/A	N/A
Asset Management	PC.F1.0	Asset Management	Director – Regeneration & Growth					23-Jan		Focus 2				
Asset Management	PC.F1.3	Implementation of Phase 2 Tech Forge: Configuration and organisation of data Implementation of suplementary modules.	Director – Regeneration & Growth			Assistant Director – Property, Strategic Assets and Land Transforming Local services- programme manager		23-May	Sep-23	N/A	Complete	The phase two for Techforge implementation has now been completed. The team are currently undertaking a project closedown exercise detailing everything that has been competed across both phases along with any workstreams/actions that will now become BAU.	Complete	complete

Theme 6-Partnerships & Relationships

Workstream	Ref	Action	Director Lead	Cabinet Member	Other Leads	Update Owner (if different)	Start date	Due date	Main Action Risk	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
										Progress against plan	**Evidence of status rating**	**Progress against plan**	**Evidence of status rating**
Sandwell Children's Trust	PR.A1.0	**Continue with robust governance arrangements in place ensuring the accountability of SCT to deliver improved outcomes for children and young people in Sandwell in line with the contract**	**Director - Children and Education**	**Cabinet Member for Children and Education**			Autumn 2021	Ongoing	Focus 2	N/A	N/A	N/A	N/A
Sandwell Children's Trust	PR.A1.7	New KPIs reported through PMF	Director - Children and Education	Cabinet Member for Children and Education			Aug-23	Sep-23	N/A	On Track- little or no slippage	With Q1 PMF report. KPIs under review - Independent Chair of the Improvement Board reviewing these alongside DCS and CEO of SCT.	On Track- little or no slippage	With Q1 PMF report. KPIs under review - Independent Chair of the Improvement Board reviewing these alongside DCS and CEO of SCT.
Sandwell Children's Trust	PR.A1.8	KPI's (along with accompanying tolerances) implemented in Q2	Director - Children and Education	Cabinet Member for Children and Education			Sep-23	Dec-23	N/A	On Track- little or no slippage	KPIs and tolerances are currently under review by the DfE appointed independent chair of the SCT Improvement Board and in negotitaion with the DCS and CEO of SCT.	Medium Progress- actual/ projected slippage of 1-2 months	KPIs and tolerances are currently under review by the DfE appointed independent chair of the SCT Improvement Board and in negotitaion with the DCS and CEO of SCT.
Sandwell Children's Trust	PR.A2.0	**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	Focus 2	N/A	N/A	N/A	N/A
Sandwell Children's Trust	PR.A2.3	Assurance action: Feedback provided on a 6 monthly basis on the continuation of regular cross - SMBC/SCT leadership team meetings.	Director - Children and Education	Cabinet Member for Children and Education			Jan	6 monthly Jan July	N/A	Assurance Action	The action is embeded and the last repiort to C&E scrutiny board was Monday 11 September 2023 with further updates timetabled across the municipal year.	Assurance Action	due january 24
Sandwell Children's Trust	PR.A3.0	**Establish corporate approach to working with SCT on shared issues, such as corporate parenting and delivery of Early Help service**	**Director - Children and Education**	**Cabinet Member for Children and Education**			Autumn 2021	Ongoing	Focus 2		Updates provided and there is also the SCT governance structures inc OPB, SPB and Improvement Board supported by a range of senior meetings inc the Cabinet Member, DCS, Chair of the SCT Board, CEO of SCT. N/A		Updates provided and there is also the SCT governance structures inc OPB, SPB and Improvement Board supported by a range of senior meetings inc the Cabinet Member, DCS, Chair of the SCT Board, CEO of SCT. N/A
Sandwell Children's Trust	PR.A3.3	Assurance action- Twice yearly performance reports tabled at Children and Education Scrutiny Board	Director - Children and Education	Cabinet Member for Children and Education			Apr-23	6 monthly	N/A	Assurance Action	Action completed, timetable confirmed and the process is embedded.	Complete	Action completed, timetable confirmed and the process is embedded.
Sandwell Children's Trust	PR.A3.4	Outcomes around early help and corporate parent reporting through PMF at Q1	Director - Children and Education	Cabinet Member for Children and Education			Sep-23	Sep-23	N/a	On Track- little or no slippage	Part of PMF	On Track- little or no slippage	Part of PMF
Effective Local Structures	PR.C1.0	**Review partnership structures within the 'People's sphere'**	**Director - Children and Education**	**Cabinet Member for Children and Education / Cabinet Member for Adults, Social Care and Health**	Director-Adult Social Care Director- Public Health				Focus 2		Action completed since the formation of the overarching 5 Boards.		Action completed since the formation of the overarching 5 Boards.
Effective Local Structures	PR.C1.1	Initiation of Project to review and remodel the pathway between children's and adults' services (preparing for adulthood project)	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		May-23		N/A	On Track- little or no slippage	Benchmarking meetings have now been completed with Dudley MBC and Birmingham City Council re pathway arrangements. Development of benchmarking findings report commenced w/c 18th September. Case file audit and post-17yr referral analysis has commenced. Shortlisting completed for PM post with interview date proposed the 4th October. Meeting has taken place with Claire Mawby Transformation Lead-Care leaver and SEND Emotional Wellbeing and Mental Health Services. Claire is also the SEND Project Manager (3 days) within delivery of the new ecosystem for inclusion which includes a workstreams for PFA and transition ambitions.	On Track- little or no slippage	Benchmarking findings report complete and initial draft shared with Corporate Transformation Manager. Case file audit and post-17yr referral analysis ongoing and on track for completion end of October. PM post interview completed 4th October, post not filled. Corporate Transformation Manager to meet with Directors to discuss future scope of Transitions / PfA pathway in early November.
Effective Local Structures	PR.C1.5	Assurance action: link to PC.C1.4 Receive a quarterly update from DPH and DAS to provide assurance that governance remains in place to test adequacy of partnerships through system-wide thematic deep dives and that any issues are being addressed by the partnership.	Director - Public Health		Director - Adult Social Care		Quarterly	Jan 23 Apr 23 July 23 Oct 23	N/A	Assurance Action	**julys update required**	Assurance Action	ICB in place and MoU signed with ICB around alliance. Workstreams are in place and performance is being scrutinised. All plans are up to date and are working well but this should be reviewed every 6months across DPH, DAS and DCS. Close this assurance action and create a new one for 6monthly review.

		Static data		Owners				Dates		Focus	Progress against plan	Evidence of status rating	October Update Due	
													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	Status (September 2023)	Update (Initial and Date)(September 2023)	Status (October 2023)	Update (Initial and Date)(October 2023)
Effective Local Structures	PR.C1.6	New Assurance action: Receive a 6 monthly update from DPH and DAS to provide assurance that governance remains in place to test adequacy of partnerships through system-wide thematic deep dives and that any issues are being addressed by the partnership.	Director - Public Health		Director - Adult Social Care		6 monthly	April 24 October 24	N/A	Assurance Action	**New assurance action- added october**	Assurance Action	New assurance action- added october
VCS Relationships	PR.D1.0	Relationship with Voluntary & Community Sector (VCS) and Funding to Voluntary & Community Sector.	Leadership Team	Cabinet Member for Communities			Mar-22	Jul-23	Focus 2	N/A	N/A	N/A	N/A
VCS Relationships	PR.D1.3	Consultation on VCS Draft Strategy	Leadership Team			Director - Housing	Jan-23	TBC	N/A	Action on Hold	Report to Cabinet in the Autumn with next steps on developing the strategy	Action on Hold	Annual report on 2022/23 grants produced and shared with Leader, Cabinet Member for Communities and Chair of Budget & Corporate Scrutiny Management. Further work in progress to develop approach for wider VCS engagement. Relationship with VCS continues to be positive - second Cost of Living Summit involved 30 local partner organisations to launch the joint Tackling Poverty Plan
VCS Relationships	PR.D1.4	Approval of VCS Strategy	Leadership Team			Director - Housing	TBC	TBC		Not due to start	Not due to start	Not due to start	Not due to start

This page is intentionally left blank

Improvement Plan Theme Progress Summary October 2023

Theme	Summary	Achievements this period	Key Milestones
Organisational Culture	**Establishing Organisational Culture** **Summary** - One Team Framework has been agreed and is in the process of being implemented across the Council. Launch and Share events with managers have now concluded with positive feedback from managers around the events and the implementation of the values and behaviours. Framework was introduced at all staff briefing in July. People Strategy is in final stages of preparation. - Organisational Health indicators have been reported for 2022-23 and the trends are being used to inform the People Strategy and roll out of the One Team Framework. Employee Engagement Survey conducted in September 2023 to provide a temperature check on culture, with results due to be available in early November. - The Member and Officer relationship continues to be positive and is enabling the Council to move forward with decisions. To support continuous improvement, further insight was collated in Autumn through the Employee Engagement Survey and semi-structured interviews with a sample of Members and Officers.	**October** - Proposal of new approach to Employee performance review presented to Trade Unions **September** - Forward plan of all Member Briefings in place for next 3 sessions - Project plan for launch of One Team Framework- Update of programme containing all workstreams	- Phase 2 Engagement: Determining Desired Culture - March 2023. **Complete** - Approval of document setting out the desired organisational culture - March 2023. **Complete** - Workforce Strategy approved- **Due for approval in November** - Management Development Programme Agreed- **Pilot held in April** - Corporate Induction Revised. **Complete** - Leadership Team review of All Member

Theme	Summary	Achievements this period	Key Milestones
	Progress this month: • People Strategy has been presented to Leadership Team on 17.10.23. Discussions and steer to amend and add some additional points. Also need to incorporate Organisational narrative which is still subject to further consultation. • The workstreams within the strategy continue to be actioned. • Projects to embed the One Team Framework continue to progress as per plan presented to IPRM in September • Proposal of a new approach to Employee Performance Review presented to Trade Unions to commence information and consultation. Change management support and training being developed. • Risk to technical/process recording as Oracle Talent module may not be live until July 2024 • Semi-structured interviews with a sample of Members have been carried out. **Next steps:** • Further meeting planned next month with TUs to continue dialogue on Employee Performance Review? **Issues raised**:	presented to Leadership team **August** • Proposal for Employee Performance Review created with Values embedded • Feedback from launch and Share sessions fed back to leadership • Social Media Policy review complete	briefings - **Meeting held in July** • Processes relating to employment of Chief Officers included in induction programme for committees at start of Municipal Year- **Included in MDP** • Approval of refreshed Member Development Programme for start of Municipal Year. **Complete** • Employee Recognition Scheme launched- **Date tbc** • Guidance in place for effective working with MPs- **August 2023 work commenced** • Social Media policy reviewed- August 2023 **Complete**

Theme	Summary	Achievements this period	Key Milestones
	• OC.A2.1- Workforce strategy amber rated due to slippage on due date. New due date November 2023 to be amended on change control. **Focus 2 Exceptions** • OC.G1.3 **Governance Training and Development- Amber rated** Due May 2024 **Progress commentary:** 23 attendees completed Decision making training in October for key decision makers which included scenario-based learning on procurement and financial regulations, Training material and guidance available to all staff on intranet. Regarding broader scenario-based learning, Officers involved in pulling training across finance, procurement and governance have undergone significant changes of personnel. Next step is still to bring a new project team together to agree training detail and to diarise. Amber rating reflects need to bring project group together and progress the planning. • OC.G1.5 **Delivery of Directorships and Trusteeships Training -** Amber rated Due in July 23. **Progress commentary:** Training carried out 31 October, 20 members attended along with 5 officers The training session was recorded and will be made available for others to view. This **training**		• Corporate Governance Development Programme Agreed – **approach agreed to deliver via scenario-based learning. New Project Group to be formed.** • Delivery of Corporate Governance Programme commences- **Commenced**

Theme	Summary	Achievements this period	Key Milestones
	will be delivered annually. Amber rating reflects that training date is later than originally intended		
Corporate Oversight	**Focus 1** **Customer Journey Programme** **Summary** • Programme governance remains in place. Housing Solutions have carried out a number of process mapping workshops covering the areas highlighted- Adult Social Care, Borough Economy, Housing Options and Revenues and Benefits. A sharing event was carried out 23 August 2023. • The council has collectively (including Housing, Regeneration, Borough Economy) been working to improve the response to cases on the member portal. **Progress this month**: • Meeting with Cabinet Member, Town & Vice Chairs on 2 October 2023, work to date shared on issues raised and	**October** • VERTO user acceptance testing complete **September** • Skills gap analysis complete for financial services and a training programme is now complete and in place- delivery will take place over the next 6 months **August**	• Oracle- Discovery phase complete- Feb 23. **Complete** • Oracle- Modelling phase complete- June 23. **Complete** • Oracle Fusion implemented- April 24. **On track** • Corporate debt recovery processes reviewed- **Complete April 23** • Sign off of 2020/21 accounts **Complete** • Sign off of 2021/22 accounts **Due to be submitted to GT in November**

Theme	Summary	Achievements this period	Key Milestones
	further work planned. Agreed to attend all upcoming Town Meetings to provide feedback to all Members. • Leadership Team are continuing to receive weekly updates on Cllr Portal cases. • Once all Town meetings have been attended, to attend future quarterly meetings to gain any further feedback as an on-going improvement mechanism. • New Ward Co-ordinators have commenced in post and will be working closely with Members to come up with Ward Plans & Priorities and ensure a live action plan is in place for all Wards. • Director of Finance along with ACE has agreed funding will be provided for external support to produce CES, due to limited resources and other commitments. **Next steps:** • Resident engagement to be rescheduled once agreement is reached on external resourcing • Trialling new 'Member stall' event Pre Full Council as a further way to improve Officer/Member relationships and information sharing. • Resident engagement specification work commenced but in early stages for provision of external support. • Customer Service Specification to be finalised.	• Draft State of Borough report received from Economic Intelligence Unit. • Business Planning Framework drafted	• Transformation PMO in place – **Local Partnerships Review complete. Final report to LT due 11 July.** • Corporate PMO in place – **Local Partnerships Review complete. Final report to LT due 11 July** • Verto system implemented – **Commenced** • Corporate Transformation Board operational-ToR and Membership to be re-set following Local Partnerships Review **- Complete**

Theme	Summary	Achievements this period	Key Milestones
	Issues raised: Customer Strategy development showing as amber progress this month due to timeline slippage- external support agreed- specification work to commence. **<u>Resolve Issues relating to the completion and sign-off of final accounts</u>** **Summary** • 2020/21 accounts have been signed off by the auditor with no qualifications. • 21/22 accounts – agreed with Grant Thornton that audit dates will be moved to October to allow more internal quality assurance process before external audit takes place **Progress this month**: • The 2021/22 accounts are in production. The organisation has closedown timetable processes that it adopts for each financial year, and these are being completed having started after the 2020/21 accounts were produced. **Next steps:** • Provision of 2021/22 accounts to Grant Thornton in January.		

Theme	Summary	Achievements this period	Key Milestones
	Issues raised: • No issues raised **MTFP** **Summary** • MTFP projects are being managed within the Corporate Transformation Programme and project management methodology and transformation design principles are being applied. • Work to develop and review MTFS and MTFP for 2024/25 with members conducted over Summer and Autumn 2023, to develop achievable/deliverable savings and a balanced Budget for 2024/25. • Use of benchmarking information to inform services to include in future transformation activities. • Update to MTFS to be presented to Cabinet in November 2023 at same time as seeking approval to commence consultation on proposed savings for 2024/25. **Progress this month**: • Reviews being conducted to identify future transformation opportunities for 2025/26 onwards • MTFS currently being refreshed. • Capital programme being reviewed.		

Theme	Summary	Achievements this period	Key Milestones
	• Approach to consultation on savings proposals being finalised **Next steps:** • MTFS Update approved at Cabinet 1 November 23, due at Scrutiny 16 November 23. **Issues raised**: • No Issues raised **Corporate Transformation** **Summary** • Transformation Design Principles agreed. • Review was held with Local Partnerships and the report is informing the establishment of Corporate PMO. • The Corporate Transformation Board's terms of reference have been revised and regular meetings scheduled. **Progress this month:** • Corporate Transformation PMO establishment on track for completion November 2023 • Verto User acceptance testing complete, refinements underway. Verto launch date for CTO early November. Corporate Transformation Board's focus has been on		

Theme	Summary	Achievements this period	Key Milestones
	establishing progress of current transformational programmes and service reviews, as part of development of the MTFS **Next steps:** • Verto Launch - November **Issues raised:** • No issues raised **Focus 2 Exceptions** • CO.B3.1 **Develop a Continuous Improvement Framework** – **Amber rated** • **Progress commentary:** Service planning approach developed to build corporate agendas and improvement areas into business planning discussion - evidence bundle to include performance, resident feedback, internal audit and risk management to identify improvement activity at service level. Business planning workshops scheduled for November and December 2023. Approach to be reviewed in early 2024 following completion of workshops and business plans; continuous improvement built into service planning and performance management framework.		

