

# Agenda

# **Audit and Scrutiny Committee**

Tuesday, 8 March 2022 at 7.00 pm Council Chamber, Town Hall, Ingrave Road, Brentwood, Essex CM15 8AY

# Membership (Quorum - 3)

Cllrs Nolan (Chair), Tanner (Vice-Chair), Mrs Fulcher, Haigh, Hirst, Jakobsson, McLaren, Naylor and Mrs Pound

# **Substitute Members**

Cllrs Barber, Cuthbert, Mrs Hones, Laplain and White

**Agenda** 

Item Item Wards(s) Page No Affected

### Live broadcast

Live stream to start at 7pm and available for repeat viewing.

1. Apologies for Absence

2.	Minutes of the previous meeting		5 - 10
3.	Internal Audit Progress Report 2021/22	All Wards	11 - 58
4.	Risk Management	All Wards	59 - 78
5.	Formal Complaints & Performance Indicator Working Group	All Wards	79 - 106

- Local Development Plan Member Working Group Update All Wards 107 114
   Ordinary Council Motions 2021/2022 All Wards 115 124
   Review of Member Representation on Outside Bodies To Follow
   Scrutiny Work Programme 2021/22 All Wards 125 132
- 10. Urgent Business

An item of business may only be considered where the Chair is of the opinion that, by reason of special circumstances, which shall be specified in the Minutes, the item should be considered as a matter of urgency.

Jonathan Stephenson Chief Executive

Town Hall Brentwood, Essex 28.02.2022

#### Information for Members

### Substitutes

The names of substitutes shall be announced at the start of the meeting by the Chair and the substitution shall cease at the end of the meeting.

Where substitution is permitted, substitutes for quasi judicial/regulatory committees must be drawn from Members who have received training in quasi- judicial/regulatory decision making. If a casual vacancy occurs on a quasi judicial/regulatory committee it will not be filled until the nominated member has been trained.

### Rights to Attend and Speak

Any Members may attend any Committee to which these procedure rules apply.

A Member who is not a member of the Committee may speak at the meeting. The Member may speak at the Chair's discretion, it being the expectation that a Member will be allowed to speak on a ward matter.

Members requiring further information, or with specific questions, are asked to raise these with the appropriate officer at least two working days before the meeting.

# Point of Order/ Personal explanation/ Point of Information

#### Point of Order

A member may raise a point of order at any time. The Mayor will hear them immediately. A point of order may only relate to an alleged breach of these Procedure Rules or the law. The Member must indicate the rule or law and the way in which they consider it has been broken. The ruling of the Mayor on the point of order will be final.

### **Personal Explanation**

A member may make a personal explanation at any time. A personal explanation must relate to some material part of an earlier speech by the member which may appear to have been misunderstood in the present debate, or outside of the meeting. The ruling of the Mayor on the admissibility of a personal explanation will be final.

# Point of Information or clarification

A point of information or clarification must relate to the matter being debated. If a Member wishes to raise a point of information, he/she must first seek the permission of the Mayor. The Member must specify the nature of the information he/she wishes to provide and its importance to the current debate, If the Mayor gives his/her permission, the Member will give the additional information succinctly. Points of Information or clarification should be used in exceptional circumstances and should not be used to interrupt other speakers or to make a further speech when he/she has already spoken during the debate. The ruling of the Mayor on the admissibility of a point of information or clarification will be final.

# Information for Members of the Public

# (i) Access to Information and Meetings

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The council welcomes the filming, photography, recording and use of social media at council and committee meetings as a means of reporting on its proceedings because it helps to make the council more transparent and accountable to its local communities.

Where members of the public use a laptop, tablet device, smart phone or similar devices to make recordings, these devices must be set to 'silent' mode to avoid interrupting proceedings of the council or committee.

If you wish to record the proceedings of a meeting and have any special requirements or are intending to bring in large equipment then please contact the Communications Team before the meeting.

The use of flash photography or additional lighting may be allowed provided it has been discussed prior to the meeting and agreement reached to ensure that it will not disrupt proceedings.

The Chair of the meeting may terminate or suspend filming, photography, recording and use of social media if any of

these activities, in their opinion, are disrupting proceedings at the meeting.