Theme	Summary	Achievements this period	Key Milestones
	• CO.D1.1 **Directorate level restructuring** • **Progress commentary:** Senior Leadership Team structure approved at Full Council 24/10/23.		
Strategic Direction	**Focus 1- no focus 1 in this theme** **Focus 2 Exceptions** • **SD.F1.0- Customer Journey Strategy- Amber rated** Due March 24 **Progress commentary:** Director of Finance along with ACE has agreed funding will be provided for external support to produce CES, due to limited resources and other commitments. Specification work commenced but in early stages. Rated Amber as resources have been allocated but timelines will be subject to slippage.	**October** • Narrative workshops to conclude this month • Commercial Project Officer recruited **September** • Narrative workshops held with LGA to inform communications approach • Corporate Procurement Strategy Action plan finalised	Commercial Strategy Approved- **Approved March 23** Regeneration Pipeline: Strategic delivery partner in place- **Cabinet report approved July 23** Approval of Communications and Corporate Affairs Strategy- **Date tbc** ED&I Strategy Approved- September 2024. **On track** Regular Residents' Survey & Budget Consultation in Place – **Contract in place for 2023 and 2024 for**

Theme	Summary	Achievements this period	Key Milestones
		August • Narrative workshops held with LGA to inform communications approach • Corporate Procurement Strategy Action plan finalised	**corporate consultation exercises. Budget consultation completed Summer 2023. Resident's Wellbeing & Perception Survey conducted in Autumn 2023, results due November.** Customer Journey Strategy Approved- **Expected March 2024.** Approval of Medium-Term Financial Plan and Capital Strategy- **Approved February 2023** • HRA 30-year Business Plan approved- **Approved February 2023**
Decision Making	**Focus 1- no focus 1 in this theme** **Focus 2- no exceptions to report**	**October** • Scrutiny committee produced annual	• Leader to confirm Executive's position on any further review

Theme	Summary	Achievements this period	Key Milestones
		report- due at October council	relating to the Wragge and Cox reports –**Complete-**
Procurement & Commercial	**Focus 1- no focus 1 in this theme** **Focus 2 Exceptions** • **PC.C1.1- Performance Management System- Options appraisal- Amber rated Due Oct 23** **Progress commentary**: Options appraisal and business case being finalised, further engagement with service areas being conducted to refine requirements. Amber rated due to slippage of timescales.	**October** • SEND3- Project team identified, launch meeting diarised and ToR agreed. **September** • Implementation of Phase 2 Tech forge complete **August** • Delivery of recommendations for Waste contract complete- lessons learnt booked in following industrial action in June/July 2023	• Waste and Leisure Contracts added to In-tend contract management module- **Steady progress. Additional enhancement work underway** • Street Cleansing Recovery Plan implemented- Ongoing delivery Fleet replacement complete- **Expected end 2023** • SEND Transport Contract Monitoring arrangements in place- **On track** • SEND3 procurement commences – **Complete**

Theme	Summary	Achievements this period	Key Milestones
			- Corporate Performance Management System in place- **Options appraisal due October** - Lion Farm - Report to Cabinet on determination of position of developer- **Transferred to 'business as usual' management** - Arrangement in place for future delivery of leisure services- **Complete** - Phase 2 Tech Forge implemented- **Complete**
Partnerships & Relationships	**Focus 1- no Focus 1 in this theme** **Focus 2 Exceptions** PR.A1.8- Sandwell Childrens Trust- KPI's (along with accompanying tolerances) implemented in Q2- Amber rated. Due Dec 23.	**October** Benchmarking findings report complete for the project to review	Review of SCT (Sandwell Children's Trust) Contract concludes- - **complete. 2**

Theme	Summary	Achievements this period	Key Milestones
	• **Progress commentary:** KPIs and tolerances are currently under review by the DfE appointed independent chair of the SCT Improvement Board and in negotiation with the DCS and CEO of SCT. • **PR.D1.3- Consultation on VCS (Voluntary and Community Sector) Draft Strategy- On hold** **Progress commentary**: Annual report on 2022/23 grants produced and shared with Leader, Cabinet Member for Communities and Chair of Budget & Corporate Scrutiny Management. Further work in progress to develop approach for wider VCS engagement. Relationship with VCS continues to be positive - second Cost of Living Summit involved 30 local partner organisations to launch the joint Tackling Poverty Plan	and remodel the pathway between children's and adult's **September** • Preparing for Adulthood Project- Benchmarking meetings completed with Dudley MBC and Birmingham City Council **August** • The Initial findings report for Preparing for Adulthood Project shared with the Preparing For Adulthood Project Board in July	**remaining KPIs under discussion.** • Transitions Project Commences- **Project commenced and 'as is' modelling started in May. PM recruitment out to advert.** • Transitions Project incorporated within Corporate Transformation Programme- **Complete** • VCS Strategy approved- **On hold**

This page is intentionally left blank

Appendix 3 – Statutory Recommendation Status Summary October 2023

Statutory Recommendation	Summary	Milestones
S1 - It is imperative that senior officers and senior members take effective corporate grip of long-standing service issues highlighted by the findings in this report (including SLT, SCT, the waste service, the ERP system, and Lion Farm) and prioritise corporate effort in managing the issues identified and embed the solutions into the Council	**Organisational Culture** **Assurance Activity to ensure effective contributions of Scrutiny and Audit and to sustain positive Officer and Member Relationship.** • The ongoing mechanisms for insight and assurance around the Officer Member Relationship include views from external reviews, standards cases, feedback from Directors, Group Leaders and Chief Whips. • New Member sessions will be held with the LGA to bring them up to speed on the content delivered in Autumn 2022 to other Members. • Semi-structured interviews with Members carried out early October. The data will feed into LGA sessions planned for January, delayed due to LGA availability, alongside regular insight. Ongoing approach to be determined following those results **Corporate Oversight** **ERP** • Modelling phase complete- Programme Board on 21st Sep provided approval for: Gateway 2 Exit from Modelling Phase for HR & Payroll. • Gateway 3 Exit from Realisation Development Phase and entry to SIT (Systems Integration Testing) for Finance, EPM and Procurement. • The programme will continue in to work in a phased approach with SIT commencing on time on 25th September. • Finance and Procurement will go-live in April 2024. • HR & Payroll will go-live in July 24.	• Oracle Fusion Implemented- Modelling phase complete. Next phase to focus on realisation phase/development stage. Go live date April 2024. • Regeneration pipeline: strategic delivery partner in place – Cabinet approval to procure July 2023 Completed milestones: • Review of SCT Contract concludes- Complete • Review of scrutiny arrangements- Complete • Approval of any changes to scrutiny (if required following review)- Complete • Termination notice for SLT contract approved by Cabinet- complete • Revised contract governance arrangements in place for Serco contract- complete

Statutory Recommendation	Summary	Milestones
	- Benefit rationalisation taking place across the Programme workstreams following completion of Design Phase. - Benefit profiles will be developed and baselined ahead of Go-Live. - Working group established with Heads of Services to progress financial benefits. **Strategic Direction** **Strategy Development and Refresh** **Regen Strategy and Pipeline**: Pipeline 6 monthly update presented to Cabinet July 23. - Regeneration pipeline- approval to procure a strategic delivery partner was agreed at Cabinet in July 23. Report will return to Cabinet once procurement has been successful. - VERTO- build is currently underway. User Acceptance Testing complete and Go live anticipated for November. **Decision Making** No actions in this theme **Procurement & Commercial** **Waste Contract:** - Continuation of quarterly corporate monitoring through PMF. - Annual reports on Leisure and waste due November 2023 - Work continues with Intend – scheduled go-live end October - Waste Contract Review reported to Leadership Team. Proposed to progress "Shared Improvement Plan" with Serco. - Lessons Learned on industrial action has commenced	- Waste and Recycling Recovery Plan Implementation - Complete - Street Cleansing Recovery Plan approval – Resubmission to Waste Management Board in - Complete - SERCO contract performance reporting embedded in Performance Management Framework - Complete - Option appraisal for future leisure management options – Complete - Scrutiny work Planning event - Complete - Procure new support provider to deliver Oracle Fusion-complete - Approval of Regeneration Strategy and Pipeline- Complete - Early Help Strategy approved and launched- Complete - Corporate Parenting Strategy Refresh Approved- Complete - SEND Transport procurement published- complete - SMBC/SCT Leadership meetings - Complete

Statutory Recommendation	Summary	Milestones
	• Next tranche of fleet replacement remains due end of 2023. **SEND Transport:** • Project Team members identified, launch meeting diarised and Terms of Reference's to be agreed • SEND 3 to be a strand of the overall transformation plan. Task & Finish Group to drive delivery. • Report findings to be considered by Transformation Project Team with agreed recommendation embedded in SEND 3 **New System Procurement:** • **Performance Management System-** Systems demos have taken place. Options appraisal and business case being finalised, further engagement with service areas being conducted to refine requirements. • **Asset Management -** The phase two for Techforge implementation has now been completed. The team have undertaken a project closedown exercise detailing everything that has been competed across both phases along with any workstreams/actions that will now become business as usual. **Lion Farm:** • Expert Determination process has been completed and removed from the Improvement plan to be managed as Business As Usual. **Leisure Contract:** • Supplementary agreement with SLT agreed 13.07.23 to extend SLT's operation of leisure centres (including SAC) to 31.03.27.	• SCT Contract performance reporting embedded within Council PMF-Complete

Statutory Recommendation	Summary	Milestones
	• Enhanced contract management regime and framework in place. • Aquatic Centre Handover to operator (Sandwell Leisure Trust) took place as scheduled on 13 July, open to the public 24 July • Continuation of quarterly corporate reporting through PMF. **<u>Partnerships & Relationships</u>** **Sandwell Children's Trust** • The new KPIs along with accompanying tolerances will be finalised in Q1 for implementation in Q2 due to start in September 2023 • Continuation of quarterly reporting through PMF alongside Sandwell Children's Trust governance arrangements • Monthly schedule of meetings will recommence in Autumn Term, and include the Chair of SCT Board and CE of Trust, Lead Member and Director of Education and Childrens Services • KPIs and tolerances are currently under review by the DfE appointed independent chair of the SCT Improvement Board and in negotiation with the Director of Children's Services (DCS) and CEO of Sandwell Children's Trust.	
S2 - The Council must ensure that the learning in relation to commercial decisions, procurement and contract management highlighted in this report are	**<u>Organisational Culture</u>** **Officer Learning and Development** • Value embedding on existing learning is on-going. • Senior Leadership development programme: Further discussions around scope and desired outcomes required and to align to Leadership restructuring plans. Research into potential providers and good practice from other councils has been explored. **Embedding Constitutional Changes**	• Corporate Governance Training Delivery –Commenced and approach to next phase agreed Completed milestones • Regular Resident Survey in place – 2023 surveys in place • Commercial Strategy approved – approved

Statutory Recommendation	Summary	Milestones
understood through the organisation	• Decision making training in place early October for key decision makers. • Regarding broader scenario-based learning, Officers involved in pulling training across finance, procurement and governance have undergone significant changes of personnel. • Next step is bringing a new project team together to agree training detail and to diarise. Intention to deliver in November/ December. • Delivery of Directorships and Trusteeships Training -Date confirmed 31st October. Offer to be extended to Officers with council appointments to boards etc and will be carried out on an annual basis • CIPfA to carry out the Annual refresher of Corporate Governance Training scheduled to the end of December. **Member Learning and Development** • Leadership Team conversation held 18/07/23 around All Member briefings and agreed level of detail to be shared and approach. • New Member survey conducted. 1 return. Members have been completing analysis after each training session. Further analysis of these training evaluation forms will be undertaken and this, along with findings from face-to-face Member sessions on the Member-Officer relationship and engagement with LGA will be used to inform the Autumn review of MDP and inform new Member induction for 2024-2025. MDP Review will commence in November. • New Member sessions will be held with the LGA to bring them up to speed on the content delivered in Autumn 2022 to other Members. **Corporate Oversight**	• HRA 30 Year Business Plan approved • Revised Financial Regs - approved • Implementation of Asset Management System -phase 1 complete • Revised Scheme of Delegation – approved • Corporate Asset Management Strategy Approved- Approved • Budget Holder Role Profile agreed - Complete • Establish Performance Management Framework – Complete • First Performance Management Report - - Complete • Revised PCR, and Sale of Land and Buildings Protocol – Complete • New Member Induction- Complete • Member Development Programme - Complete and BAU • Asset Management System Procured- complete

Statutory Recommendation	Summary	Milestones
	Performance Management • Quarterly reporting of corporate performance management framework in place to senior officers and members via Cabinet and Budget & Corporate Scrutiny Management Board. Q2 report due to Scrutiny and Cabinet in January 2024. • Corporate Performance Management resources in place from February 2023. • Budget pressures and mitigations are discussed at LT each month • Benchmarking used in budget planning up to date and used as part of refresh of MTFS and planning for 2024/25 budget onwards. **Strategic Direction** **Strategy Development and Refresh** • Commercial Strategy: Engagement with staff on the corporate narrative will conclude this month. All staff briefing being held to update colleagues on the progress of the improvement plan and the next step. The 4 workstreams are at various stages. Education commercial services – BC in development, completion date end of October, H&S – scoping underway Neutral vendor – Pre OBC activity due to commence. Pest control – alternative options been considered. Updates to be presented at next Corporate Transformation Board • Engagement with staff on the corporate narrative will conclude this month. All staff briefing being held to update colleagues on the progress of the improvement plan and the next steps on how we become an outstanding council as we get ready for exiting intervention. **Procurement & Commercial**	

Statutory Recommendation	Summary	Milestones
	Corporate Asset Management: • Phase 1 implemented. • Phase 2 commenced. The integration of data into the system complete • Phase 2 Configuration and organisation of data completed – September • Project closedown exercise complete detailing everything that has been competed across both phases along with any workstreams/actions that will now become BAU. **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 they operate in line with the Council's values, codes, policies, and procedures, and that there is zero tolerance to inappropriate	**Organisational Culture** **Establishing Organisational Culture** • Workforce Strategy themes and priority documents on track for Leadership Team 17.10.23. • Projects to embed the One Team Framework continue to progress as per plan presented in September • Proposal of a new approach to Employee Performance review presented to Trade Unions to commence information and consultation. Change management support and training being developed. • Risk to technical/process recording as Oracle Talent module may not be live until July 2024 •	• Workforce Strategy – Due to be agreed at October Leadership Team. Completed milestones • Organisational Culture – Part 2 Engagement – determining the desired culture – complete • Approval of document / statement setting out desired organisational culture – 'Our Values: Our Behaviours'- Complete

Statutory Recommendation	Summary	Milestones
behaviours. This includes changing the organisational culture in relation to complaints so that they restore balance and proportionality.	**Officer Learning and Development** - • Senior Leadership development programme: Further discussions around scope and desired outcomes required and to align to Leadership restructuring plans. Research into potential providers and good practice from other councils has been explored. **Officer and Member Relationship** • The ongoing mechanisms for insight and assurance around the Officer Member Relationship includes views from external reviews, standards cases, feedback from Directors, Group Leaders and Chief Whips. • Semi-structured interviews with Members early October are being conducted to capture insight into relationship. The data will feed into LGA sessions planned for January 2024 alongside regular insight. Ongoing approach to be determined following those results • Sessions with LGA will be confirmed following the insight gathering on Employee Engagement Survey and Member face to face sessions. LGA sessions planned for January, delayed due to LGA availability, alongside regular insight. • New Member sessions will be held with the LGA to bring them up to speed on the content delivered in Autumn 2022 to other Members **Member Learning and Development**	• Organisational Culture - Part 1 Engagement – Starting the Conversation- Complete • New Member Induction - Complete • Meeting structures to support Senior Leadership (Officer and Member) – Complete • Member Development Programme approved- Complete

Statutory Recommendation	Summary	Milestones
	- Forward plan of all Member briefings is in place for next 3 sessions. Agendas are routinely discussed by Leadership Team - New Member survey conducted. 1 return. Members have been completing analysis after each training session. Further analysis of these training evaluation forms will be undertaken and this, along with findings from face-to-face Member sessions on the Member-Officer relationship and engagement with LGA will be used to inform the Autumn review of MDP and inform new Member induction for 2024-2025. MDP Review will commence in November. - New Member sessions will be held with the LGA to bring them up to speed on the content delivered in Autumn 2022 to other Members. **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	

This page is intentionally left blank

Appendix – Scrutiny & Audit Recommendation Status Summary October 2023

Grant Thornton Key Recommendation 7 (2021): 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	
External Follow-up Reviews 2022 Findings	Grant Thornton acknowledged the progress of the Member Development Programme and noted that it has been augmented with additional training sessions delivered by the LGA (Local Government Association) focusing on the Member and Officer Relationships, and in delivering a development programme for Cabinet. In their follow-up review, Grant Thornton made a further recommendation in relation to the Member Development Programme as a whole but did not make any points around learning and development in relation to scrutiny specifically, as they acknowledged the improvements made. The recommendation made by Grant Thornton relating to the MDP (Member Development Programme) was: **Improvement Rec 19 (2022):** The Council needs to build on the progress being made on member development and conclude the 2022/23 programme including the review of member PDPs and take further steps to finalise arrangements on succession planning for members in SRA roles. The LGA commented on the council's commitment to review the member development programme at regular intervals and set out that it is important to ensure that the pace of delivery is made to feel sustainable. The LGA follow-up review acknowledged that the improvements to scrutiny have been supplemented with a range of training.
Summary of activity and next steps	The current MDP has been updated to reflect the review of Member PDPs and updated arrangements for new Member Induction following the number of new Members elected in May. A new Member survey is being conducted, however, there has been a low return rate as yet. Members have been completing analysis after each training session. Further analysis of these will be undertaken and this, along with findings from face-to-face Member sessions on the Member-Officer relationship and engagement with LGA will be used to inform the Autumn review of MDP and inform new Member induction for 2024-2025. A review will commence in November.

Scrutiny Members' and ARAC Committee Members' learning needs remain under review by the Chairs together with supporting Officers. Scrutiny Chairs are also receiving coaching and mentoring training from external providers. A learning and development plan for audit members is currently being drafted to ensure that key skills needed for the role is clear. This is linked in with CIPFA's 'Audit committees: practical guidance for local authorities and the police' guidance.

Over Municipal Year 2022-23, a regular survey was offered to Audit and Scrutiny Members and Officers attending. This included questions around Learning and Development received and any new needs arising to help ensure that the Member Development Programme is flexible to meet emerging needs. Discussions are underway around the continuation of the survey for Municipal Year 2023-2024 and has thus far been helpful in identifying any gaps in learning or identifying where improvements can be made. Work is being mapped out on the member officer insight mechanism including surveys and face to face interviews where required.

Further training with external providers is being explored including with neighbouring authorities to ensure shared learning and the opportunity to engage with peers to discuss new ways of working.

Grant Thornton Improvement Recommendation I4 (2021): 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	
External Follow-up Reviews 2022 Findings	Grant Thornton acknowledged that the 'forward plan of Cabinet business has been made available to all members to improve awareness and transparency.
Summary of activity and next steps	The forward plan is shared with all scrutiny boards (in so far as it relates to that respective scrutiny board) to help identify areas for pre-decision scrutiny activity and to ARAC at every meeting to assist with the Committee's work planning. This will continue.

Grant Thornton Improvement Recommendation 12 (2021): 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 ask the right questions	
External Follow-up Reviews 2022 Findings	Positive feedback was received about scrutiny and audit in the follow up reviews. In their follow up review Autumn 2022, Grant Thornton set out that 'There is a more mature engagement between the Leader, Cabinet, Committee Chairs and senior officers, supporting good planning and work programming across the different committees across different Council committees and a greater level of professionalism in how business is conducted by these committees.'... and 'Overall, positive progress has been made to improve the culture and professionalism of key Council committees, with the scrutiny function making particular progress.' The LGA commented that 'it is clear from the people we spoke to that this key strand of the council's governance arrangements [scrutiny] is going from strength to strength'. And commented on scrutiny's 'renewed sense of energy and drive'. Grant Thornton did not make any further recommendations around the role of scrutiny or audit.
Summary of activity and next steps	Ongoing activity is in place to ensure that scrutiny and audit continue to make an effective contribution to the Council's governance arrangements. This includes the regular meetings to develop and nurture strong, healthy working relationships with members and officers. Chairs of scrutiny boards have regular agenda setting meetings with Directors and officers to ensure that the content of reports enables a rich discussion and debate at Scrutiny and not just information sharing. Scrutiny Board chairs collectively are meeting regularly, whether it is a pre-meeting or prior to Cabinet to agree lines of questioning in advance as well monitoring performance of Boards, attendance, engagement, etc. Audit are having pre meetings and work is ongoing to ensure shared learning and cross cutting areas are discussed at regular meetings between the overarching Chair of Scrutiny and the Audit Chair as well as regular meetings with the Chair of Audit and the Section 151 Officer.

	Job roles, scrutiny protocols and a framework have been developed and embedded to guide the way scrutiny is conducted, details how Cabinet members and officers interact with scrutiny and also helps to support and drive a change in culture and mindset of both members and officers to ensure that Sandwell has an effective overview and scrutiny function. A learning and development plan for audit members is currently being drafted to ensure that key skills needed for the role is clear and members of ARAC can work towards the skills identified as part of their PDP. These arrangements will continue over Municipal Year 2023-2024.

Grant Thornton Improvement Recommendation 34 (2022): Audit Committee – now that the Audit and Risk Assurance Committee has agreed the action to bring this long-standing matter to resolution [review into the Cox and Wragge Report], it will be important that – as the Audit and Governance Panel recognised – the Council manages its position so that the matter does not resurface, so that it can move on and focus on its corporate objectives	
External Follow-up Reviews 2022 Findings	In their follow up review, Grant Thornton outlined that: 'The Audit Committee has continued to operate throughout the year in a manner focussing on significant governance matters' and that 'Overall, we found no evidence of any significant weaknesses in the Council's arrangements for ensuring that it makes informed decisions and properly manages its risks'. Grant Thornton noted that the Council Leader is due to confirm the Executive's position on any further review and made an additional improvement recommendation as follows: Grant Thornton Improvement Recommendation 22 (2022): A final decision on the Cox report needs to be made by the Leader before this matter can be considered formally closed.
Summary of activity and next steps	A report was received by ARAC on 5 June which set out the Executive's position and the matter has been concluded. The ARAC minutes were reported to Council in July 2023.