# Private Session

Occasionally meetings will need to discuss some of its business in private. This can only happen on a limited range of issues, which are set by law. When a Committee does so, you will be asked to leave the meeting.



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# Evacuation Procedures

Evacuate the building using the nearest available exit and congregate at the assembly point in the Car Park.



# **Minutes**

# Audit and Scrutiny Committee Wednesday, 12th January, 2022

# **Attendance**

Cllr Nolan (Chair)

Cllr Mrs Fulcher

Cllr McLaren

Cllr Naylor

Cllr Hirst

Cllr Mrs Pound

# **Apologies**

Cllr Tanner (Vice-Chair)

# **Substitute Present**

Cllr Mrs Hones

# **Also Present**

Cllr Barber

Cllr White

Cllr Hossack

Cllr Aspinell

Cllr Bridge

Cllr Parker

Cllr Pearson

Cllr Poppy

Cllr Ms Sanders

# **Officers Present**

Jonathan Stephenson - Chief Executive

Steve Summers - Strategic Director (Deputy Chief Executive)

lan Winslet - Strategic Director - Regeneration and Housing

Development

Amanda Julian - Corporate Director (Law and Governance) and

**Monitoring Officer** 

Zoe Borman - Governance and Member Support Officer

# LIVE BROADCAST

Live broadcast to start at 7pm and available for repeat viewing.

# 256. Apologies for Absence

Apologies had been received from Cllr Tanner and Cllr Mrs Hones was substitute.

In the absence of the Vice-Chair, Cllr Nolan **MOVED** and Cllr Pound **SECONDED** that Cllr Hirst act as Vice-Chair for the duration of the meeting. This was **AGREED**.

# 257. Minutes of the previous meeting

The Minutes of the previous Audit & Scrutiny Committee held on 7<sup>th</sup> December 2021 were agreed as a true record.

Councillor Haigh reminded Committee that he had requested further details regarding the reported pension fund deficit of £43.2m and securities around the funds reported in the External Audit Plan at the last meeting. The Chair assured Cllr Haigh that this was currently being prepared by Mrs Van Mellaerts.

# 258. Chairs update

Following discussion, the report was noted by Members.

# 259. LDP Working Group report

The Local Development Plan (LDP) Member Working Group is an established engagement between Officers and Councillors focussed on delivery of the Council's Local Plan and related work. Its purpose was approved by Policy, Projects and Resources Committee in September 2017.

The work of the working group is monitored by the Audit and Scrutiny Committee as part of the committee's work programme. This report provides an update on the most recent meetings of the working group.

Cllr Fulcher raised a question relating to Appendix B and paragraph 2.2, the Dunton Hills Garden Village steering group minutes from 14 December 2021 regarding transport and the project to invest in upgrades to West Horndon Station. This matter will be directed to Mr Drane, Corporate Director – Planning and Economy, to answer.

Members noted the report.

# 260. Scrutiny work programme report

The Constitution requires that the Audit & Scrutiny Committee agrees its Scrutiny work programme at each meeting of the Committee. This report provided an update of the current scrutiny work programme and is set out in Appendix A.

In addition, as requested at the Audit & Scrutiny Committee on 6<sup>th</sup> July 2021 (min 77 refers) attached at Appendix B for information are the draft minutes of the Brentwood Leisure Trust Working Group held on the 20<sup>th</sup> December 2021.

Following discussion Cllr Nolan **MOVED** and Cllr Hirst **SECONDED** to approve the recommendations in the report.

A vote was taken by a show of hands and it was **RESOLVED UNANIMOUSLY**:

That the Committee considers and agrees the 2021/22 Scrutiny work programme as set out in Appendix A.

### **Reasons for Recommendation**

The Constitution requires that the Audit & Scrutiny Committee agrees its Scrutiny work programme at each meeting of the Committee.

# 261. Brentwood/Rochford Partnership

The purpose of this report was to update the Audit and Scrutiny Committee as to the Council's proposals for a strategic partnership with Rochford District Council ("RDC") ahead of a report being presented to an extraordinary meeting of the Council on 26 January 2022 following an extraordinary meeting of RDC on 25 January 2022 that will recommend.

The Committee is invited to pre-scrutinise the proposed contents of the report and the recommendations (in paragraph 3.1) proposed to be brought to the extraordinary meeting of Council, as the same are set out in paragraphs 2-4 inclusive in the report. The purpose of pre-scrutiny is to provide robust and constructive challenge and make any comment or suggestion which will improve the quality of that report before it is published.

Cllrs Hossack, Leader of Brentwood Borough Council and Cllr Wootton, Leader of Rochford District Council presented to Members of the Committee outlining the report. Angela Hutchings, Strategic Director at Rochford District Council was also in attendance to assist the committee with any enquiries.

Following a full discussion the following further recommendations were presented to Committee to be added to those set out in paragraph 3.1 of the report.

- That the MOU and/or other document that underpins the Strategic Partnership makes provision for member led Conflict Resolution process.
- That the MOU and/or other document that underpins the Strategic Partnership makes clear that whilst the division of the savings achieved as part of the transformation process is to be agreed between the two councils, that the starting point for that discussion should be 50/50.
- That further detail and clarification be provided as to the savings estimated to be achieved by the Partnership; how this would be achieved; the phasing of such savings; and in which financial years they would be realised.

A motion was **MOVED** by Cllr Nolan and **SECONDED** by Cllr Hirst to approve the recommendations in the report.

A vote was taken by a show of hands and it was **RESOLVED to**:

Consider the report and to provide robust and constructive challenge and make any recommendations to Council further to those set out in paragraph 3.1 of this report;

That the MOU and/or other document that underpins the Strategic Partnership makes provision for member led Conflict Resolution process.

That the MOU and/or other document that underpins the Strategic Partnership makes clear that whilst the division of the savings achieved as part of the transformation process is to be agreed between the two councils, that the starting point for that discussion should be 50/50.

That further detail and clarification be provided as to the savings estimated to be achieved by the Partnership; how this would be achieved; the phasing of such savings; and in which financial years they would be realised.

Subject to R1, recommend to Council to adopt the contents of this report.

### Reasons for Recommendation

It is proposed that the Council will be asked to consider the following Recommendations at its meeting on 26 January 2022:

- (1) To agree the Strategic Partnership between Rochford District Council and Brentwood Borough Council and that Jonathan Stephenson is the Joint Chief Executive for both councils;
- (2) To approve the Heads of Terms set out in Appendix A;
- (3) That the Joint Chief Executive and the Monitoring Officer of each council, be given delegated authority, in consultation with the Leader of each council, to enter into a Memorandum of Understanding and s113 Agreement to give effect to the Partnership;
- (4) That the Joint Chief Executive be given delegated authority to undertake a restructure of Tiers 2 and 3 of the councils in consultation with the Leader of each council:
- (5) That a maximum of £300,000 (as set out in paragraph 4.2 of this report) be allocated from general reserves to fund the additional programme resource for the Transformation Unit;
- (6) That the Monitoring Officer be given delegated authority in consultation with the Constitution Working Group to make any required changes to the Constitution to give effect to the recommendations in this report.
- (7) That the MOU and/or other document that underpins the Strategic Partnership makes provision for member led Conflict Resolution process.
- (8) That the MOU and/or other document that underpins the Strategic Partnership makes clear that whilst the division of the savings achieved as part of the transformation process is to be agreed between the two councils, that the starting point for that discussion should be 50/50.
- (9) That further detail and clarification be provided as to the savings estimated to be achieved by the Partnership; how this would be achieved; the phasing of such savings; and in which financial years they would be realised.

The Committee is asked to consider these recommendations as part of its pre scrutiny.

# 262. Urgent Business

There were no items of urgent business.

The meeting concluded at 2	0:45.

Committee: Audit and Scrutiny	Date: 8 March 2022
Subject: Internal Audit Progress Report 2021/22	Wards Affected: All
Report of: Jacqueline Van Mellaerts, Corporate Director (Finance & Resources) and Section 151 Officer	Public
Report Author/s: Jacqueline Van Mellaerts, Corporate Director (Finance and Resources) and Section 151 Officer Telephone: 01277 312500 E-mail: Jacqueline.vanmellaerts@brentwood.gov.uk	For Information

# **Summary**

This report is intended to inform the Audit and Scrutiny Committee of progress made against the 2021/22 internal audit plan.