This page is intentionally left blank

Summary of Changes to the Improvement Plan – October 2023

IPRM Decision Required: To agree changes to the Improvement Plan as set out in detail in the accompanying change control log and as summarised below.

1. The Improvement Plan is intended to be a live document updated to take account of progress and relevant changes. Changes are considered by Leadership Team on a quarterly basis.

2. The list of all changes is attached. Where new actions have been added to the Improvement Plan, these are displayed within the monitoring tool with red font colour.

3. The changes proposed are summarised as follow:

- 3 changes made to action delivery timescales (with 1 being more than three months)

Ref	Theme	Action ref	Action Title	Date from	Date to	Rationale
324	Organisational Culture	CO.D3.4	Programme of end to end process reviews	May 23	Nov 23	C.co report due 4.11.23 re future model.

- 1 assurance action has been added
- 7 sub-actions have been added (marked in red within IP).
- 4 main actions are proposed to be closed (see below- 2 action closures will result in closure of workstream)

- 3 Assurance actions are proposed to close (see below)
- 3 changes to delivery lead

4.   The actions proposed to be closed along with the rationale are as follows:

Change Ref	Theme	Action Title	Rationale for closure
322	Strategic Direction	Refresh the Early Help Strategy	Proposal to remove from IP on basis that Early Help Partnership Board is in place and conducted an annual review, and KPIs included within PMF.
315	Partnership & relationships	Assurance action: Receive a quarterly update from DPH and DAS to provide assurance that governance remains in place to test adequacy of partnerships through system-wide thematic deep dives and that any issues are being addressed by the partnership.	Proposal to lose this assurance action and create a new one for 6monthly review
325	Corporate Oversight	Assurance Action: GT sign-off of 2020/21 Accounts (assurance that previous issues raised have been resolved)	Propose closure of assurance action- action complete
332	Partnership & relationships	Assurance action- Twice yearly performance reports tabled at Children and Education Scrutiny Board	Action completed, timetable confirmed, and the process is embedded.

333	Procurement & Commercial	Asset management	Phase 2 Techforge implemented. Impact will be monitored through the completion of accounts strand
334	Strategic Direction	Closure of workstream and main action- Regen pipeline development and Delivery	actions complete- Continued monitoring through updates presented to Cabinet.
335	Procurement & Commercial	Closure of workstream and main action- Governance arrangements to manage, develop and support the current and future delivery of leisure services across the borough, including the new Aquatic Centre	All actions complete- report was taken to Cabinet October 23 and can now be taken off IP monitoring tool.

Improvement Plan Risk Register

October 2023

1. Best start in life for children and young people

2. People live well and age well

3. Strong resilient communities

4. Quality homes in thriving neighbourhoods

5. A strong and inclusive economy

6. A connected and accessible Sandwell

Risk Ref	Risk Title and Description	Previous Risk Score (July 23)	Current Risk Score (Oct 23)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
IP1	**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 and/or that there is unclear ownership of actions and workstreams, then the programme will proceed with no clear direction, may become unmanageable (incl. scope creep), and/or missed opportunities resulting in slower progress than planned, failure to meet external review recommendations and a prolonged Government intervention	6 (Green)	6 (Green)	3 (Green)	⬄	**Current and Ongoing Controls** • 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 • Objectives for each Theme within the Improvement Plan identified • Regular reporting to Cabinet, ARAC and Scrutiny in place. Council approval of Improvement Plan and reports to SoS. • Regular Staff communications on progress of Improvement Plan in place • Improvement Plan Actions embedded into Corporate Plan and Business Plans to provide assurance of sustainable improvement • Key components of Finance Improvement Plan embedded in IP and Corporate Plan • All Improvement Plan actions have an identified Responsible Officer and Cabinet Member • Arrangements in place to provide business continuity following SH & GD departure **Further Actions** • Communications Plan delivered including all staff briefings including key messages around Improvement Plan • Staff and member engagement through Organisational Culture change programme
IP3	**Allocation of sufficient resources to project management and project delivery/ maintaining Business as Usual while delivering the Improvement plan**	8 (Amber)	8 (Amber)	4 (green)	⬄	**Current and Ongoing Controls** • Terms of Reference for internal Improvement Plan Review Meeting updated to reflect government intervention, single Improvement Plan and assurance framework • PMO support being provided by existing experienced resources within Service Improvement

Risk Ref	Risk Title and Description	Previous Risk Score (July 23)	Current Risk Score (Oct 23)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
	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.					• 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 reviewed monthly by Leadership Team and Register maintained • Appointment of interim corporate transformation capacity to establish programme and project management governance arrangements, as well as moving forward key transformational activity • Improvement Plan Actions embedded into Corporate Plan and Business Plans to provide assurance of sustainable improvement • Local Partnerships Review of PMO concluded **Further Actions** • LT work on prioritisation to conclude to ensure that the improvement priorities are clear and resources are available to manage risk of officer fatigue and loss of motivation. • Establishment of resourced Corporate PMO • National Graduate Development Scheme - placements to be focused on IP priorities
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	6 Green	3 (green)	⟷	**Current and Ongoing Controls** • Appointment of additional capacity to support delivery and implementation of key projects taken place in Asset Management, Finance, Service Improvement and Legal Services • Terms of Reference for Improvement Plan Review Meeting in place • Governance approach included within Council report 07/06/22 • Risk identification has taken place • Agreement for Grant Thornton, LGA and CIPFA to review progress regularly • Improvement Plan Risk Register in place • Terms of Reference for internal Improvement Plan Review Meeting updated to reflect government intervention, single Improvement Plan

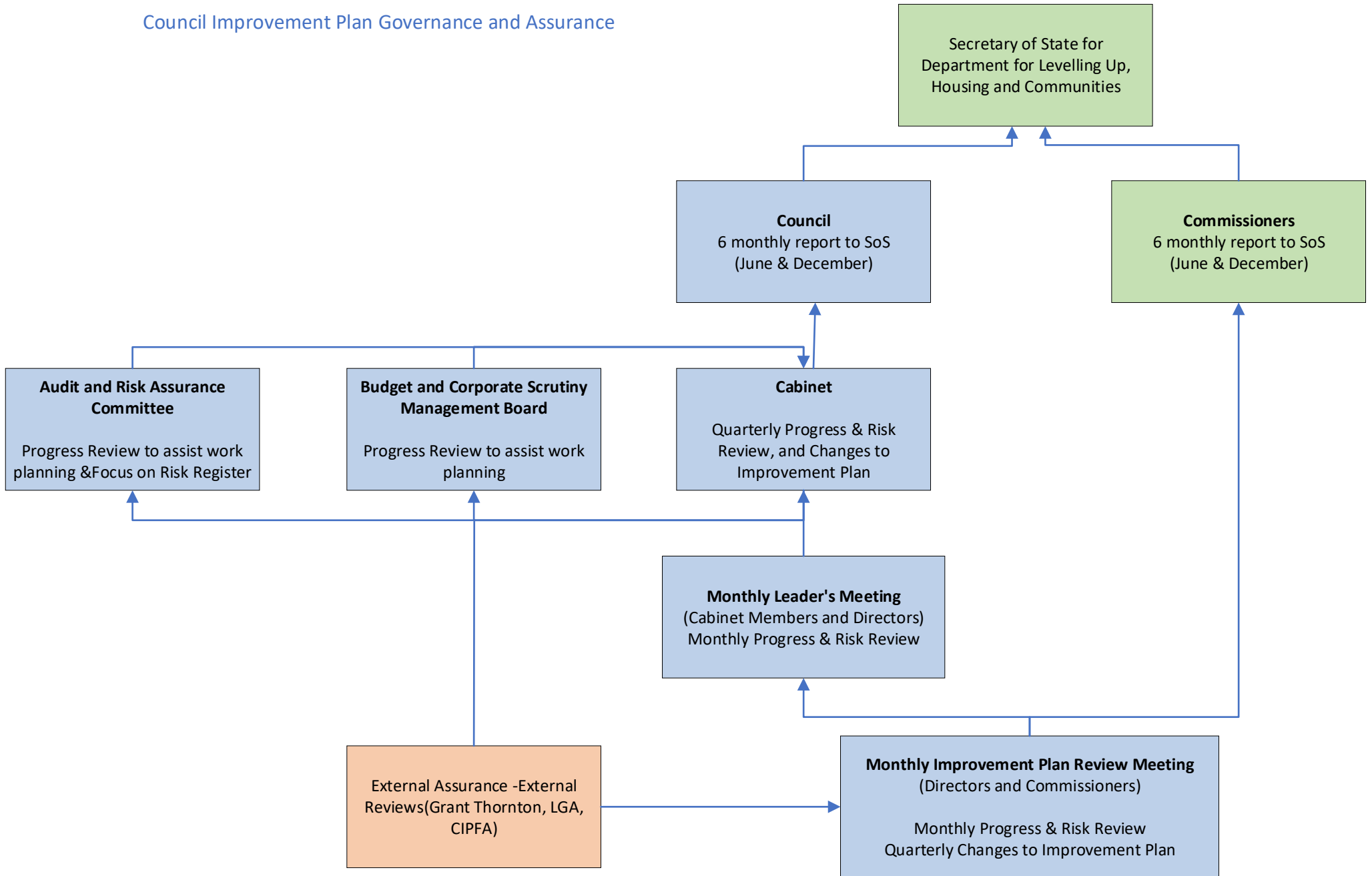| Risk Ref	Risk Title and Description	Previous Risk Score (July 23)	Current Risk Score (Oct 23)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
						and assurance framework including role of Scrutiny and Audit Committees. • Roles of Cabinet, Scrutiny and Audit agreed with Chairs • Quarterly reports to Cabinet, Audit and Scrutiny well-established and on forward plan for 2023-24 • Scrutiny consideration of culture theme progress in Dec 22 • Consideration of external review reports by Scrutiny and Audit • Update to Improvement Plan to reflect findings from GT, LGA and CIPFA follow-up reviews **Further Actions** • Scrutiny regular review on Culture Theme progress • Agreement for ongoing external assurance activity
IP5	**Communication Strategy**-If a robust communications strategy is not put in place detailing how, when and what information is shared with the various internal and external stakeholders, then not everyone will be aware of their respective roles and responsibilities for delivering the improvement plan and effective service delivery. In addition, the DLUHC may lose confidence in the council's ability to improve resulting in extended/ additional intervention.	8 (Amber)	8 (Amber)	4 (green)	⟷	**Current and Ongoing Controls** • Review visits from GT, LGA and CIPFA held Autumn 2022. Reports received from GT and LGA and presented to Cabinet. Review report from CIPFA received Jan 23 and presented to ARAC. Due to be presented to Cabinet and Scrutiny in March • Communications Approach set out in Improvement Plan approved by Council 07/06/22 • Key messages document for stakeholders in place • Regular PMO/Communications meetings to ensure key messages are embedded within internal and external communications • Communication with stakeholders to share details of transition between KBD and SL. • Communication with stakeholders to share progress update and annual report June 2023. **Further Actions** • Communication with stakeholders to share details of Improvement Plan • Recruitment to vacancy within comms structure

Risk Ref	Risk Title and Description	Previous Risk Score (July 23)	Current Risk Score (Oct 23)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
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.	8 (Amber)	8 (Amber)	8 (Amber)	⟷	**Current and Ongoing Controls** • Regular comms with stakeholders taking place as per comms plan including incorporation in all staff briefings • Resource gaps / pressures associated with actions within the Improvement Plan identified • Council on 07/06/22 approved use of Improvement & Capacity Reserve and 2021/22 underspend allocated to Improvement Plan actions • Resource issues and risks associated with the Improvement Plan reviewed monthly by Leadership Team • Appointment of interim corporate transformation capacity to establish programme and project management governance arrangements, as well as moving forward key transformational activity • Regular monitoring of improvement plan is in place and key milestones are being delivered **Further Actions** • Review resource allocation to deliver the Improvement Plan and determine if there are any gaps • Identify additional resources or reprioritise activity following identification of resource gaps • Graduate recruitment to focus on IP priority projects
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.	4 (Green)	4 (Green)	4 (Green)	⟷	**Current and Ongoing Controls** • Performance Management Framework approved in April 2022 • Evidence of success outlined within each of the Improvement Plan themes focusing on outcomes for each theme • Improvement Plan Monitoring approach approved by Council and regular monitoring in place • Resources approved by Council to address staffing resources required to sustain PMF • 2022/23 Quarterly Corporate Performance Report presented to Cabinet and Scrutiny (Q1 Sept/Oct 22, Q2 Dec 22/Jan 23) • Residents Survey and Budget Consultation exercise conducted in Summer 2022 to feed into PMF and 2023/24 service and financial planning

Risk Ref	Risk Title and Description	Previous Risk Score (July 23)	Current Risk Score (Oct 23)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
						• Process in place for monthly and quarterly monitoring at corporate level • Corporate approach to consultation and engagement with residents, including regular residents survey agreed by Leadership Team. • Member Officer Survey conducted to provide a temperature check on the relationship • Improvement Plan activity embedded in Corporate Plan and Business Plans • Refreshed KPIs included in Corporate Plan refresh and streamlined reporting to Leadership Team (from Q1 report) • Development of Customer Experience metrics as part of Corporate Plan refresh **Further Actions** • Evidence collation to be produced to support IP • Recruitment to additional corporate performance team posts • Performance Management System options appraisal and procurement to provide capability for performance management • Refresh of Member Officer Survey / alternative mechanism conducted to provide a temperature check on the relationship
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.	4 (Green)	4 (Green)	4 (green)	⟺	**Current and Ongoing Controls** • Assurance from LGA CPC Follow up Review around development of PMF • Improvement Plan contains activity to be concluded, and lessons learnt embedding from historic issues • Cabinet and Leadership Team approach to historic issues • Regular monitoring of improvement plan is in place • Progress on GT recommendations specifically related to the proper functioning of Scrutiny and Audit Committees. • Lessons learnt captured in relation to SEND transport • Leader has confirmed executive's position in relation to a further review in relation to Wragge/Cox and this was reported to ARAC in June 2023

Risk Ref	Risk Title and Description	Previous Risk Score (July 23)	Current Risk Score (Oct 23)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
						Further Actions • Lessons learnt framework to be introduced as part of continuous improvement plan. Lessons learnt to be collated relating to historic issues and shared across organisation • Maintain watching brief of council activity to ensure resources are not diverted to historical issues
IP12	**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.	6 (Green)	6 (Green)	6 (Green)	⇔	**Current and Ongoing Controls** • Grant Thornton follow up review of progress against historical issues • Corporate risk scoring definitions applied • Definition in place for progress monitoring Red/Amber/Green progress monitoring for Improvement Plan • Roles of Scrutiny and Audit confirmed • Reports to Scrutiny and Audit Committees presented in September 2022 • PMO reviewed use of RAG ratings for consistency and to ensure that progress monitoring is presenting a realistic view and reflecting risk associated with actions as well as progress against plans (September 2022). **Further Actions** • Regular reporting to Cabinet, Scrutiny and ARAC and Commissioners' views
IP13	**Constitutional Changes** If key governance changes (agreed during 2022) are not embedded throughout the organisation and put into practice, then opportunities will be missed, progress will be limited, and there may be non-compliance with council processes.	9 (Amber)	9 (Amber)	6 (Green)	⇔	**Current and Ongoing Controls** • GT, LGA, and CIPFA follow up reviews provide assurance • Alignment of workstream with organisational culture theme through Officer participation in Culture Working Group • Revised set of guidance and templates in place to support the changes made around key decisions • First round of training delivered to budget holders and procurement card holders in relation to spend thresholds and procurements processes. • New Scrutiny Handbook launched • New EIA guidance issued for decision-making • Sub-delegation schemes developed with Directors

Risk Ref	Risk Title and Description	Previous Risk Score (July 23)	Current Risk Score (Oct 23)	Target Risk Score	Direction of Travel	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk)
						• Member Development Plan Refreshed • Decision-making arrangements (forward plan, report sign off etc.) reviewed. • Governance Review Phase 2 project plan in place to embed the constitutional changes (Corporate Governance Development Programme) **Further Actions** • Implement Phase 2 of Mod.Gov • Implement a programme of learning for Officers around effective-decision making • Development of local KPIs to monitor performance in relation to decision-making e.g. timeliness of report submissions, publication of reports, use of exemptions, forward plan notice given on time. • MDP Delivery • Monitoring of local KPIs (once introduced)

Council Improvement Plan Governance and Assurance

Secretary of State for Department for Levelling Up, Housing and Communities

Council
6 monthly report to SoS
(June & December)

Commissioners
6 monthly report to SoS
(June & December)

Audit and Risk Assurance Committee

Progress Review to assist work planning &Focus on Risk Register

Budget and Corporate Scrutiny Management Board

Progress Review to assist work planning

Cabinet

Quarterly Progress & Risk Review, and Changes to Improvement Plan

Monthly Leader's Meeting
(Cabinet Members and Directors)
Monthly Progress & Risk Review

External Assurance -External Reviews(Grant Thornton, LGA, CIPFA)

Monthly Improvement Plan Review Meeting
(Directors and Commissioners)

Monthly Progress & Risk Review
Quarterly Changes to Improvement Plan

This page is intentionally left blank

![Sandwell Metropolitan Borough Council logo]

Audit and Risk Assurance Committee

23 November 2023

Subject:	Strategic Risk Register Update Report
Director:	Interim S151 Officer Brendan Arnold
Contact Officer:	Audit Services and Risk Management Manager Peter Farrow peter_farrow@sandwell.gov.uk

1 Recommendations

1.1 To note and comment on the update to a number of strategic risks that were under review at the time of the last committee meeting in September 2023.

2 Reasons for Recommendations

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

2.2 The role of the Audit and Risk Assurance Committee is to help provide assurance to the Council that it has a system of governance, risk management and internal control in place and that the adequacy and effectiveness of these arrangements continue to inform decision making.

ONE COUNCIL
ONE TEAM

3   How does this deliver objectives of the Corporate Plan?

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

4   Context and Key Issues

4.1   The Council's Strategic Risk Register was last presented to the committee at its September 2023 meeting. At that time a small number of risks were being subject to a wider review and it was agreed that an update on these risks would be presented to the November meeting of the committee.

4.2   This report brings the committee up to date on those specific risks. Since the last review, the previous risks around the Medium Term Financial Plan and Resource Allocation, Future Government Policies and Funding Sources and Inflation have been absorbed into one wider Medium Team Financial Strategy, Central Government Funding and Resource Allocation risk, and a new risk has been added regarding the completion of the council's Statement of Accounts.

4.3   An update on the risks that were under review at the time of the last committee, including the measures in place to mitigate them are included within Appendix A.

ONE COUNCIL
ONE TEAM

4.4   The full Strategic Risk register will be reported to the next meeting of the committee.

5   Alternative Options

5   Whilst this report does not require a decision and therefore, alternative options do not need to be considered, when measures are being considered for the mitigation of each of the strategic risks, this takes into account any alternative options available.