The following reports have been finalised since the last Committee:

- Homelessness (Moderate/Moderate)
- Building control (Moderate/Moderate)

# **Main Report**

# Introduction and Background

- 1. This report is intended to inform the Audit and Scrutiny Committee of progress made against the 2021/22 internal audit plan. It summarises the work internal audit have done, together with their assessment of the systems reviewed and the recommendations they have raised.
- 2. Their work complies with Public Sector Internal Audit Standards. As part of their audit approach, they have agreed terms of reference for each piece of work with the risk owner, identifying the headline and sub-risks, which have been covered as part of the assignment. This approach is designed to enable them to give assurance on the risk management and internal control processes in place to mitigate the risks identified.
- 3. The Audit Committee approved the 2021/22 annual audit plan in March 2021. The progress against plan is reported at every Audit and Scrutiny Committee during 2021/22.

# Issue, Options and Analysis of Options

4. The following reports have been finalised since the last Committee:

- Homelessness (Moderate/Moderate)
- Building control (Moderate/Moderate)

The conclusion of the audits are as follows:

Homelessness (Moderate/Moderate)

5. Whilst the Council has a robust strategy, policy and procedures in place with regards to homelessness, and initial assessments are carried out in compliance with those procedures, we identified instances of non-compliance with respect to the 56 day rule for prevention or relief. In addition, there is scope for improvement in arrangements for maintaining evidence of independent review of cases and wider key performance indicator reporting.

Consequently, we conclude moderate assurance over both the design and operational effectiveness of the Council's homelessness processes and controls.

We have raised three medium and one low priority recommendations.

<u>Building control</u> (Moderate/Moderate)

6. The Council generally has adequate systems and processes in place to enable it to comply with the Building Control Regulations and a number of areas of good practice were identified. However, there is scope for improvement in how officers monitor and report on relevant KPIs. We also identified two instances of non-compliance in respect of the recording of approval processes for Full Plan applications and one instance of the Council exceeding the statutory period for completion of Full Plan applications.

Consequently, we provide moderate assurance on design and moderate assurance on the effectiveness of the key controls.

We have raised two medium priority recommendations.

- 7. A Summary of outstanding Recommendations from previous audits are included in Appendix B Follow up report.
- 8. This is regularly monitored by Senior Officers and will be followed up again ahead of the next Audit and Scrutiny Committee, along with other recommendations due by 30 June 2022.

# Consultation

Not applicable.

# Reasons for Recommendation

To monitor the progress of work against the internal audit plan.

# **References to Corporate Strategy**

To ensure the Council is effective and efficient by delivering services that are value for money and meet the needs of our residents.

# **Implications**

**Financial Implications** 

Name/Title: Jacqueline Van Mellaerts, Corporate Director (Finance & Resources)

and Section 151 Officer.

Tel/Email: 01277 312500/jacqueline.vanmellaerts@brentwood.gov.uk

There are no direct financial implications arising from this report.

**Legal Implications** 

Name & Title: Amanda Julian, Corporate Director (Law & Governance) and

**Monitoring Officer** 

Tel & Email: 01277 312500 / amanda.julian@brentwood.gov.uk

There are no legal implications arising from this report.

**Economic Implications** 

Name/Title: Phil Drane, Corporate Director (Planning & Economy)

Tel/Email: 01277 312500/philip.drane@brentwood.gov.uk

There are no direct economic implications arising from this report.