6   Implications

Resources:	The authority's budget planning process incorporates financial and other resources required to manage the authority's risks and deliver the priorities within the corporate plan.
Legal and Governance:	There are numerous standards applicable to the management of risk within the local authority sector. Included amongst these is guidance from CIPFA/Solace, the British Standards Institute (BSI) and a set of joint standards published by the Institute of Risk Management (IRM), Alarm (The public sector risk management association) and AIRMIC (Association of Risk Managers in Industry and Commerce). Evidence that robust management of the authority's strategic risks is being undertaken demonstrates compliance with these standards.
Risk:	The report itself is an update of certain key risks facing the Council.
Equality:	As a decision is not being sought in this report, it is not necessary to undertake an Equality Impact Assessment. However, when measures and decisions are being considered for the mitigation of risks, risk owners must take into account any equalities impact and whether an equalities impact assessment is required. The Council recognises that its workforce is instrumental in assisting the organisation in managing the strategic risks noted within this report (as set out

ONE COUNCIL
ONE TEAM

	in Appendix A) and thereby delivering the Council's priorities. As such, the Council must ensure that equalities implications and how they affect the workforce as well as the wider community are considered and underpin all decisions and risk mitigating actions.
Health and Wellbeing:	The management of risk takes into account where appropriate, the implications on health and wellbeing of our communities.
Social Value	The actions and decisions that are being considered for the mitigation of the strategic risks, will take into account the meeting of the Council's social value commitments.
Climate Change	The actions and decisions that are being considered for the mitigation of the strategic risks, will take into account the meeting of the Council's climate change commitments, and there is a current risk on the register relating to Climate Change.

7. Appendices

Appendix A – Updated risks as at October 2023

8. Background Papers

None

ONE COUNCIL
ONE TEAM

Summary of the strategic risks updated since the last Audit and Risk Assurance Committee meeting - as @ October 2023

Risk Ref	Risk Title and Description	Previous score (Mar 2023)	Movement in risk score	Current risk score (Oct 2023)	Target risk score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk and action date)	Key Sources of Assurance
27a 06/09	**Medium Term Financial Strategy (MTFS), Central Government Funding and Resource Allocation** Local Government continues to operate in an uncertain financial environment arising from reducing central government funding, increasing demand for services, and more recently the impact of the high levels of inflation being experienced. If the government does not provide local authorities with clarity over the future plans for health and social care reforms, the Public Health grant, the Better Care Fund, the package of one-off social care grants, business rates reset and retention, and future years funding, and it continues with one year funding settlements then this inhibits local authorities' ability to effectively manage medium term/ three year plans and put in place the necessary processes and actions to manage funding pressures. If the council is unable to plan effectively as a result of funding uncertainty, and is unable to identify sufficient savings and put in place the necessary policies, processes and actions to manage pressures, pay and price inflation and manage its spending plans, then this will impact on the council's financial resilience and its ability to effectively discharge its statutory responsibilities including the setting of a balanced budget for future years. This will impact on the council's ability to deliver sustainable services to the people of Sandwell. Risk Area – All Council Services Risk owner- Director of Finance **Objectives impacted: All**	8 (amber)	*	*	*	* There are a number of factors that underpin the wider risk score for this risk, and the score will continue to remain fluid throughout each 12-month cycle as the council develops its MTFS, generally in-line with the below pattern. However, overall the council is confident that it has processes in place in order to be able to adequately mitigate these risks, and that it will remain able to effectively discharge its statutory responsibilities, including the setting of a balanced budget for future years. |	2023/24	2024/25	2025/26 Onwards
---	---	---	---
Delivery of the Medium-Term Financial Strategy (MTFS)	🟩	🟨	🟥	 **Current and Ongoing Controls** • The review by CIPFA on the council's financial management and governance arrangements, noted that the council was initially a progressive two-star (out of five) authority. The follow up review subsequently undertaken by CIPFA progressed this to a three-star. The review also looked at financial resilience and concluded that the council is financially stable and in recent years has been able to contribute towards reserves through achieving a balanced budget or an underspend. An underspend was delivered in 2022/23. • A fundamental review of the MTFS (in line with the CIPFA recommendations) has been completed, to ensure that the council understands the challenges ahead and to ensure that the MTFP matches the ambitions of the corporate plan and regeneration plans for Sandwell. • A balanced budget for 2023/24 was approved by Council on 21st February 2023 and includes savings totalling £21.4m. • Monthly monitoring of savings is carried out by Finance Business Partners in year. Savings are RAG rated and reported to Directors monthly through DMT meetings and to LT budget meetings. Budget surgery meetings are held mid-year to review savings rated 'red', with a view to understanding any issues hampering delivery and to unblocking those issues. Budget surgery meetings are attended by the Director of Finance, appropriate Directors and a range of officers from across the organisation. Monitoring of savings includes any savings carried forward from previous years that were not delivered in those years. • Star Chambers continue to be used to support budget setting. During August and September 2023, a Star Chamber meeting was held in relation to each Council directorate, focusing on the directorate's financial position, savings delivery within 2023/24, ongoing budget pressures and savings to be delivered in 2024/25. Star Chamber meetings include the Chief Executive and Portfolio Holders as well as the appropriate Director and Finance Business Partners. • Star Chamber meetings are used as the initiation process to generate further savings proposals for the following financial year and to test those proposals with elected members. This is the first step in the process towards balancing the budget for the following year. • Directorate budget pressures and growth are calculated annually by Finance Business Partners, and for Adult Social Care includes a growth model that extrapolates client numbers and average placement costs forward, building in assumed increases in market rates. • A Strategic Finance Manager post has been created, with a view to having a dedicated resource to creating and updating the MTFS model and to ensuring assumptions, eg, pay inflation assumptions, are calculated with consideration and in accordance with wider local authority group assumptions. • LG Futures have been commissioned to provide financial benchmarking data, including assumptions on grant income in future years, • Regular discussions take place with WMCA over the likelihood of when the business rates reset might transpire, and Sandwell's assumptions in this regard are aligned to the rest of the WMCA group of local authorities. • The MTFS position has been reported to Leadership Team on several occasions during the Autumn of 2023, and Directors have been fully engaged in the process of generating savings proposals to balance the budget gap in 2024/25. • The draft MTFS for 24/25 reports a deficit (prior to savings) of £13m. Savings proposals have been developed to balance the budget, supported by a business case document for each saving. The draft MTFS will be presented to Cabinet on 15th November. Cabinet workshops were held on 19th September and 25th October to engage Cabinet in the MTFS process and to ensure that elected members are willing to adopt each of the proposed savings. • Further iterations of the MTFS will be produced following the provisional and final settlement during Winter 2023/24. **Further actions** • Continued implementation of the action plan developed following the CIPFA review (as per the improvement plan timetable). • Use of benchmarking data to help identify opportunities for efficiencies, savings and service improvements. • The council continues to horizon scan and consider the impacts of potential government initiatives and policies on future funding sources and demand for council services.	[Budget and Corporate Scrutiny Board](#) External Audit CIPFA financial management review LGA Corporate Peer Review Grant Thornton Value for Money Governance Review - [Follow Up- December 2022](#) LG Futures benchmarking data Budget and Corporate Scrutiny Board Star Chambers Business case templates – Savings Proposals CIPFA

Risk Ref	Risk Title and Description	Previous score (Mar 2023)	Movement in risk score	Current risk score (Oct 2023)	Target risk score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk and action date)	Key Sources of Assurance
27b 10/21	**Budget Monitoring and Management 2023/24** If the council does not put in place effective arrangements to monitor and manage the current year's budget to ensure that planned savings are achieved and efficiencies realised, then it will result in overspends and impact the resilience of the council's finances. Therefore, timely and accurate monthly monitoring of the budget forecast outturn is required to ensure that the revenue and capital expenditure stay within the agreed budget. This applies to the General Fund and the Housing Revenue Account (HRA). Risk Area – Finance and Resources Risk owner- Director of Finance **Objectives impacted: All**	8 (amber) Monitoring and management 12 (red) Budget position	*	*	*	* The score will continue to remain fluid throughout each 12-month monitoring cycle, however, overall the council is confident that it has processes in place to be able to forecast the outturn position within a reasonable degree of certainty, and confident that it has the resources in place to be able to mitigate a forecast overspend position in the current year, up to a degree of tolerance of approximately 5%. (see detail below)	Leadership Team Budget and Corporate Scrutiny Board External Audit Annual Internal Audit review- budgetary control

Progress to Date detail:

Monitoring Period	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2023/24												
Revenue Budget Monitoring Position	(green)	(amber)	(amber)	(amber)	(amber)	(amber)	(amber)	(amber)	(amber)	(amber)	(amber)	(amber)

Current and Ongoing Controls
- A budget monitoring timetable is created annually and circulated to all in Finance, so that monthly monitoring deadlines are clearly understood and adhered to. Elements of the monitoring timetable relevant to budget holder involvement are circulated to budget holders.
- Directors and ADs are asked to sign budget accountability letters at the start of the financial year, which set out the budgets available to each senior officer and provide assurance that the budgets are understood and will be adhered to as far as possible
- As part of the budget monitoring process, year to date expenditure figures are compared with profiled budgets, and variances to date are used to calculate forecast outturn information, in conjunction with information from budget managers, historic data, trend data and any other relevant information
- Salaries monitoring is carried out at individual post level, using year to date cost information and information from budget managers on any changes in staffing that will take place in year
- All budget holders are sent their budget monitoring report monthly, and regular meetings are held between budget holders and Finance Business Partners. Budget holders are asked to provide forecast outturn information monthly.
- Heads of Finance Business Partnering collate information for all directorates, challenging and checking assumptions with Finance Business Partners
- Directors take ownership of their directorate's monitoring position, signing off the position for their directorate each month as a true reflection of the position
- Finance Business Partners attend DMT meetings monthly to present each directorate's monitoring position, to ensure that the position is understood by all ADs and that mitigating actions are proposed to deal with overspends as necessary
- The monitoring position is presented monthly to Leadership Team, quarterly to Cabinet and quarterly to Budget Management and Corporate Scrutiny Board
- Monitoring of current year savings (as per the MTFS) is carried out monthly by Finance Business Partners and present to DMT meetings monthly and Leadership Team meetings monthly, so that the impact of any non-delivery or slippage of savings on the Council's outturn position is understood
- If at any point, management action (for example an in-year spending freeze or recruitment freeze) or corporate action (for example use of reserves) is required in order to improve the forecast outturn position, Leadership Team is made known of this as soon as possible and provided with a list of actions that could be taken to address the forecast position. A menu of spending control options were presented to Leadership Team in August 2023, and spending controls were put in place following the Leadership Team meeting
- The council reported its Quarter 1 2023/24 budgetary position which showed a forecast outturn position for 2023/24 of:
  - £2.188m projected overspend for the general fund revenue
  - £nil variance for the HRA revenue

Further actions
- Introduction of Oracle Fusion by 1 April 2024, which will provide each budget manager with 'real time' access to their areas' budget and spend data.
- Involving budget managers in the budget setting process will ensure that they understand their budget figures and how they have been developed
- Introduction of Oracle Fusion will lead to budget managers taking ownership of the budget monitoring process for their areas, actively reviewing data and ensuring that outturn projections are completed. Finance Business Partners will be able to ensure that monthly challenge meetings are taking place with ADs and that mitigating actions are proposed and put in place to address overspends

Risk Ref	Risk Title and Description	Previous score (Mar 2023)	Movement in risk score	Current risk score (Oct 2023)	Target risk score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk and action date)	Key Sources of Assurance
27c 10/23	**Statement of Accounts** Failure of the Council to produce its outstanding Statements of Accounts for 2021/22 and 2022/23 and/or failure to produce a Statement of Accounts for 2023/24 within the required statutory deadline could result in reputational damage to the council and may impact on the council's ability to come out of intervention. Risk Area – Finance and Resources Risk owner- Director of Finance **Objectives impacted: All**	N/A	N/A	8 (amber)	4 (green) March 2024	**Current and Ongoing Controls** • A team of interim specialist contractors has been put in place to produce the outstanding Statements of Accounts and to address resulting audit queries • The audit of the 2020/21 Statement of Accounts was completed during Summer 2023, and final accounts have now been published. • A Statement of Accounts for 2021/22 is due to be provided to Grant Thornton by 20 November 2023, and the resulting audit is due to be completed by the end of March 2024. A resource plan will be put in place by the Head of Technical Accounting to deal with audit queries during the three/four month audit period, to ensure that officers are available to respond to queries and that there are no delays to the audit timetable. • The Statement of Accounts for 2022/23 must be produced by end of March 2024, and further external resources will be procured as required to ensure that this deadline is met. • A closedown timetable for 2023/24 will be produced by the Head of Technical Accounting by the end of February 2024, and officer training will be delivered as required in advance of the closure period. • A plan will be put in place for knowledge and skill transfer between the interim specialist contractors and the council's permanent Technical Finance team to ensure that permanent staff are able to produce Statements of Accounts in the future in-house.	External Audit
53 04/18	**Oracle Fusion Implementation** The project primarily has a risk of missing the April go live date. At this point in time the risks have started to crystalise with HR & Payroll. This stems mainly from previous process and working practice challenges in HR and Payroll operations. The programme has agreed with the project board to a phased plan to resolve this risk through Finance and Procurement remaining to go live in April and HR & Payroll moving back to July. For Finance the new management team are undertaking a review of the design of the Chart of Accounts and approved design which presents a further risk to the go live date for Finance. The programme board have directed that the Finance go live date cannot move back from April 2024. Risk Area – Finance and Resources Risk Owners – Director of Finance **Objectives impacted: All**	8 (amber)	⬆	9 (amber)	4 (green) April 2024	There has been a slight increase in the risk score, as noted in the risk descriptor - at this point in time risks have started to crystalise with HR & Payroll. **Mitigations:** **For HR & Payroll** • SME engagement activities to resources to take on programme role • Repeated realignment of relevant resources • Additional line manager representation • Direct progress reports to relevant Board member • Implemented agile way of working with parallel progress • Detailed level of governance, and controls, and task prioritisation • Phased Plan to move HR & Payroll go-live to July whilst retaining an April Go-Live for all other workstreams • Additional resources identified • Further analysis taking place on other critical activities **For Finance** • Working through the gaps in the Chart of Accounts to achieve best practice with minimised impact • Exploring rapid implementation of an interface from the existing HR & Payroll system to Oracle Fusion general ledger and budget monitoring • All identified changes will be assessed through the Programme change control and governance process • Engaging with stakeholders to explain the need to revisit Chart of Accounts • Revisiting end to end processes as quickly as possible • Added the production of accounting procedure guides to the task list	Project Board SOCITM Grant Thornton – Value for Money Governance Review 2021 Grant Thornton Value for Money Governance Review - Follow Up- December 2022 SRO updates to Leadership Team Grant Thornton review of Oracle Implementation
61 10/21	**Partner Organisations/Contractors Service Delivery** The council works closely with partners and contractors to provide services to its residents and businesses. In the event Partner organisations or contractors do not provide the required level of service to the public this may result in: • Efficient / good value for money / high quality services not being delivered • Enforcement action • Significant financial loss and • Reputational damage Risk Area – All Services Risk Owner – Chief Executive and Leadership Team **Objectives impacted: All**	12 (red)	⬇	9 (amber)	4 (green) March 2024	**Current Controls** • Leadership Team has established a reporting structure for the council's key contracts and partnership arrangements. • Arrangements for scrutiny consideration of the council's key contracts is in progress. • A deed of variation and extension period has been agreed and signed with SLT to deliver services up to end March 2027. • Contract management training has been rolled out across the Council. • A lessons learnt session led by key stakeholders in WM police has been completed during September 2023 to ensure that the recent service disruption due to illegal blockading during the period of industrial action is analysed appropriately to inform future incidents. • Follow up report to Cabinet has been provided in October for Sandwell Leisure Trust to confirm the position to end March 2027 **Further Actions** • Establishment of consistent contract management for both significant capital and service contracts across the Council. • Review of the current arrangements in place for each key contractor to ensure they remain fit for purpose and that the partnership objectives are aligned to the refreshed corporate plan.	Grant Thornton – Value for Money Governance Review 2021 CIPFA Financial Management and Governance Review 2021 LGA Peer Review 2022 Economy, Skills, Transport And Environment Scrutiny Board review of the performance and management of the waste partnership contract Reports to the Improvement Board Grant Thornton Value for Money Governance Review - Follow Up- December 2022 Leadership Team – quarterly monitoring

This page is intentionally left blank

Audit and Risk Assurance Committee

23 November 2023

Subject:	Public Health Directorate Risk Register
Director:	Interim Director of Public Health Liann Brookes-Smith
Contact Officer:	Audit Services and Risk Management Manager Peter Farrow peter_farrow@sandwell.gov.uk

1 Recommendations

1.1 To note and comment on the directorate risks.

2 Reasons for Recommendations

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

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

2.3 As well as regularly reviewing the Council's Strategic Risk Register, the Committee also has sight of each directorate risk register as part of its

ONE COUNCIL
ONE TEAM

cycle of business, in order to gain an understanding of how risks are being managed at directorate level. The latest such review is with regards to the Public Health directorate.

2.4   The Committee will be aware that risks are managed through the council's risk management process which is set out in its Corporate Risk Management Strategy, and involves the development of risk registers at strategic, directorate, operational and project levels.

2.5   Ownership of the individual directorate risks is assigned to the director and service managers, who have responsibility to:

- Consider and agree the risk description
- Assess the current risk score based upon the controls in place and the assurances they have received on the adequacy and effectiveness of these controls
- Implement mitigating actions to reduce the risk scores where necessary, in order to deliver the target risk score by the target date.

2.6   The Director is also responsible for keeping the Cabinet Members informed of the relevant risks that fall within their portfolio and the implementation of mitigating actions.

2.7   Further ongoing reviews of the directorate register are undertaken by the Directorate Management Team on a regular basis.

2.8   A summary of the directorate risks is included at Appendix A of this report which notes two red risks and four amber risks.

3   How does this deliver objectives of the Corporate Plan?

	Best start in life for children and young people
	People live well and age well
	Strong resilient communities
	Quality homes in thriving neighbourhoods
	A strong and inclusive economy
	A connected and accessible Sandwell

	The report details the key directorate risks that need to be manged to ensure that they do not negatively impact on the delivery of the directorate business plan and thereby the Corporate Plan objectives.

4 Context and Key Issues

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

4.2 The risk register is a live document and reflects the risk profile at the time of preparing this report in October 2023. The risks undergo ongoing review to ensure they remain appropriate and are assessed in order to aid informed decision making and resource allocation.

4.3 An update of the risks, including the measures in place to mitigate them are included within appendix A.

5 Alternative Options

5.1 Whilst this report does not require a decision and therefore, alternative options do not need to be considered, when measures are being considered for the mitigation of each of the directorate risks, this takes into account any alternative options available.

6 Implications

Resources:	The authority's budget planning process incorporates financial and other resources required to manage the authority's risks and deliver the priorities within the corporate plan.