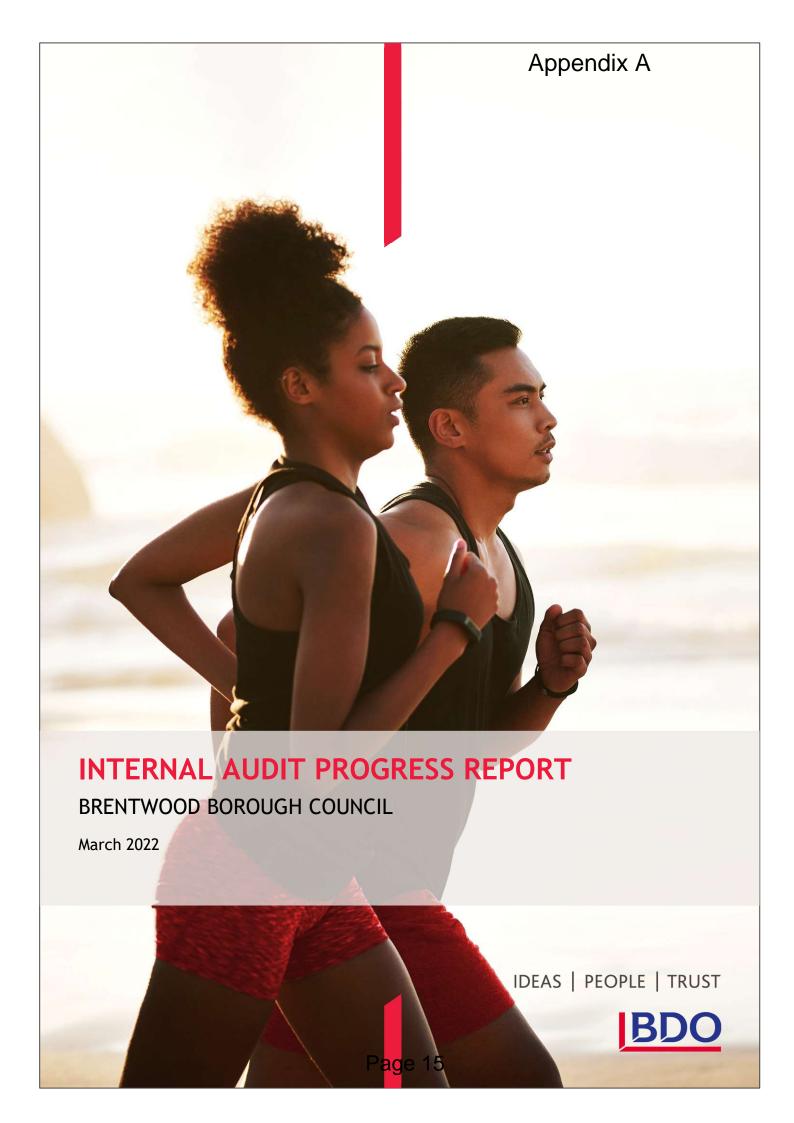
# **Background Papers**

None

# Appendices to this report

Appendix A: Internal Audit Progress Report Appendix B: Internal Audit Follow Up Report





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# SUMMARY OF 2021/22 WORK

### **Internal Audit**

This report is intended to inform the Audit and Scrutiny Committee of progress made against the 2021/22 internal audit plan. It summarises the work we have done, together with our assessment of the systems reviewed and the recommendations we have raised.

Our work complies with Public Sector Internal Audit Standards. As part of our audit approach, we have agreed terms of reference for each piece of work with the risk owner, identifying the headline and sub-risks, which have been covered as part of the assignment. This approach is designed to enable us to give assurance on the risk management and internal control processes in place to mitigate the risks identified.

# **Internal Audit Methodology**

Our methodology is based on four assurance levels in respect of our overall conclusion as to the design and operational effectiveness of controls within the system reviewed. The assurance levels are set out in Appendix 1 of this report, and are based on us giving either "substantial", "moderate", "limited" or "no". The four assurance levels are designed to ensure that the opinion given does not gravitate to a "satisfactory" or middle band grading. Under any system we are required to make a judgement when making our overall assessment.

For audits with a substantial or moderate assurance opinions, the executive summaries from the final report are included in the Internal Audit Progress Report. For audits with a limited or no assurance opinion, the full report will be included with the papers.

# 2021/22 Internal Audit Plan

The followings report have been finalised since our last progress report to the Audit and Scrutiny Committee, in December 2021 and the executive summaries are included in this report:

- Homelessness
- Building control

The following audits are in completion stage at the time of drafting this report:

- Partnerships
- Capital projects
- Section 106 agreements (including affordable housing)
- Main financial systems

The following audits are due to commence in March:

- Risk management
- · Financial planning and control
- Democratic services

# Changes to the Plan

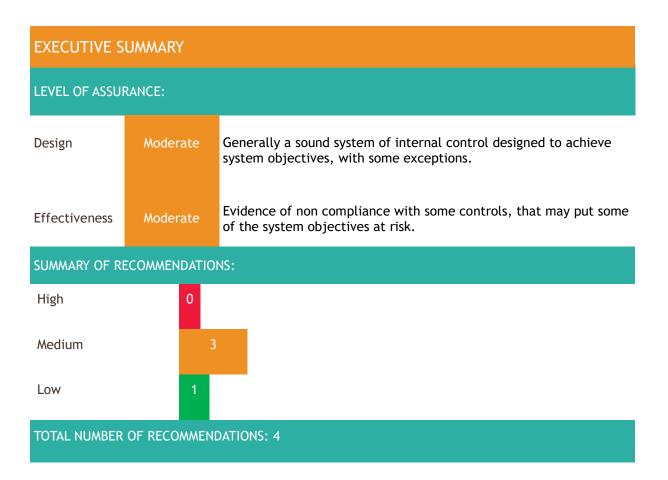
We agreed changes to the timings of the audit below, at the request of officers:

- Covid-19 Grants Expenditure moved from Q1 to Q2 completed in Q2
- Planning moved from Q2 to Q3 completed in Q3
- Building control moved from Q2 to Q4
- Democratic services moved from Q2 to Q4
- Affordable Housing moved from Q2 to Q4

# REVIEW OF 2021/22 WORK

Audit	Exec Lead	Start Date	Planning	Fieldwork	Reporting	Design	Effectivene ss
Affordable Housing (carried forward from 2020/21)	Tracey Lilley	Q4	<b>~</b>	<b>~</b>			
Risk Management	Jacqui Van Mellaerts	Q4	<b>~</b>				
Main Financial Systems	Jacqui Van Mellaerts	Q4	<b>~</b>	<b>~</b>			
Covid-19 Grants Expenditure	Jacqui Van Mellaerts	Q1	~	~	<b>✓</b> Final		
Financial Planning and Monitoring	Jacqui Van Mellaerts	Q4	<b>~</b>				
Capital projects	Jacqui Van Mellaerts	Q3	~	~			
Partnerships	Greg Campbell	Q3	<b>~</b>	<b>~</b>			
Local Development Plan	Phil Drane	Q2	<b>~</b>	<b>~</b>	<b>✓</b> Final		
IT Data Breaches	Sarah Bennett	Q2	<b>~</b>	~	<b>✓</b> Final		
Building Control	Phil Drane	Q4	<b>~</b>	<b>~</b>	<b>✓</b> Final		
Planning	Phil Drane	Q2	•	<b>~</b>	<b>✓</b> Final		
Housing - Homelessness	Tracey Lilley	Q3	•	<b>~</b>	<b>✓</b> Final		
Democratic Services	Amanda Julian	Q4	<b>~</b>				
Follow Up	Jacqui Van Mellaerts	Ongoing		Separate fo	ollow up report	S	

# **EXECUTIVE SUMMARY – HOMELESSNESS**



# **BACKGROUND:**

The borough of Brentwood has a relatively low number of homeless households, however is growing in line with the national average. The Council's Homelessness strategy notes that the two main reasons for homelessness within the borough is a loss of private rented sector accommodation and parental evictions.

The Homelessness Reduction Act 2017 came into force on 3 April 2018 and expanded the legal duties of councils to prevent or relieve homelessness within 56 days.

Where an individual is faced with the threat of becoming homeless, the Council has a duty to prevent this, by working with the individual to ensure they are able to remain in their current accommodation or providing them with alternative accommodation. Where an individual is already homeless, the Council has a duty to relieve homelessness, by providing emergency accommodation with the end goal being able to secure suitable accommodation. Where the Council is unable to meet the prevention or relief duty in the 56 day period, the Council still has a main housing duty, where the outcome is likely to be accommodation in the private sector or social housing.

The Act effectively means that the Council must provide meaningful help to everyone who is homeless or at risk of homelessness, irrespective of the status of their priority need, as long as they are eligible for assistance. The Act makes opportunities available to the applicant to request a review of decisions made by the Council at various stages in the application process. The Act has consequently led to an increase in the number of individuals who become active cases and the length of time spent with each household.

Individuals who are faced with the threat of homelessness or are already homeless are able to apply to the Council by completing a Housing Advice Request Form which is located online on the Council's Housing Assistance Referral Portal. Once completed, the applicant is contacted by a Housing Advice and Homelessness Prevention Officer.