ONE COUNCIL
ONE TEAM

Legal and Governance:	There are numerous standards applicable to the management of risk within the local authority sector. Included amongst these is guidance from CIPFA/Solace, the British Standards Institute (BSI) and a set of joint standards published by the Institute of Risk Management (IRM), Alarm (The public sector risk management association) and AIRMIC (Association of Risk Managers in Industry and Commerce). Evidence that robust management of the authority's risks is being undertaken demonstrates compliance with these standards.
Risk:	The report itself is an update of the key risks facing the directorate.
Equality:	As a decision is not being sought in this report, it is not necessary to undertake an Equality Impact Assessment. However, when measures and decisions are being considered for the mitigation of risks, risk owners must take into account any equalities impact and whether an equalities impact assessment is required.
Health and Wellbeing:	The management of risk takes into account where appropriate, the implications on health and wellbeing of our communities.
Social Value	The actions and decisions that are being considered for the mitigation of the risks, will take into account where appropriate, the meeting of the Council's social value commitments.
Climate Change	The actions and decisions that are being considered for the mitigation of the risks, will take into account where appropriate, the Council's climate change agenda.
Corporate Parenting	There are no corporate parenting implications arising from this report.

7. Appendices

Appendix A – Directorate risk register summary as at October 2023

ONE COUNCIL
ONE TEAM

8. Background Papers

None

ONE COUNCIL
ONE TEAM

This page is intentionally left blank

Public Health - Directorate Risk Register @ October 2023

Profile of Current Strategic Risk Scores:

Red	2, 3
Amber	1,4,5,6
Green	-

1. Best start in life for children and young people

2. People live well and age well

3. Strong resilient communities

4. Quality homes in thriving neighbourhoods

5. A strong and inclusive economy

6. A connected and accessible Sandwell

Risk Ref	Risk Title and Description	Previous score	Direction of travel	Current risk score (October 2023)	Target risk score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk and action date)
01	Working arrangements around office facilities/capacity – lack of meeting rooms and confidential spaces	No previous score	N/A	Amber	Green January 2024	**Current and ongoing controls** Working practices being adapted in order to find workarounds **Further Actions** • Flag to Corporate Business Planning team
02	Provision, including capacity linked to involvement in HR processes.	No previous score	N/A	Red	Amber July 2024	**Current and ongoing controls** Ongoing discussions with HR, but inability to reduce workload at the moment. However, will continue to consider options including additional staff in the team. **Further Actions** • To continue to assess and monitor
03	Equipment – reliance on older laptops and phones	No previous score	NA	Red	Green July 2024	**Current and ongoing controls** • IT refresh schedule **Further Actions** • To continue to assess and monitor
04	Internal approval processes – 3-tiered approach and corporate capacity to support	No previous score	NA	Amber	Green July 2024	**Current and ongoing controls** • Build in delay time due to the need for queries and clarification from consultees and other service areas • Use of external support partners where internal demands have not been fully anticipated or factored into the new guidance **Further Actions** • Recommend a review of the approach, building on experience to ensure ongoing review and improvement process can be fed back into overall corporate direction of travel

Risk Ref	Risk Title and Description	Previous score	Direction of travel	Current risk score (October 2023)	Target risk score and date	Progress to Date (incl. current risk mitigating controls and further actions to be taken to manage risk and action date)
05	Senior level team recruitment/ vacancies	No previous score	NA	Amber	Green July 2024	**Current and ongoing controls** • Recruitment processes and working with HR
06	The ability to prepare, submit and seek approval for applications for additional funding as and when it becomes available, in a timely manner	No previous score	NA	Amber	Green July 2024	**Current and ongoing controls** • Assessment of council requirements, capacity and timescales **Further Actions** • Corporate review of process to be pursued

This page is intentionally left blank

Report to Audit and Risk Assurance Committee

23 November 2023

Subject:	Internal Audit Progress Report
Director:	Brendan Arnold Interim Section 151 Officer
Contact Officer:	Peter Farrow Audit Services and Risk Management Manager, peter_farrow@sandwell.gov.uk

1 Recommendation

1.1 Review and comment upon the Internal Audit Progress Report.

2 Reasons for Recommendation

2.1 To inform the committee of details of the matters arising from internal audit work undertaken between April and October 2023.

ONE COUNCIL
ONE TEAM

3   How does this deliver objectives of the Corporate Plan?

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

4   Context and Key Issues

4.1   The Internal Audit Progress Report contains details of the matters arising from internal audit work undertaken between April and October 2023.

4.2   The purpose of the report is to bring the Audit and Risk Assurance Committee up to date with the progress made against the delivery of the 2023/24 Internal Audit Plan. The information included in the progress report will feed into and inform the overall opinion in the Internal Audit Annual Report issued at the year end.

4.3   It summarises the audit work undertaken between April and October 2023, this includes:

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

5   Alternative Options

5.1   The purpose of the report is to inform the Audit and Risk Assurance Committee on progress against the 2023/24 Internal Audit Plan. As such, there is no alternative option.

ONE COUNCIL
ONE TEAM

6 Implications

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

7. Appendices

Internal Audit Progress Report.

8. Background Papers

None.

ONE COUNCIL
ONE TEAM

This page is intentionally left blank

Sandwell
Metropolitan Borough Council

Internal Audit Progress Report
@ October 2023

1   Introduction

The purpose of this report is to bring the Audit and Risk Assurance Committee up to date with the progress made against the delivery of the 2023/24 Internal Audit Plan.

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

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

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

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

2   Summary of work completed between 1 April and 31 October 2023

AAN	Assessment of Assurance Need Rating (High/Medium risk).
N/A	Not Applicable, review outside of normal risk-based auditing approach/customer request/grant claim.

Auditable Area	AAN rating	Recommendations					Level of Assurance
		Fundamental	Significant	Merits attention	Total	Number accepted	
Reported for the first time:							
Climate Change	Medium	1	2	-	3	3	**Limited**
Use of Council Procurement Cards	Medium	2	5	-	7	7	**Limited**
Housing Benefits	High	-	1	1	2	2	Reasonable
Business Continuity	Medium	-	3	-	3	3	Reasonable
Temporary Accommodation	Medium	-	4	1	5	5	Reasonable
Mayors Charity	N/A	-	2	2	4	4	Reasonable
Waste Management	Medium	-	2	-	2	2	Reasonable
Accounts Receivable	High	-	-	-	-	-	Substantial
NNDR	High	-	-	2	2	tbc	Substantial
Riverside Leaseholders, follow-up	N/A	-	-	2	2	2	N/A
Riverside Method Statements	N/A	-	-	-	-	-	N/A
School audits:							
Meadows	N/A	-	2	3	5	5	Reasonable
Abbey Infant	N/A	-	1	-	1	1	Substantial
Abbey Junior	N/A	-	1	-	1	1	Substantial
Sandwell Community School Grant Certification	N/A	-	-	-	-	-	N/A

Audits underway as at 31 October 2023
• Direct Payments
• Cyber Security
• Budgetary Control
• Treasury Management
• Cash Handling
• Voluntary Sector Support
• Council Rents
• Council Tax
• Payroll

3   Issues to bring to the committee's attention for the period 1 April to 31 October 2023

Climate Change

Climate Change has been recognised as a key risk on the council's Strategic Risk Register. With the following categorised as a red risk *"Failure to achieve the council's commitments in relation to Climate Change, including the pledge to make council activities, buildings, housing, fleet, schools and street lighting net-zero carbon by 2030 may result in reputational damage, financial impact, increased demand for council resources (in the event of extreme weather) and a loss in public confidence. In addition, managing the effects of climate change will also have significant financial impact which the council will need to address".*

As part of the emerging climate crisis the council produced a Climate Change Strategy 2020-2041, setting out the actions that needed to be taken in order to meet the target of net zero carbon emissions for the council in 2030 and for the whole of the Borough in 2041 (in line with the West Midlands Combined Authority target). A Climate Change Action Plan accompanied the strategy, setting out a wide range of actions, responsible areas and the timeframe.

In March 2022, the Climate Change Action Plan was updated. This was approved by Cabinet on 23 March 2022 alongside proposed governance arrangements, and it was agreed that a cross-party Member Group on Climate Change be formally established to monitor the implementation of the Action Plan. Such a group was subsequently formed.

In the Cabinet report, and to ensure that climate change was integrated across the council's service areas, a new set of arrangements were also proposed to establish a director-led Partnership Board, and it was expected that this would report quarterly into the Member Group and annually to Cabinet. Such a board was subsequently established, and its first meeting was held in July 2022.

However, we noted that while the board did consider and discuss many of the climate change issues that formed part of the Climate Change Action Plan, it did not formally monitor the council's progress against the Action Plan itself. The Programme Board were then not in a position to report progress against the Climate Change Action Plan back to the Member Group. Without this, the group were also unable to monitor progress or use it to help inform

their focus and workplan. Similarly, the Programme Board was yet to report on an annual basis back to Cabinet.

When the Climate Change Action Plan was presented to Cabinet in March 2022, it was noted in the report that *"At this stage, the Action Plan is not a costed plan, however, it is already widely understood that to reach net zero by 2030 and for the borough to reach net zero by 2041 a significant investment is needed in the council's and borough's assets. The Programme Board will focus its initial attention on establishing several of the initial cost implications for the council and will report back into Cabinet with the relevant budget requests"*.

At its September 2022 meeting, the Programme Board highlighted a need to review the council's 2030 targets across all areas of the Climate Change Strategy/Action Plan, with the aim of estimating all potential costs and policy impacts to the council. However, further action had yet to be taken with regards to this.

Finally, The Climate Change Action Plan breaks down various themed areas such as Air Quality, Energy and Off-setting into actions around 'what we need to do', 'how we do this', 'who is responsible' and 'timescale'. However, the way in which these 'targets' were set out in the action plan did not reflect SMART principles, and quite broad-brush terms were often used with little specific detail or clear targets. Also, 2030 and 2041 were quite often used as the timescales. While we appreciate that 2030 and 2041 are the ultimate targets for many of the actions, it may be beneficial to further split/separate out some of the actions, so that there can also be an increased focus on short to medium term progress, towards the longer-term timescales.

The issues flagged are now being addressed by the Programme Board and a reporting matrix is being developed in order to better monitor and evaluate progress.

Use of Council Procurement Cards

Procurement cards are used mainly for smaller and wide-ranging one-off supplier type transactions. Generally, these have less corporate control than purchases that would go through the traditional corporate procurement route. Therefore, it is particularly important that the controls put in place to approve and manage payments, are complied with.

We undertook a review of procurement card expenditure in order to assess if their use was in accordance with the council's Purchase Card Policy.

Our review noted a number of areas where compliance with the Council's Policy on Procurement Cards needed to be improved. The improvements needed principally related to authorisation and the level of completion in the relevant processes in a number of cases, including receipts not being uploaded correctly and the fact that the Council had acquired a number of Amazon Memberships rather than passing business through a single account. Further compliance issues related to the recording of sub-optimal descriptions to support the purchase of some items.

The audit also noted weaknesses in that reminders were no longer being issued to cardholders or approvers where actions were outstanding.

Following receipt of our report a suite of corrective audit recommendations were put forward, have been agreed by management and are now in delivery. Further action includes the

suspension of some cards pending resolution of the issues identified, and a detailed review to establish the ongoing need for the system which will be undertaken during 2024.

Housing Benefits

We undertook a review to ensure that there were adequate controls in place regarding the payment of housing benefits. As part of this review, our previously agreed actions were followed up. We noted that one recommendation had yet to be implemented. As part of monitoring checks, the Benefits Team should examine the validity of claims that are over £1,500. However, it was noted that this check had yet to be introduced - management has agreed to now introduce this check.

Business Continuity

We undertook an audit review of the business continuity arrangement in order to provide assurance that suitable guidance was available, and training was provided to officers responsible for producing the business continuity plans. This included how the council monitors, assesses and reports on business continuity plans, compliance with legislation, internal requirements and good practice. We noted instances where there was no record of training provided for officers listed as a 'Plan Owner' or 'Lead Officer' and a review of the training log highlighted that a number of officers training, or participation in related exercises, had been over three years ago. Also, certain officers on the log had since left the council. We also found instances where plans had not been updated in the last 12 months and cases where plans had not been exercised/tested for some time.

Temporary Accommodation

Our review of temporary accommodation highlighted late consideration of the need for continuing service provision as the existing contract was ending. The subsequent exemption report for Temporary Accommodation for the Provision of Hotel and Bed and Breakfast accommodation had not been approved in line with the council's Procurement Rules, and a further extension was also later sought for the exemption. We also noted significant use of procurement cards on emergency accommodation, with officers not always following the council policy with regards to documenting such purchases. There was also a need for applicant casefiles held on the Housing Solutions system (Jigsaw) to be regularly reviewed for consistency to ensure sufficient information was recorded to evidence the decision-making process, along with a need to strengthen the monitoring arrangements on applicant case file accounts with regard to arrears management in order to help facilitate the recovery of costs where applicable.

Mayors Charity

We undertook a review of the arrangements for the Mayors Charity in order to ensure that it had a robust framework. The Charity had been fairly dormant throughout much of lockdown, but activities were likely to pick up again in the near future. We noted that there needed to be a more formal receipting process to be put in in place regarding any donations received, an officer who had left the council needed to be removed as an authorised signatory list for the account, and the bank account used for the fund should be changed to one with the council's current bank.

Waste Management

The Waste Management Contract is for a period of 25 years, began in 2010 and expires in 2035. The contract was awarded to Serco to help the council modernise and make improvements to waste, recycling and street cleaning across the borough and to deliver the Council's Waste Improvement Plan.

The contract is performance based and measured against 34 Key Outcome Targets (KOTs) with Serco responsible for the design, monitoring and reporting on performance (cost, quantities and quality) in conjunction with the council. Waste Services also formed one of the key lines of enquiry from the 2021 Grant Thornton Value for Money Governance Review.

In recent times, steps have been taken by the council to be more pro-active in ensuring that the necessary information is submitted in accordance with the Terms and Conditions of Contract.

Our review noted that the monitoring actions put in place by the council were yet to be fully embedded, with slight delays in some of the earlier reporting, a need to strengthen the robustness of the process for sign-off by the council when new vehicles have been received, together with consideration of the implications for the council of any slippage in the vehicle delivery programme.

4   Other activities undertaken by Audit Services

CIPFA – Audit Committee Updates

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

Audit and Risk Assurance Committee – Terms of Reference

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

Internal Audit Plan

The Internal Audit annual plan for 2023/24 was submitted to the Audit and Risk Assurance Committee for approval.

Audit and Risk Assurance Committee Annual Report

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

Internal Audit's role in investigating allegations of Fraud

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

Annual Governance Statement

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

Advice and Guidance

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

Liaising with the External Auditors

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

Wider Client base

The council's internal auditors also provide the internal audit service to Sandwell Children's Trust, Sandwell Leisure Trust and the West Midlands Fire Service, and reports directly to these organisations audit committee, or equivalent, as appropriate.

![Sandwell Metropolitan Borough Council logo]

Report to Audit and Risk Assurance Committee

23 November 2023

Subject:	Internal Audit Charter
Director:	Brendan Arnold Interim Section 151 Officer
Contact Officer:	Peter Farrow Audit Services and Risk Management Manager, peter_farrow@sandwell.gov.uk

1   Recommendation

1.1   Review and approve the Internal Audit Charter.

2   Reasons for Recommendation

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

3   How does this deliver objectives of the Corporate Plan?

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

4   Context and Key Issues

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

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

4.3   The Institute of Internal Auditors are currently reviewing and updating their internal audit standards. The current Public Sector Internal Audit Standards (PSIAS) are based on the existing Institute of Internal Auditors standards. Once these standards have been introduced, they will be adopted within an updated version of PSIAS. The Internal Audit Charter will at that time, also be updated to reflect any changes to the standards and will be brought before the committee for review. This is estimated to be within the next 12 months.

5   Alternative Options

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

6   Implications

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

7.   Appendices

There are no appendices.

8.   Background Papers

None.

Definition of internal auditing

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

Mission of internal audit

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

Core Principles for the Professional Practice of Internal Auditing

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

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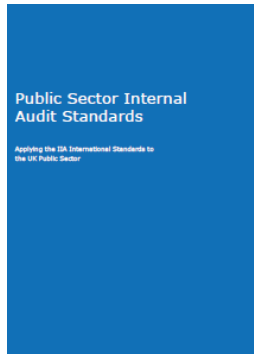
Internal audit is a statutory service in the context of the Accounts and Audit Regulations (Amendment)(England) 2015. Section 151 of the Local Government Act 1972 requires local authorities to make arrangements for the proper administration of their financial affairs and appoint a Chief Financial Officer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

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

Public Sector Internal Audit Standards

Applying the IIA International Standards to the UK Public Sector

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

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

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

Scope and objectives of internal audit activities

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

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

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

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

Responsibilities

Internal audit has a responsibility to:

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

Organisational independence

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

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

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

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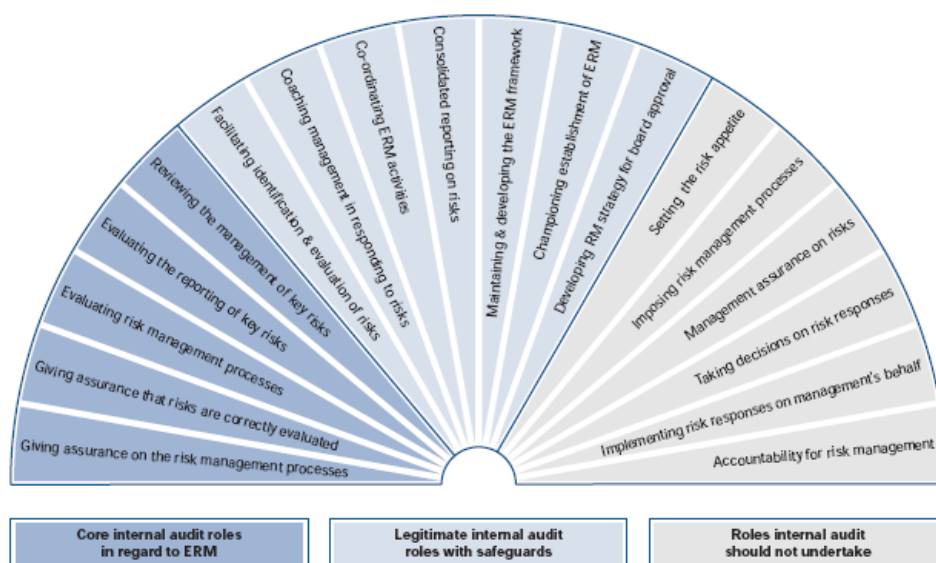
Accountability, reporting lines and relationships

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

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

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

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

| Core internal audit roles in regard to ERM | Legitimate internal audit roles with safeguards | Roles internal audit should not undertake |

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

Internal audit resourcing

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

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

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

Fraud

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

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

Advisory work

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

External Clients

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

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

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

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

Report to Audit and Risk Assurance Committee

23 November 2023

Subject:	Code of Corporate Governance
Director:	Director of Legal and Governance Surjit Tour
Contact Officer:	Mike Jones Assistant Director – Legal & Assurance, Deputy Monitoring Officer

1 Recommendations

That Full Council be recommended to approve the updated Code of Corporate Governance.

2 Reasons for Recommendations

The revised Code of Corporate Governance contributes toward the statutory assurances on the robustness of its governance arrangements.

Approval of the Code is a matter for Council to determine, on the recommendation of Audit and Risk Assurance Committee. Audit and Risk Assurance Committee as the committee with a corporate governance and compliance remit need to be satisfied that arrangements remain robust and recommend adoption of the Code of Corporate Governance to Council.

ONE COUNCIL
ONE TEAM

3 How does this deliver objectives of the Corporate Plan?

Governance mechanisms underpin all aspects of the Council. The Code of Corporate Governance, as a public statement that demonstrates the Council has the necessary governance arrangements in place to perform effectively, contributes toward achievement of the Corporate Plan in its entirety.

4 Context and Key Issues

4.1 The Council is responsible for ensuring that it's business is conducted in accordance with the law and proper standards, that public money is safeguarded, properly accounted for and used efficiently and effectively, and that it has robust and assured governance arrangements in place.

4.2 The Accounts and Audit Regulations 2015 require a local authority to review at least once a year the effectiveness of its system of internal control. This requirement will be fulfilled if the review is conducted in accordance with the CIPFA/SOLACE Delivering Good Governance in Local Government Framework (2016).

4.3 The Council adopted the Local Code of Corporate Governance as a mechanism to demonstrate that it's governance structures comply with the principles contained in the framework. The Code is a key component of the Council's governance arrangements and describes the processes and arrangements that the Council has in place to evidence compliance with good governance principles.

4.4 As part of its commitment to ensuring that the governance infrastructure remains appropriate, the Council undertakes a regular review of its

ONE COUNCIL
ONE TEAM

arrangements and updates the Code to reflect any changes. The Code (attached at appendix 1) captures any revisions to the Councils governance arrangements, and this year incorporates:

- The inclusion of the Councils Corporate Improvement Plan, reflecting the recommendations arising from external reviews, and associated performance monitoring and reporting arrangements;
- Additional detail on the Councils performance management framework and governance arrangements;
- The adoption and embedding of revised corporate values and behaviours
- The outcomes of the governance review including changes to the Council's constitutional arrangements;
- Revised arrangements following the implementation of recommendations arising from the scrutiny review
- The evolution of the governance framework for Towns Fund programmes;
- Removal of the section relating to the Councils response to the coronavirus pandemic.

Monitoring Compliance with the Code

The Code reflects a range of corporate governance mechanisms that the council has in place. These are subject to internal monitoring and controls that are specific to the various elements. Lead officers maintain oversight and report on compliance in accordance with established governance reporting structures that include the Council's improvement board, Scrutiny Boards, ARAC and full Council. Corporate governance arrangements are routinely considered by the Commissioners and has been positively reported to the Secretary of State. The annual review of the Code is reported into the Audit and Risk Assurance Committee for onward recommendation for approval by Council and outcomes of the review are captured in the Annual Governance Statement, that again is submitted for approval by the Committee.

5   Implications

Resources:	The Code outlines the Council's systematic and procedural approach to strategic resource management.
Legal and Governance:	The governance review process ensures that the Council discharges its statutory duties. The adoption

	of the Code of Corporate Governance demonstrates how the council complies with the Delivering Good Governance in Local Government Framework 2016.
Risk:	The Council is legislatively required to have efficient and effective governance arrangements in place. These are evaluated on an annual basis by the internal and external audit function who provide an opinion on the efficiency and effectiveness of the council's governance arrangements. The code and the arrangements outlined within provides assurances that the Council remains compliant with its obligations
Equality:	There are no equality impact issues associated with this report
Health and Wellbeing:	None associated with this report
Social Value:	The Council's approach to measuring social value is considered as one of the mechanisms of good governance
Climate Change:	None associated with this report
Corporate Parenting:	There are no direct implications in relation to corporate parenting responsibilities

6   Appendices

Appendix 1 Code of Corporate Governance

7.   Background Papers

None

ONE COUNCIL
ONE TEAM

Code of Corporate Governance

November 2023.

Introduction

Corporate governance is a term used to describe the way that organisations direct and control what they do. For local authorities, it includes the systems, policies and processes, as well as the cultures and values, that underpin a council's arrangements for effective:

• leadership

• management

• performance

• delivery of positive customer outcomes

• community engagement

• stewardship of public money

The Sandwell Vision 2030

In 2030, Sandwell is a thriving, optimistic and resilient community. It's where we call home and where we're proud to belong - where we choose to bring up our families, where we feel safe and cared for, enjoying good health, rewarding work, feeling connected and valued in our neighbourhoods and communities, confident in the future, and benefiting fully from a revitalised West Midlands.

The Sandwell Vision and its 10 Ambitions are at the heart of everything the council and partners in Sandwell do.

Page 142

Corporate Plan: Big Plans for a Great Place

The Council has developed its Corporate Plan- The Sandwell Plan – Big Plans for a Great Place that sets out what the Council will do to deliver Vision 2030 and the 10 Ambitions over the next five years and is based upon six strategic outcomes. The driving theme behind the Plan is One Team: One Council, which reflects the culture of the organisation through strong leadership in an honest, open and transparent environment.

OUR STRATEGIC OUTCOMES

THE BEST START IN LIFE FOR CHILDREN AND YOUNG PEOPLE

PEOPLE LIVE WELL AND AGE WELL

STRONG RESILIENT COMMUNITIES

QUALITY HOMES IN THRIVING NEIGHBOURHOODS

A STRONG AND INCLUSIVE ECONOMY

A CONNECTED AND ACCESSIBLE SANDWELL

ONE COUNCIL ONE TEAM

This Code of Corporate Governance contributes to our Big Plans for a Great Place by ensuring that a strong governance framework is in place and underpins everything the council does.

Good Corporate Governance

Sandwell Council is committed to achieving good corporate governance and this Code describes how the council intends to achieve this in an open and explicit way. In developing this Code, the council has considered best practice and guidance, particularly the seven core principles of the CIPFA/SOLACE framework "Delivering Good Governance in Local Government".

Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law.

Ensuring openness and comprehensive stakeholder engagement.

Defining outcomes in terms of sustainable economic, social, and environmental benefits.

Determining the interventions necessary to optimise the achievement of the intended outcomes.

Developing the entity's capacity, including the capability of its leadership and the individuals within it.

Managing risks and performance through robust internal control and strong public financial management.

Implementing good practices in transparency, reporting, and audit to deliver effective accountability.

However, the Code is purposefully written in a way that best reflects the council's own structure, functions, size and the governance arrangements in existence.

The Sandwell Position

Sandwell embraces the seven principles with clear lines of accountability for any decisions it makes, and clear rules, regulations, policies and practices which govern how those decisions are made and implemented.

The council has adopted the strong 'leader and cabinet' form of executive arrangement under the Local Government and Public Involvement in Health Act 2007 with a Cabinet of up to ten Councillors, meeting in public to make executive decisions on matters of strategy and borough-wide significance. Each Cabinet Member also has a portfolio of responsibility for the delivery of services, which are aligned to each of the 10 Vision Ambitions, for which they are accountable. The council's practices are underpinned by three overarching principles:

Respect for others	Councillors should promote equality by not discriminating unlawfully against any person and by treating people with respect, regardless of their sex, sexual orientation, gender reassignment, race, religion and belief, disability, age, marriage and civil partnership. They should respect the impartiality and integrity of the council's statutory officers and its other employees.
Duty to uphold the law	Councillors should uphold the law and, on all occasions, act in accordance with the trust that the public has entrusted in them.
Stewardship	Councillors should do whatever they are able to do to ensure that the council uses its resources prudently and in accordance with the law.

Page 145

Putting the principles into practice in Sandwell

Sandwell Council is confident that its governance arrangements are robust. Following central government intervention and the appointment of independent Commissioners, the Council has reviewed, with the assistance of external specialist organisations, it's corporate governance arrangements and has implemented a schedule of changes. The council recognises, however, that improvement and progress will need to continue and evolve in order that we continue to respond to extensive change and to meet rising government and customer expectations about the quality and responsiveness of services.

The Council has an Improvement Plan in place that is monitored monthly by Leadership Team and quarterly by Cabinet, Audit and Scrutiny. The council reports its progress to Central Government every six months. Significant progress has been made to deliver the actions within the Improvement Plan and the council's progress has been recognised by the Commissioners and by our external reviewers (Grant Thornton, CIPFA and LGA) who conducted follow up reviews in late 2022.

The council acknowledges the amount of work ahead to continue the council's improvement. Key areas of focus are organisational culture, customer journey, transformation and delivering the Medium-Term Financial Strategy.

Monitoring, Review and Changes

The council's commitment to good corporate governance includes the application, development and maintenance of this Code. This is undertaken by the council's Corporate Governance Board (the Board). The Board is responsible for monitoring and reviewing the effectiveness of the governance framework and identifying any issues and agreeing an action plan. The results of this review are contained in the Annual Governance Statement which is reported to the Audit and Risk Assurance Committee and published with the Annual Statement of Accounts. The role of the Committee is to understand the process undertaken to review governance and to ensure that the Statement aligns with its understanding of the effectiveness of the council's governance framework. The Committee is also responsible for obtaining assurances that the measures within the action plan to improve governance are addressed and implemented.

Any changes that are required to this Code resulting from its review, will be submitted to the council for approval.

Councillor Kerrie Carmichael
Leader of the Council

Shokat Lal
Chief Executive

Page 147

Principle 1

CIPFA/ Solace behaviours and actions that demonstrate good governance in practice

- Ensuring Councillors and officers behave with integrity and lead a culture where acting in the public interest is visibly and consistently demonstrated thereby protecting the reputation of the organisation.
- Ensuring Councillors take the lead in establishing specific standard operating principles or values for the organisation and its staff and that they are communicated and understood. These should build on the Seven Principles of Public Life (the Nolan Principles).
- Leading by example and using these standard operating principles or values as a framework for decision making and other actions.
- Demonstrating, communicating and embedding the standard operating principles or values through appropriate policies and processes which are reviewed on a regular basis to ensure that they are operating effectively.
- Seeking to establish, monitor and maintain the organisation's ethical standards and performance.
- Underpinning personal behaviour with ethical values and ensuring they permeate all aspects of the organisation's culture and operation.
- Developing and maintaining robust policies and procedures which place emphasis on agreed ethical values.
- Ensuring that external providers of services on behalf of the organisation are required to act with integrity and in compliance with high ethical standards expected by the organisation.
- Ensuring Councillors and staff demonstrate a strong commitment to the rule of the law as well as adhering to relevant laws and regulations.
- Creating the conditions to ensure that the statutory officers, other key post holders and Councillors are able to fulfil their responsibilities in accordance with legislative and regulatory requirements.

The key processes and arrangements Sandwell Council has in place to demonstrate compliance with the principles of good governance

- The council's values and behaviours guide and shape the council's culture and helps Councillors and officers understand what is expected from them. These values and behaviours have been reviewed corporately, with input from colleagues across the organisation during 2022, were considered by Cabinet in March 2023 and rolled out across the organisation with a series of workshops and regular, targeted communications aiding in dissemination and corporate adoption. The revised values and behaviours set out the corporate expectations of officers on their conduct and enhance the officer protocols contained in the constitution.
- Upon election to office, Councillors confirm in writing that they will fulfil the expectations set out in the Code of Conduct for Elected Members. The Code of Conduct is provided to all Councillors immediately after their election.
- Codes of Conduct for officers and Councillors are in place and supplemented by guidance for when serving on outside bodies including partnerships.
- During 2022, all members have been invited to contribute to a comprehensive review of the Code of Conduct for Officers and associated protocols that establish how Councillors and Officers work together. The Council adopted the LGA model Code of Conduct in November 2022 and implemented it with immediate effect.
- Alongside the Code of Conduct review, arrangements for dealing with complaints about members were refreshed and the Councils website content updated in line with the changes
- The ethical standards and member development committee have a development programme in place for Councillors. The Council is able to demonstrate compliance with the 15 recommendations to local authorities from the Committee on Standards in Public Life
- Cabinet Members and Directors provide an annual assurance statement on compliance with and their respective Codes of Conduct.
- The Council has in place, arrangements for performance management for officers. these arrangements establish individual officer objectives that align with corporate priorities, and are measured at 6-month intervals
- Professional development planning for Councillors informs the member induction and development programme

Page 148

Principle 1

Principle 1: Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law

CIPFA/ Solace behaviours and actions that demonstrate good governance in practice	The key processes and arrangements Sandwell Council has in place to demonstrate compliance with the principles of good governance
• Striving to optimise the use of the full powers available for the benefit of citizens, communities and other stakeholders. • Dealing with breaches of legal and regulatory provisions effectively. • Ensuring corruption and misuse of power are dealt with effectively.	• Corporate training and induction programmes ensure that Members and Officers have access to appropriate training to assist them in effectively executing their duties and understand the standards of behaviour expected of them • The Council has a programme of governance training for officers that focuses on key issues including procurement, contract management, budget management, decision making, report writing and transparency and accountability • The Member Development programme incorporates corporate governance themes. The corporate governance offer is tailored to Members undertaking a variety of different roles and responsibilities. • A central Register of interests for Councillors and officers is held and updated regularly. • Declarations of interest sought and recorded annually or, upon identification of a new interest, within 28 days. • The Council has a Gifts and Hospitality policy for Members and Officers. • Open and transparent decision-making arrangements, including an effective Audit and Risk Assurance Committee. • Robust and proper arrangements in place to ensure high standards of behaviour in dealing with the invitation of tenders and award of contracts and financial matters through effective Standing Orders, Financial Regulations and Procurement and Contract Procedure Rules. These have been refreshed as part of the Council's holistic review of democratic governance arrangements. • All Members were invited to participate in the review that was led by the Governance and Constitution Review Committee. Changes to the Councils Constitutional provisions in relation to Standing Orders, Finance Regulations and Contract Procedure rules were approved by Full Council in July, September, November and December 2022.

Page 149

Principle 1

Principle 1: Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law	
CIPFA/ Solace behaviours and actions that demonstrate good governance in practice	The key processes and arrangements Sandwell Council has in place to demonstrate compliance with the principles of good governance
	• The Council has a Modern Slavery policy and statement to ensure modern slavery is not taking place in any part of its own business or any of its supply chains.
	• Policies and processes on information governance in place and process in place for dealing with Freedom of Information Act requests, Environmental Information Regulations requests and Subject Access Requests.
	• Confidential reporting code (whistleblowing policy) which allows employees, partners, contractors and the public to make confidential complaints on matters of concern.
	• The Ethical Standards and Member Development Committee promotes and maintains high standards of conduct and ethical governance by Councillors and presents an Annual Report to the council setting out how it has discharged its functions. The committee receives regular reports on allegations of Elected Member misconduct and the outcome of each complaint.
	• Customer Complaints and Compliments Processes are in place.
	• Arrangements for dealing with (Councillors) standards allegations under the Localism Act 2011 are in place.
	• Compliance with CIPFA's "Statement on the role of the Chief Finance Officer in local government" which is reviewed on an annual basis.
	• Specific roles and responsibilities of Councillors are detailed in the Constitution.
	• Each Committee has clear terms of reference which are reviewed on an annual basis.
	• Anti-Money Laundering and Anti-Fraud and Corruption policies.
	• Compliance with Data Protection requirements, GDPR and related guidance.
	• Membership of various professional and advisory organisations (by both the council and professional officers) to help ensure up to date knowledge of legal and regulatory duties and responsibilities are maintained.
	• In March 2023, the Cabinet approved a refreshed corporate approach to the Equality, Diversity and Inclusion (EDI) agenda. Following the LGA Equality Framework the Councils is working to develop its future EDI strategy.

Page 150

Principle 2

Principle 2: Ensuring openness and comprehensive stakeholder engagement

CIPFA/ Solace behaviours and actions that demonstrate good governance in practice	The key processes and arrangements Sandwell Council has in place to demonstrate compliance with the principles of good governance
• Ensuring an open culture through demonstrating, documenting and communicating the organisation's commitment to openness. • Making decisions that are open about actions, plans, resource use, forecasts, outputs and outcomes. The presumption is for openness. If that is not the case, a justification for the reasoning for keeping a decision confidential should be provided. • Providing clear reasoning and evidence for decisions in both public records and explanations to stakeholders and being explicit about the criteria, rationale and considerations used. In due course, ensuring that the impact and consequences of those decisions are clear. • Using formal and informal consultation and engagement to determine the most appropriate and effective interventions/ courses of action. • Effectively engaging with institutional stakeholders to ensure that the purpose, objectives and intended outcomes for each stakeholder relationship are clear so that outcomes are achieved successfully and sustainably. • Developing formal and informal partnerships to allow for resources to be used more efficiently and outcomes achieved more effectively. • Ensuring that partnerships are based on trust, a shared commitment to change, a culture that promotes and accepts challenge among partners and that the added value of partnership working is explicit. • Establishing a clear policy on the type of issues that the organisation will meaningfully consult with to ensure that service (or other) provision is contributing towards the achievement of intended outcomes. • Ensuring that communication methods are effective, and that Councillors and officers are clear about their roles with regard to community engagement.	• The council's Constitution outlines the way in which it is organised to carry out its functions, powers, duties and obligations. It explains the structures and decision-making processes of the council and brings together in one document all the detailed rules and procedures that govern the behaviour of those who work for or represent the council. • The Constitution sets out how the council is accountable to the local community, the individual rights of citizens and sets out the role of the scrutiny function in engagement with the public and partners. • Cabinet reports include details of engagement and consultation activity undertaken as part of the decision-making process. • A Scrutiny Annual Report is produced, and individual scrutiny review reports are also undertaken and published. • Electronic communications and use of social media (Facebook, Twitter, YouTube, etc.). • Statutory Notices are published on a monthly basis and set out what key decisions the council's Executive is going to make. • The Committee Management Information System (Modern. gov) allows members of the public to examine agendas, reports, minutes and decisions of any meeting via the council's web site. • Full Council, Cabinet and certain committee meetings are webcast. • Reporting guidelines ensure consultation with all relevant officers takes place prior to submitting decision making reports. • Sandwell's Elected Member level decisions are taken in a public forum, at a formal meeting at a pre-advertised time and place so that the public and/or other Councillors of the council can attend. Decisions are only made in private if a report contains exempt information as defined by Schedule 12A of the Local Government Act 1972, as amended by the Local Government (Access to Information) (Variation) Order 2006. • The Freedom of Information policy and Publication Scheme provide details of information that is publicly accessible.

Page 151

Principle 2

Principle 2: Ensuring openness and comprehensive stakeholder engagement

CIPFA/ Solace behaviours and actions that demonstrate good governance in practice	The key processes and arrangements Sandwell Council has in place to demonstrate compliance with the principles of good governance
• Encouraging, collecting and evaluating the views and experiences of communities, citizens, service users and organisations of different backgrounds including reference to future needs. • Implementing effective feedback mechanisms to demonstrate how views have been taken into account. • Balancing feedback from more active stakeholder groups with other stakeholder groups to ensure inclusivity. • Taking account of the interests of future generations of tax payers and service users.	• Council's compliance with the data transparency agenda includes publication of all expenditure in excess of £500 and all spend on procurement cards. • Sandwell Trends provides data, intelligence and analysis of the people and places of Sandwell to inform decision making • The council has protocol and procedure in place in line with the Localism Act 2011 for dealing with requests in relation to assets of community value. • The Sandwell Vision 2030, Corporate Plan and Medium Term Financial Strategy set out the council's ambitions and plans, to achieve our vision. • Communication with officers through team briefs, staff surveys, the intranet, social media, newsletters, blogs, manager briefings and staff conferences. • Communication with representative bodies is conducted through the service area Joint Consultative Committees and the corporate Joint Consultative Panel. • The council website hosts a database of issues where we actively engage in public consultation. • The council consults with targeted stakeholders for specific projects using a variety of different consultation tools. • The MySandwell account allows residents to request services, report problems and track any enquiries they put in to the council. A mobile app has been developed to heighten public access to the Council • Improving resource use through effective business planning and appropriate application of techniques such as benchmarking and other approaches in order to determine how resources are allocated to achieve outcomes effectively and efficiently. • The council undertakes Equality Impact Assessments on issues that will affect our community.