All applications are received through the Locata system. The team responsible for receiving and reviewing homelessness applications consists of a Team Manager and three Housing Advice and Homelessness Prevention Officers, who are supported by a Temporary Accommodation Officer and an Administrator. The Administrator is responsible for allocating applications received to one of the Housing Advice and Homelessness Prevention Officers.

Applicants are required to prove their eligibility to receive support, by showing proof of citizenship/immigration status and proof that they are homeless or at the risk of becoming homeless, for example a Section 21 notice or a letter confirming such circumstances. If the Council are satisfied with the evidence provided, an initial assessment is carried out with a Housing Advice and Homelessness Prevention Officer to determine what support can be provided. If support can be provided, a Personalised Housing Plan (PHP) is created which sets out how the individual will be supported. The most common support offered is housing within the private rented sector.

Our audit tested a sample of 15 homelessness cases submitted and closed between April and November 2021, for evidence of initial assessments, sufficiency of documentation received, PHPs, timeliness of decision making, compliance with the 56 day rule and main housing duty, and review processes. We have also reviewed the Council's strategy, policy and procedures in this area and key performance reporting.

# **GOOD PRACTICE:**

Our audit identified the following good practice areas:

- Homelessness Strategy: The Council has a Homelessness Strategy 2020-2025, which was approved by the Environment, Enforcement and Housing Committee in January 2020. This strategy forms part of the Council's overall Housing Strategy 2021-2026. It clearly defines what homelessness and rough sleeping is; provides both national and local context; includes actions required to achieve the Council's strategic priorities; makes reference to key legislation; and names key partners such as Essex Police, YMCA and Basildon and Brentwood CCG. The achievement of the Homelessness strategy is monitored on a quarterly basis through an Action and Delivery Plan.
- Policies and procedures: The Homelessness Strategy is supported by the Housing Allocation Policy and Policy to Discharge into the private sector. There are also a suite of procedure notes available for staff involved in dealing with homelessness applications, including sign up process, sign off, risk assessment, triage, vulnerable applicants, case reviews and rent deposit scheme.
- Initial assessments: Our testing of a sample of homelessness cases found that in 14 out of 15 cases, there was evidence that an interview and initial assessment had been carried out in line with the Council's procedures. For the one instance where there was no initial assessment, the case was a triage case which was automatically closed after 28 days due to no correspondence from the applicant, therefore not considered to be an exception.

# **KEY FINDINGS:**

Our audit identified the following findings:

- Personalised Housing Plans: Our testing of a sample of homelessness cases found that in three out of 15 cases, a PHP was not published and could not be evidenced, although on further enquiry we found that there were valid reasons for two of the cases. (Finding 1 -Low)
- Timeliness of assessments and decisions (56 day rule): For the sample of homelessness cases tested, in nine instances the decision was made more than 56 days after the date the case was opened, although in three cases this was due to lack of information from the applicant and there was no evidence that the Council breached its main housing duty after the 56 day period had passed. (Finding 2 Medium)
- Independent review of cases: Whilst we were informed that the Housing Options Team Leader reviews cases through regular team meetings and meetings with individual case officers, there is no formal record of independent review of PHPs and approval for all decisions made. (Finding 3 Medium)
- **Performance Reporting:** Performance reporting to SLT and the Audit and Scrutiny Committee on a quarterly basis includes KPIs for the number of individuals in temporary accommodation and the number of individuals on the waiting list for local authority housing. However, there are currently no KPIs reported in relation to compliance with the 56 day rule, the number of homelessness applications, and type and the number of rough sleepers in the borough. (Finding 4 Medium)

# **CONCLUSION:**

Whilst the Council has a robust strategy, policy and procedures in place with regards to homelessness, and initial assessments are carried out in compliance with those procedures, we identified instances of non-compliance with respect to the 56 day rule for prevention or relief. In addition, there is scope for improvement in arrangements for maintaining evidence of independent review of cases and wider key performance indicator reporting.

Consequently, we conclude moderate assurance over both the design and operational effectiveness of the Council's homelessness processes and controls. We have raised three medium priority and one low priority recommendations.