Page 152

Principle

Principle 3: Defining outcomes in terms of sustainable economic, social, and environmental benefits	
CIPFA/ Solace behaviours and actions that demonstrate good governance in practice	The key processes and arrangements Sandwell Council has in place to demonstrate compliance with the principles of good governance
- Having a clear vision, which is an agreed formal statement of the organisation's purpose and intended outcomes containing appropriate performance indicators, which provide the basis for the organisation's overall strategy, planning and other decisions. - Specifying the intended impact on, or changes for, stakeholders including citizens and service users. It could be immediately or over the course of a year or longer. - Delivering defined outcomes on a sustainable basis within the resources that will be available. - Identifying and managing risks to the achievement of outcomes - Managing service users' expectations effectively with regard to determining priorities and making the best use of the resources available. - Considering and balancing the combined economic, social and environmental impact of policies and plans when taking decisions about service provision. - Taking a longer-term view with regard to decision making, taking account of risk and acting transparently where there are potential conflicts between the organisation's intended outcomes and short-term factors such as the political cycle or financial constraints. - Determining the wider public interest associated with balancing conflicting interests between achieving the various economic, social and environmental benefits, through consultation where possible, in order to ensure appropriate trade-offs. - Ensuring fair access to services.	- The council's Corporate Plan sets out how the council aims to achieve its ambitious Vision 2030 to deliver positive outcomes for the people of Sandwell. The Plan is supported by the council's Medium Term Financial Strategy which ensures that resources are targeted towards achievement of the council's priorities. - The council uses its combined spending power to work towards sustainable social and economic benefits. - The Black Country Core Strategy makes a valuable contribution to shaping future development, improving the safety and security of the area and reducing crime and disorder within the Borough and is linked into the West Midlands Combined Authority Strategic Economic Plan. - Annual reports including Scrutiny, Audit, Safeguarding Boards, provide details of performance against service specific activities. - Each directorate has a business plan which sets out how they will contribute to the delivery of the Council's corporate aims and objectives. - The MySandwell customer portal provides data derived from customer feedback for the use of service areas to direct improvements. - Value for money is assessed through External Audit, the Audit and Risk Assurance Committee reviews, service reviews and other external inspections. - A Strategic Risk Register identifies the key risks which may impact upon the delivery of key priorities and appropriate mitigating actions. This is regularly considered by the Audit and Risk Assurance Committee. - Decision making reports consider the sustainability of proposals as well as health, social value and financial implications. - Cabinet Workshop meetings are regularly held to set the strategic direction and identify priorities in response to available resources, identified need, statistical evidence and citizen feedback.

Principle 4

Principle 4: Determining the interventions necessary to optimise the achievement of the intended outcomes

CIPFA/ Solace behaviours and actions that demonstrate good governance in practice	The key processes and arrangements Sandwell Council has in place to demonstrate compliance with the principles of good governance
• Ensuring decision makers receive objective and rigorous analysis of a variety of options indicating how intended outcomes would be achieved and associated risks. Therefore, ensuring best value is achieved however services are provided. • Considering feedback from citizens and service users when making decisions about service improvements or where services are no longer required in order to prioritise competing demands within limited resources available including people, skills, land and assets and bearing in mind future impacts. • Establishing and implementing robust planning and control cycles that cover strategic and operational plans, priorities and targets. • Engaging with internal and external stakeholders in determining how services and other courses of action should be planned and delivered. • Considering and monitoring risks facing each partner when working collaboratively, including shared risks. • Ensuring arrangements are flexible and agile so that the mechanisms for delivering goods and services can be adapted to changing circumstances. • Establishing appropriate key performance indicators (KPIs) as part of the planning process in order to identify how the performance of services and projects is to be measured. • Ensuring capacity exists to generate the information required to review service quality regularly. • Preparing budgets in accordance with objectives, strategies and the Medium Term Financial plan. • Informing medium and long-term resource planning by drawing up realistic estimates of revenue and capital expenditure aimed at developing a sustainable funding strategy.	• The council's Constitution sets out our approach to decision making and details the responsibilities for and principles of decision making within the council. This was reviewed, revised and approved by Council during 2022. • Decision making reports include alternative options available and details of any significant risks associated with the proposals. • There are clear timescales for the submission of reports to Council, Cabinet and committee's and a compulsory consultation process to evidence the review of reports prior to submission to Councillors. Reports are structured to identify options for consideration along with an analysis of outcomes, any identified risks and associated mitigating measures. • The council's Medium Term Financial Strategy is updated annually. The strategy sets out how the council wishes to structure and manage its finances now and, in the future, and to ensure this approach facilitates delivery of the its vision, aims and objectives. • Directorates produce individual business plans which are reviewed annually and set out the vision and strategy for services. • Electronic communications and use of social media (Facebook, Twitter, YouTube, etc.) as tools for community engagement • Communication with staff is through manager briefings, team briefs, staff surveys, the intranet, social media, newsletters and blogs. • Communication with representative bodies is conducted through the service area Joint Consultative Committees and the corporate Joint Consultative Panel. • Partnerships are in place where the council has arrangements to deliver services jointly or through other organisations. The effectiveness of these arrangements is assessed through partnership boards or contract monitoring. • The Council has established Towns Fund Boards to deliver the Towns Fund Programmes in each of the towns in receipt of funding. The boards are comprised of a series of partners and has a defined and established governance framework that complies with national requirements and are regularly reviewed in line with each phase of the programme

Principle 4

Principle 4: Determining the interventions necessary to optimise the achievement of the intended outcomes	
CIPFA/ Solace behaviours and actions that demonstrate good governance in practice	The key processes and arrangements Sandwell Council has in place to demonstrate compliance with the principles of good governance

- Ensuring the Medium Term Financial strategy integrates and balances service priorities, affordability and other resource constraints.
- Ensuring the budgeting process is all-inclusive, taking into account the full cost of operations over the medium and longer term.
- Ensuring the Medium Term Financial strategy sets the context for ongoing decisions on significant delivery issues or responses to changes in the external environment that may arise during the budgetary period in order for outcomes to be achieved while optimising resource usage.
- Ensuring the achievement of 'social value' through service planning and commissioning.

- Partnership risks are identified in relevant risk registers.
- The council has a strategic risk register and a Brexit strategic risk register that identifies the key risks which may impact upon the delivery of key services and the effectiveness of the council's response to the pandemic.
- The Sandwell Vision 2030, Corporate Plan and Medium Term Financial Strategy set out the council's improvement plan,
- Detailed plans for annual budgets are prepared and presented to council for approval alongside financial plans for the medium term. Regular reports are presented to the Budget and Corporate Scrutiny Management Board where the council's performance against budget is monitored.
- A corporate performance management framework tracks delivery of the council's strategy and performance of its services, with regular reporting to senior officers, Cabinet and Scrutiny which informs where action is required to address issues identified.
- Annual reports including Scrutiny, Audit, Safeguarding, provide details of performance against service specific activities.
- The council has guidance for compliance with the Public Services (Social Value) Act 2012. The Act requires all Public Services contracts above the OJEU threshold to be subject to appropriate social value criteria. While the Act is only compulsory for this category of contracts it was agreed that the council will consider social value criteria within all contracts.
- The Anchor Network Partnership establish priorities and assist in informing and developing community wealth projects.
- Improving resource use through appropriate application of techniques such as benchmarking and other options in order to determine how resources are allocated so that defined outcomes are achieved effectively and efficiently.
- An Equality Impact Assessment is a compulsory consideration for all cabinet reports.

Principle 5

Principle 5: Developing the entity's capacity, including the capability of its leadership and the individuals within it	
CIPFA/ Solace behaviours and actions that demonstrate good governance in practice	The key processes and arrangements Sandwell Council has in place to demonstrate compliance with the principles of good governance

- Developing protocols to ensure that elected and appointed leaders negotiate with each other regarding their respective roles early on in the relationship and that a shared understanding of roles and objectives is maintained.
- Publishing a statement that specifies the types of decisions that are delegated and those reserved for the collective decision making of the governing body.
- Ensuring the leader and the chief executive have clearly defined and distinctive leadership roles within a structure whereby the chief executive leads in implementing strategy and managing the delivery of services and other outputs set by Councillors and each provides a check and a balance for each other's authority.
- Developing the capabilities of Councillors and senior management to achieve effective leadership and to enable the organisation to respond successfully to changing legal and policy demands as well as economic, political and environmental changes and risks by:
- Ensuring Councillors and staff have access to appropriate induction tailored to their role and that ongoing training and development matching individual and organisational requirements is available and encouraged.
- Ensuring Councillors and officers have the appropriate skills, knowledge, resources and support to fulfil their roles and responsibilities and ensuring that they are able to update their knowledge on a continuing basis.
- Ensuring personal, organisational and system-wide development through shared learning, including lessons learnt from governance weaknesses both internal and external.
- Ensuring that there are structures in place to encourage public participation.
- Taking steps to consider the leadership's own effectiveness and ensuring leaders are open to constructive feedback from peer review and inspections.

- Cabinet member portfolios are aligned to 10 Ambitions.
- The roles and responsibilities of the cabinet are set out in the council's Constitution, including the scheme of delegation.
- Annual reports including Scrutiny, Audit, Safeguarding, provide details of performance against service specific activities.
- Youth Parliament which encourages young people to engage with the council and its democratic processes.
- Protocol for Elected Member/Officer Relations included within the council's constitution.
- There is a Member Development Programme and newly Elected Member induction, that aim to meet the needs of the organisation and elected members. This is reviewed and adapted on an annual basis. Corporate Governance is a core element of both the induction and wider development programme
- The council's Leadership Team has a defined role and area of responsibility and all senior officers have job descriptions which set out respective responsibilities and accountabilities.
- Regular briefings are scheduled between the Leader, Commissioners and the Chief Executive to discuss current and emerging issues that need to be addressed corporately. Any associated member development needs are routinely considered
- The council-wide process for understanding the performance and professional development needs of our employees along with a suite of policies to support employee performance toward delivering excellence.
- Employee engagement survey helps understand how the council is performing against other organisations both in the public and private sector and identifies services and areas for improvement.
- Induction programme for staff and ongoing appraisal, training and development.
- The council-wide process for understanding the performance and professional development needs of our employees along with a suite of policies to support employee performance toward delivering excellence.

Principle 5

Principle 5: Developing the entity's capacity, including the capability of its leadership and the individuals within it	
CIPFA/ Solace behaviours and actions that demonstrate good governance in practice	The key processes and arrangements Sandwell Council has in place to demonstrate compliance with the principles of good governance
• Holding staff to account through regular performance reviews which take account of training or development needs. • Ensuring arrangements are in place to maintain the health and wellbeing of the workforce and support individuals in maintaining their own physical and mental wellbeing.	• Developing and maintaining an effective workforce plan to enhance the strategic allocation of resources, including, Planned Leavers, Sandwell Graduate Programme and the Modern Apprentice programme. The council invests in its current and future leaders through the 'Future Engage Deliver' programme for all senior management and managers. • Suite of clear policies and support mechanisms in place to maintain the health and wellbeing of its workforce, including access to Occupational Health, Employee Assistance and Counselling service, Wellbeing Hub, remote and flexible working. • The Local Government Association undertook a Corporate Peer Review in 2018 with a follow up review in 2022 The council has developed an action plan to address areas for continuous improvement that were identified by the review process. • Engagement in national and local benchmarking exercises to help identify whether the council is performing well and identify areas for improvement. • External inspections including Ofsted and external audit assess the capability and capacity of senior officers • Assessment against CIPFA's "Role of the Chief Financial Officer" and the "Role of the Head of Audit".

Page 157

Principle 6

Principle 6: Managing risks and performance through robust internal control and strong public financial management	
CIPFA/ Solace behaviours and actions that demonstrate good governance in practice	The key processes and arrangements Sandwell Council has in place to demonstrate compliance with the principles of good governance
• Recognising that risk management is an integral part of all activities and must be considered in all aspects of decision making. • Implementing robust and integrated risk management arrangements and ensuring that they are working effectively • Ensuring that responsibilities for managing individual risks are clearly allocated. • Monitoring service delivery effectively including planning, specification, execution and independent post implementation review. • Making decisions based on relevant, clear objective analysis and advice pointing out the implications and risks inherent in the organisation's financial, social and environmental position and outlook. • Ensuring an effective scrutiny or oversight function is in place which provides constructive challenge and debate on policies and objectives before, during and after decisions are made thereby enhancing the organisation's performance and that of any organisation for which it is responsible (Or, for a committee system) Encouraging effective and constructive challenge and debate on policies and objectives to support balanced and effective decision making. • Providing Councillors and senior management with regular reports on service delivery plans and on progress towards outcome achievement. • Ensuring there is consistency between specification stages (such as budgets) and post implementation reporting (e.g. financial statements). • Aligning the risk management strategy and policies on internal control with achieving objectives. • Evaluating and monitoring risk management and internal control on a regular basis. • Ensuring effective counter fraud and anti-corruption arrangements are in place.	• The council has assessed itself against the six core principles in the CIPFA Financial Management Code and has prepared an action plan to address any areas of improvement for implementation from 2022 to 2024. • The corporate risk management policy and strategy sets out the processes in place to manage risk across the organisation and the roles and responsibilities of officers and Councillors in this respect. The Audit and Risk Assurance Committee has oversight of risk management and is the council's primary body in respect of related issues. • Partnership governance arrangements are in place where the council delivers services jointly or through other organisations. The effectiveness of these arrangements is assessed through partnership boards or contract monitoring. • Regular reports to scrutiny boards, Audit and Assurance Committee and Full Council include annual Scrutiny, Audit, safeguarding reports and quarterly monitoring reports from Children's Services Commissioner which provide details of performance against service specific activities. • A comprehensive review of the Councils Scrutiny function was completed in 2022. Recommendations arising from the review have been implemented and are embedding across the organisation. • The Constitution contains a section on decision making which details the responsibilities for and principles of decision making within the council. • The Committee Management Information System on the council's website advertises when committee meetings will take place and publicises the agenda, reports (unless legislative exemptions apply) and minutes of the meeting. • A corporate performance management framework tracks delivery of the council's strategy and performance of its services, with regular reporting to senior officers, Cabinet and Scrutiny which informs where action is required to address issues identified. • The council has a scrutiny function which considers financial and corporate performance, making recommendations through to the cabinet. • Decision making reports have a standard template ensuring that the financial and risk implications of the decisions are explicit. • The council's Constitution states that it will exercise all its powers and fulfil its duties in accordance with the law and the Constitution and the Monitoring Officer ensures that this is complied with. • The council has Financial Regulations and Procurement and

Principle 6

Principle 6: Managing risks and performance through robust internal control and strong public financial management	
CIPFA/ Solace behaviours and actions that demonstrate good governance in practice	The key processes and arrangements Sandwell Council has in place to demonstrate compliance with the principles of good governance
• Ensuring additional assurance on the overall adequacy and effectiveness of the framework of governance, risk management and control is provided by the internal auditor. • Ensuring an audit committee or equivalent group/ function, which is independent of the executive and accountable to the governing body. • Provides a further source of effective assurance regarding arrangements for managing risk and maintaining an effective control environment. • That its recommendations are listened to and acted upon • Ensuring effective arrangements are in place for the safe collection, storage, use and sharing of data, including processes to safeguard personal data. • Ensuring effective arrangements are in place and operating effectively when sharing data with other bodies. • Reviewing and auditing regularly the quality and accuracy of data used in decision making and performance monitoring. • Ensuring financial management supports both long term achievement of outcomes and short-term financial and operational performance. • Ensuring well-developed financial management is integrated at all levels of planning and control, including management of financial risks and controls.	• Appropriate Schemes of Delegation to Cabinet Members and Officers are in place. • The Internal Audit function and Corporate counter-fraud function are in place to provide independent assurance on risk areas. Assurance is based on completion of an annual internal plan, approved by the Audit and Risk Assurance Committee and presentation of progress reports and an annual report to the Committee. • An Annual Governance Statement, which provides assurances that the Council's governance arrangements are robust is published with the Annual Statement of Accounts. • The Audit and Risk Assurance Committee has clear terms of reference and receives regular training updates. • The Audit and Risk Assurance Committee presents its annual report to Council detailing how it has met its constitutional functions. • Suite of information governance policies are in place to manage data in compliance with the law. • Codes of Conduct and declarations of interest ensure appropriate safeguards are in place for potential conflicts of interest. • Customer Complaints and Compliments Process are in place and a Local Government Ombudsman Annual Review is presented to the Audit and Risk Assurance Committee. • Process in place for dealing with Freedom of Information Act requests, Environmental Information Regulations requests and Subject Access Requests. • Confidential Reporting Code (whistleblowing policy) communicated to officers, Councillors, partners and contractors. • External Auditors provide an annual report which gives a conclusion on the council's arrangements to secure economy, efficiency and effectiveness in its use of resources. • An Information Governance framework to ensure compliance with Data Protection requirements and related guidance including General Data Protection Regulations.

Page 159

Principle 7

Principle 7: Implementing good practices in transparency, reporting, and audit to deliver effective accountability	
CIPFA/ Solace behaviours and actions that demonstrate good governance in practice	The key processes and arrangements Sandwell Council has in place to demonstrate compliance with the principles of good governance

- Writing and communicating reports for the public and other stakeholders in a fair, balanced and understandable style appropriate to the intended audience and ensuring that they are easy to access and interrogate.
- Striking a balance between providing the right amount of information to satisfy transparency demands and enhance public scrutiny while not being too onerous to provide and for users to understand.
- Reporting at least annually on performance, value for money and stewardship of resources to stakeholders in a timely and understandable way.
- Ensuring Councillors and senior management own the results reported.
- Ensuring robust arrangements for assessing the extent to which the principles contained in this Framework have been applied and publishing the results on this assessment, including an action plan for improvement and evidence to demonstrate good governance (the annual governance statement).
- Ensuring that this Framework is applied to jointly managed or shared service organisations as appropriate.
- Ensuring the performance information that accompanies the financial statements is prepared on a consistent and timely basis and the statements allow for comparison with other, similar organisations.
- Ensuring that recommendations for corrective action made by external audit are acted upon.
- Ensuring an effective internal audit service with direct access to Councillors is in place, providing assurance with regard to governance arrangements and that recommendations are acted upon.
- Welcoming peer challenge, reviews and inspections from regulatory bodies and implementing recommendations.

- Website reports on actions completed and decisions taken and provides access to the information on which decisions were made. Stakeholders are kept informed of future plans of the council and asked to become involved through the completion of consultation exercises.
- Annual reports produced by the various committees and are available on the council website.
- The Statement of Accounts is available through the council website. The public is able to inspect the councils accounts and discuss them with external auditors in advance of them providing their opinion on robustness.
- An Annual Governance Statement (AGS) is published with the Statement of Accounts. The AGS provides an accurate representation of the corporate governance arrangements and highlights areas where improvements are required and the action plan in place to address this which is monitored by the Audit and Risk Assurance Committee.
- Service support agreement with Sandwell Children's Trust stipulates requirements of the Trust to operate within this framework.
- Service Delivery Contract with the Trust sets out the respective responsibilities and accountabilities of the council and the Trust.
- External Auditors provide an annual report (ISA 260- Report to Those Charged with Governance) which gives a conclusion on the council's arrangements to secure economy, efficiency and effectiveness in its use of resources.
- Internal audit complies with the Public Sector Internal Audit Standards.
- Annual Internal Audit Report with opinion from the Head of Internal Audit.
- Assessment against CIPFA's role of the Head of Internal Audit
- Action plans resulting from review reports (internal audit, external audit, peer reviews, third party reviews), a named officer is given responsibility for completion and progress is monitored by the appropriate committee or senior officer.
- The corporate risk management policy and strategy sets out the processes in place to manage risk across partnerships and the roles and responsibilities of officers and Councillors in this respect.

Page 160

Principle 7

CIPFA/ Solace behaviours and actions that demonstrate good governance in practice	The key processes and arrangements Sandwell Council has in place to demonstrate compliance with the principles of good governance
• Gaining assurance on risks associated with delivering services through third parties and that this is evidenced in the annual governance statement. • Ensuring that when working in partnership, arrangements for accountability are clear and the need for wider public accountability has been recognised and met.	• Partnership governance arrangements are in place where the council delivers services jointly or through other organisations. The effectiveness of these arrangements is assessed through partnership boards or contract monitoring. • Annual assurances sought from the Trust through completion of an assurance statement which informs the Annual Governance Statement. • External inspections including Ofsted, and external audit assess council performance, of which the outcomes of which are reported as appropriate to Audit and Risk Assurance Committee, Scrutiny and Cabinet. • The Local Government Association undertook a Corporate Peer Review in 2018 with a follow up review in 2022. The Council has developed an action plan to address areas for continuous improvement that were identified by the review process. • External reviews were also undertaken by Cipfa and the Council's external auditors. Recommendations were incorporated into the Councils Improvement Plan, which is routinely monitored, and performance reported to central government • During 2022, the Council reviewed its constitutional provisions and refreshed core governance framework strands including Financial, Contract and Procurement Procedures alongside its arrangements for the acquisition and disposal of assets protocol • The corporate performance management framework includes a set of Key Performance Indicators which regularly track performance against desired outcomes, with reports incorporating benchmarking information with statistical neighbours where available.

Page 161

Report to Audit and Risk Assurance Committee

23 November 2023

Subject:	Work Programme for the 2023/24 Municipal Year
Contact Officer:	Johane Gandiwa Johane_Gandiwa@sandwell.gov.uk Committee and Constitutional Services Lead Officer

1 Recommendations

That the Committee notes the work programme for 2023/24 which will be kept under review during the year.

2 Reasons for Recommendations

2.1 The work programme for 2023/2024 is attached at Appendix 1 for the Committee's consideration. The programme covers the areas that are within the remit of the Audit and Risk Assurance Committee under its current terms of reference.

ONE COUNCIL
ONE TEAM

3   How does this deliver objectives of the Corporate Plan?

		A planned work programme will help the Audit and Risk Assurance Committee achieve its objectives.

4   Context and Key Issues

The work programme will be reviewed at each meeting.

5   Alternative Options

5.1   There are no alterative options. The matters outlined in the work programme fall within the remit of the Committee.

6   Implications

Resources:	
Legal and Governance:	There are no risks arising directly from this report.
Risk:	
Equality:	
Health and Wellbeing:	
Social Value	

7.   Appendices

Work programme for the 2023-24 municipal year

8.   Background Papers

None

ONE COUNCIL
ONE TEAM

Audit and Risk Assurance Committee Work Programme 2023/2024

Date of Meeting	Item	Responsible Officer
5 June 2023 **(Reports due 23 May)**	Council Improvement Plan	Kate Ashley
	Improvement Plan Risk Register	Kate Ashley
20 July 2023 **(Reports due 7 July)**	Counter Fraud Annual Report	Oliver Knight
	Directorate Risk Register – Borough economy	Alice Davey
	Strategic risk review – Customer Journey	Tony McGovern/Narinder Phagura
	Annual Internal Audit Report 2022/23	Peter Farrow
	Code of Corporate Governance	Elaine Newsome/Surjit Tour

[IL0: UNCLASSIFIED]

Date of Meeting	Item	Responsible Officer
21 September 2023 **(Reports due 11 September)**	Council Improvement Plan Update	Kate Ashley/ Rebecca Jenkins
	Improvement Plan Risk Register	Kate Ashley/Rebecca Jenkins
	Local Government and Social Care Ombudsman's Annual Report (TBC)	TBC
	Audit and Risk Assurance Committee Annual Report	Chair/Peter Farrow
	Strategic Risk Register Update	Narinder Phagura
	Directorate Risk Registers (x1) – Public Health	Narinder Phagura in consultation Liann Brookes-Smith.
23 November 2023 **(Reports due to 9 November)**	Internal Audit Update	Peter Farrow
	Council Improvement Plan Update	Kate Ashley/Rebecca Jenkins
	Improvement Plan Risk Register	Kate Ashley/Rebecca Jenkins
	Directorate Risk Registers (x1) - Finance	TBC
	Internal Audit Charter	Peter Farrow
	Report on Oracle Fusion	Interim Director Finance

[IL0: UNCLASSIFIED]

	Report on the effect of the current restructuring on the stability of the council	Shokat Lal

Date of Meeting	Item	Responsible Officer
18 January 2024 **(Reports due 5 January 2024)**	Directorate Risk Registers (x2)	Narinder Phagura in consultation with Directors
22 February 2024 **(Reports due 9 February)**	Strategic Risk Register Update	Narinder Phagura
	Council Improvement Plan Update	Kate Ashley/Rebecca Jenkins
	Directorate Risk Registers	Narinder and relevant Director(s)
	Internal Audit Update	Peter Farrow
	Internal Audit Plan 2024/25	Peter Farrow
	Audit and Risk Assurance Committee Terms of Reference Review	Peter Farrow

[IL0: UNCLASSIFIED]

Items – date to be determined:
Annual Governance Statement 2021/22 and 2022/23
Statement of Accounts 2021/22 and 2022/23
Various reports from the External Auditors as the Statement of Accounts are progressed.

Report to Audit and Risk Assurance Committee

21 September 2023

Subject:	Cabinet Forward Plan
Contact Officer:	Johane Gandiwa Johane_Gandiwa@sandwell.gov.uk Committee and Constitutional Services Lead Officer

1   Recommendations

That the Committee notes the content of the Cabinet Forward Plan.

2   Reasons for Recommendations

2.1   The Cabinet Forward Plan is attached at Appendix 1 for the Committee to note and highlight any concerns.

ONE COUNCIL ONE TEAM

3   How does this deliver objectives of the Corporate Plan?

		A planned work programme will help the Audit and Risk Assurance Committee achieve its objectives.

4   Context and Key Issues

The Cabinet Forward Plan will be reviewed at each meeting.

5   Alternative Options

5.1   There are no alterative options.

6   Implications

Resources:	
Legal and Governance:	There are no risks arising directly from this report.
Risk:	
Equality:	
Health and Wellbeing:	
Social Value	

7.   Appendices

Cabinet Forward Plan

8.   Background Papers

None

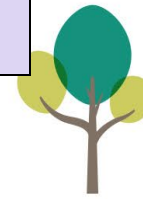**The following items set out key decisions to be taken by the Executive:-**

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
1	**Animal Welfare Policy – Forge Mill Farm** Contact Officer: Matthew Huggins Director: Alice Davey – Director of Borough Economy	**Cabinet -** Leader of the Council (Cllr Carmichael)		6 December 2023		

ONE COUNCIL ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
2	**RIPA Policy** Contact Officer: Vanessa Mahersmith Director – Surjit Tour, Director of Law and Governance	**Cabinet** – Leader of the Council (Cllr Carmichael)		6 December 2023		

ONE COUNCIL ONE TEAM

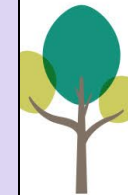|	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
3	**Improvement Plan update** Quarterly update of the Improvement plan and 6 monthly report to Secretary of State and recommendation to Council Contact Officer: Dawn Webster Director: Shokat Lal	**Cabinet** – Leader of the Council (Cllr Carmichael)	Public	6 December 2023	22 Nov- Budget and Corporate Scrutiny Board 23 Nov- ARAC	Improvement Plan Monitoring tool. Statutory recommendations Summary. Draft letter to Secretary of State.

ONE COUNCIL
ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
4	**Q2 Budget Monitoring 2023/24** Cabinet to note the current financial position and refer to Scrutiny Contact Officer: Rebecca Maher Director: Simone Hines	**Cabinet** – Finance & Resources (Cllr Piper)	Public	6 December 2023	Post -04/01/24	Appendices

ONE COUNCIL ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
5	**10 Year Business Rates Retention Agreement** Contact Officer: Claire Spencer Director: Brendan Arnold	Cabinet – Finance & Resources (Cllr Piper)	Public	6 December 2023	Post	Report: 10 Year Business Rates Retention Agreement Appendix – West Midlands Combined Authority Trailblazer Deeper Devolution Deal

ONE COUNCIL
ONE TEAM

Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
6 **STAR Redesign Project** Approval to proceed with the Star Service transformation change programme. Contact Officer: Colin Marsh Director: Rashpal Bishop - Director of Adult Social Care	**Cabinet -** Adults Social Care and Health (Cllr Hartwell)	Public	6 December 2023		Report Risk Register EIA

ONE COUNCIL ONE TEAM

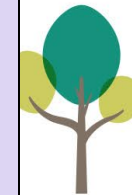|	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
8	**Highway Strategic Road Safety Plan 2023-2030** Contact Officer: Simon Chadwick Director: Alice Davey – Director of Borough Economy	**Cabinet -** Environment & Highways (Cllr Millard)		6 December 2023		

ONE COUNCIL ONE TEAM

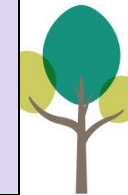|	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
9	**Smethwick to Birmingham Inclusive Growth Corridor Transport Package –** In Principle scheme approval and imposition of Highway Improvement Lines Contact Officer: Andy Miller – Strategic Planning & Transportation Manager Director: Tony McGovern – Director Regeneration & Growth	**Cabinet -** Regeneration & WMCA (Cllr Hughes)	Public	6 December 2023	N/A	

ONE COUNCIL
ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
10	**A461 Cycle, Walk and Bus Corridor – In Principle scheme approval** Contact Officer: Andy Miller – Strategic Planning & Transportation Manager Director: Tony McGovern – Director Regeneration & Growth	**Cabinet -** Regeneration & WMCA (Cllr Hughes)	Public	6 December 2023	N/A	

ONE COUNCIL
ONE TEAM

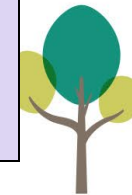|	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
11	**Wednesbury to Brierley Hill Extension Sustainable Access Measures – In Principle scheme approval** Contact Officer: Andy Miller – Strategic Planning & Transportation Manager Director: Tony McGovern – Director Regeneration & Growth	**Cabinet -** Regeneration & WMCA (Cllr Hughes)	Public	6 December 2023	N/A	

ONE COUNCIL
ONE TEAM

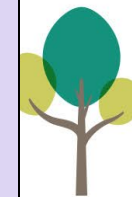|	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
12	**Future Use of Smethwick Swimming Centre – Options** Contact Officer: Luke Dove Director: Tony McGovern, Director of Regeneration and Growth	**Cabinet -** Regeneration & WMCA (Cllr Hughes)	N/A	6 December 2023	N/A	Cabinet Report

ONE COUNCIL ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
13	**Biodiversity Net Gain and Local Nature Recovery Strategy for Sandwell** Contact Officer: Andy Miller – Strategic Planning & Transportation Manager Director: Tony McGovern – Director Regeneration & Growth	**Cabinet -** Regeneration & WMCA (Cllr Hughes)	Public	6 December 2023	N/A	

ONE COUNCIL
ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
14	**Regeneration Programme Performance** Contact Officer: Jenna Langford Director: Tony McGovern	**Cabinet -** Regeneration & WMCA (Cllr Hughes)	Public	6 December 2023		Cabinet Report and Performance Report
15	**Midland Met Learning Campus Partnership Agreement** Contact Officer: Rina Rahim Director: Tony McGovern	**Cabinet -** Regeneration & WMCA (Cllr Hughes)	Public	6 December 2023		Cabinet Report

ONE COUNCIL
ONE TEAM

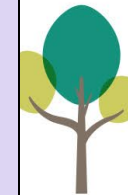|	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
16	**Annual Tenant Rent Review** Contact Officer: Nigel Collumbell Director: Dean Epton (Interim Director)	**Cabinet -** Housing (Cllr Rollins)	Public	6 December 2023		Cabinet Report – Annual Tenants Rent Review Appendices on Impact of Rental Increases

ONE COUNCIL
ONE TEAM

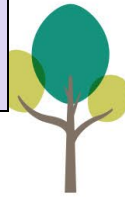|	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
17	**Child Friendly Sandwell** **Contact Office: Sally Giles, Samantha Harman, Sarah Sprung** **Director: Michael Jarrett**	**Cabinet –** Children, Young People and Education (Cllr Hackett)	Public	17 January 2024	N/A	Report and associated appendices

ONE COUNCIL
ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
18	**Proposed Relocation of Causeway Green Primary School to Brandhall Village Development, Oldbury** To approve the procurement of a new school development to replace existing facility. Contact Officer: Martyn Roberts Director: Michael Jarrett - Director of Children and Education	**Cabinet –** Children, Young People and Education (Cllr Hackett)	Public	17 January 2024	No	Report by Director of Children and Education

ONE COUNCIL
ONE TEAM

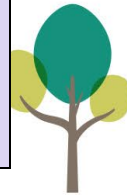|	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
7	**Sandwell Residential Education Service fees and charges** Contact Officer: Chris Davies, Residential Education and Educational Visits Services Director: Michael Jarrett – Director of Children and Education	**Cabinet –** Children, Young People and Education (Cllr Hackett)	Public	17 January 2024		Report

ONE COUNCIL
ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
19	**Regional Speed Enforcement** Contact Officer: Robin Weare Director: Alice Davey – Director of Borough Economy	**Cabinet -** Environment & Highways (Cllr Millard)		17 January 2024		

ONE COUNCIL
ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
20	**A4123 Cycle, Walk and Bus Corridor – In Principle scheme approval** Contact Officer: Andy Miller – Strategic Planning & Transportation Manager Director: Tony McGovern – Director Regeneration & Growth	**Cabinet -** Regeneration & WMCA (Cllr Hughes)	Public	17 January 2024	N/A	

ONE COUNCIL
ONE TEAM

Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
Social Value in Sandwell Policy Contact Officer: Jenna Langford Director: Tony McGovern	**Cabinet -** Regeneration & WMCA (Cllr Hughes	Public	17 January 2024		

ONE COUNCIL
ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
21	**Sandwell Cultural Compact** Contact Officer: Dawn Winter Director: Alice Davey – Director of Borough Economy	**Cabinet -** Leisure and Tourism (Cllr Padda)		17 January 2024		
22	**Archives Centre** Contact Officer: Dawn Winter Director: Alice Davey – Director of Borough Economy	**Cabinet –** Leisure and Tourism (Cllr Padda)		17 January 2024		

ONE COUNCIL
ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
23	**Grounds Maintenance Service Review** Outcome of service review to maintain service standards within available resources Contact Officer: Ben Percival Director: Alice Davey – Director of Borough Economy	**Cabinet -** Leisure and Tourism (Cllr Padda)		17 January 2024		

Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
24 **Cultural Development Fund Bid** Contact Officer: Dawn Winter Director: Alice Davey – Director of Borough Economy	**Cabinet -** Leisure and Tourism (Cllr Padda)		17 January 2024		

ONE COUNCIL
ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
25	**Events Governance and Safety Advisory Group Terms of Reference** Contact Officer: Matthew Huggins Director: Alice Davey – Director of Borough Economy	**Cabinet -** Leisure and Tourism (Cllr Padda)		17 January 2024		

ONE COUNCIL
ONE TEAM

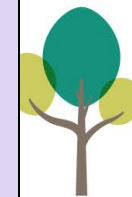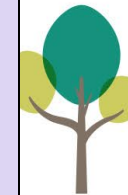|	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
26	**Fishing Policy** Contact Officer: Matthew Huggins Director: Alice Davey – Director of Borough Economy	**Cabinet -** Leisure and Tourism (Cllr Padda)		17 January 2024		
27	**Single Use Plastics Policy** **Contact Officer:** Phil Kingston **Director:** Tony McGovern	**Cabinet**	Public	17 January 2024	N/A	Cabinet Report Single Use Plastics Policy

ONE COUNCIL
ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
28	**Q3 Budget Monitoring 2023/24** Cabinet to note the current financial position and refer to Scrutiny Contact Officer: Rebecca Maher Director: Simone Hines – Director of Finance	**Cabinet** – Finance & Resources (Cllr Piper)	Public	7 February 2024	Post TBC	Appendices

ONE COUNCIL
ONE TEAM

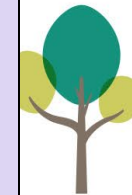|	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
29	**Revenues and Benefits Policy Framework 2024/25** Contact Officer: Ian Dunn Director: Brendan Arnold	**Cabinet –** Finance & Resources (Cllr Piper)	Public	7 February 2024		
30	**Heritage Strategy** Contact Officer: Dawn Winter Director: Alice Davey – Director of Borough Economy	**Cabinet –** Leisure and Tourism (Cllr Padda)		7 February 2023		

ONE COUNCIL
ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
31	**Community Hubs** Contact Officer: Helen Green	**Cabinet -** Public Health and Communities (Cllr Khatun)		7 February 2024		
32	**Boroughwide Public Spaces Protection Order Renewals / Extensions** Alcohol, Dogs & Use of BBQs on public land Contact Officer: Tessa Mitchell Director: Alice Davey	**Cabinet**		7 February 2024	January 2024	

ONE COUNCIL
ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
33	**Funding for Heritage – Oak House** Contact Officer: Dawn Winter Director: Alice Davey – Director of Borough Economy	**Cabinet** – Leisure and Tourism (Cllr Padda)		13 March 2024		
34	**Allotments Review and Strategy** Contact Officer: Matthew Huggins Director: Alice Davey – Director of Borough Economy	**Cabinet** - Leisure and Tourism (Cllr Padda)		13 March 2023		

ONE COUNCIL
ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
35	**Sandwell Valley Master Plan and 10 Year Business Plan** Contact Officer: Matthew Huggins Director: Alice Davey – Director of Borough Economy	**Cabinet -** Leisure and Tourism (Cllr Padda)		13 March 2024		

ONE COUNCIL
ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
36	**Safer Green Spaces Strategy** Contact Officer: Matthew Huggins Director: Alice Davey – Director of Borough Economy	**Cabinet -** Leisure and Tourism (Cllr Padda)		13 March 2024		

ONE COUNCIL ONE TEAM

	Title/Subject	Decision Maker	Public or exempt report? If exempt – state reason for exemption	Decision Date	Pre or post decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
37	**Bid to Arts Council England – Libraries Improvement Fund Round 3 (depending on amount)** Contact Officer: Dawn Winter Director: Alice Davey – Director of Borough Economy	**Cabinet -** Leisure and Tourism (Cllr Padda)		April 2024		

ONE COUNCIL ONE TEAM

ONE COUNCIL
ONE TEAM

This page is intentionally left blank