# MANAGEMENT ACTION PLAN:

Recommendation	Priority	Management Response	Responsible Officer and Implementation Date
Timeliness of assessments and decisions (56 day rule)  Where cases are approaching the 56 day limit, the Council should review such cases as a priority to determine the cause of the delay and whether further information is required from the applicant, such that a decision can be made before the 56 day limit. Where cases have not met the 56 day rule, clear notes should be held on file explaining why.	Medium	A review will be undertaken to see what automatic reporting can be put in place with the Locata system to highlight cases approaching 56 days to ensure appropriate action is taken. The Senior Manager will undertake regular case reviews monthly which will be recorded on the Locata system.	Marie Gentgall (Housing Options Team Leader) 31 January 2022
Independent review and approval  The Council should ensure all PHPs are independently reviewed and approved on the Locata system before the decision letter is provided to the applicant.	Medium	There is currently a review and authorisation mechanism in place where decisions are being made on Statutory Homeless Cases. However, these are currently sent by email from Officers to a Senior Manager and, as identified, there is a risk that the authorisation document is not later uploaded to Locata due to human error. An interim measure to be put in place is that requests are made direct from the Locata system which will record when authorisation requests are made and allow for the Senior Manager to clearly record the outcome of a request.	Marie Gentgall (Housing Options Team Leader) 31 January 2022

# Performance reporting

The Council should review the KPIs that it reports to SLT as well as the Environment, Enforcement and Housing Committee in respect of homelessness, rough sleeping and temporary accommodation.

Consideration should be given to inclusion of the following KPIs:

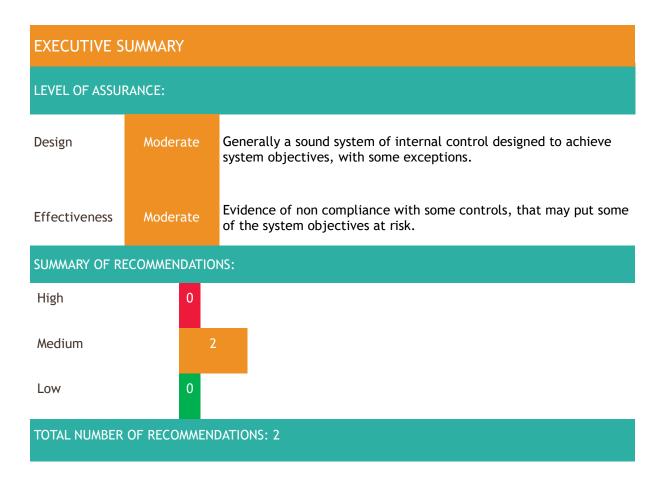
- The number of homelessness cases received as a cumulative total in the year and for the month
- The number of homelessness cases by case type i.e. prevention, relief, triage and decision
- The number of open and closed homelessness cases
- % of cases where the 56 day rule has been met
- Number of rough sleepers in the borough
- Number of referrals made via StreetLink.

Medium

A suite of KPIs and Service Standards is currently being prepared. The recommended KPIs referred to in this report will be included within the KPI document. Angela Abbott (Corporate Manager -Housing Needs and Delivery)

31 January 2022

# EXECUTIVE SUMMARY – BUILDING CONTROL



# **BACKGROUND:**

Local authorities have a legal duty to provide a building control service to the public under the Building Act 1984 and associated Building Regulations. This includes a duty to enforce the Act and the Regulations in their jurisdiction and retain ultimate responsibility for decision-making with regards to enforcement action.

The Building Regulations cover how applications should be made for domestic and commercial work, the duties and responsibilities of people involved, the actual technical requirements for each type of application and the timeframe in which local authorities may reject applications. The majority of building work requires consent under the Building Regulations.

The Council's building control service ensures that newly erected or altered buildings comply with Building Regulations and are safe and fit for people to live and work in. The building control services team works to acknowledge, process and approve applications in line with the Local Authority Building Control (LABC) ISO 9001 registered quality management system (QMS) procedures.

The Council may receive building applications in the form or either Full Plans or Building Notices. In the case of Full Plans, the Council receives the technical drawings and checks them for compliance with the Building Regulations. The building work may start before the Council approves the plan (unlike planning permission). In the case of Building Notices, notice of commencement of building work is given to the Council prior to commencement of work and the plans are not checked by the Council. In both cases, site inspections are carried out by Council surveyors, once notice of commencement of work is received, and the surveyors check the various stages of the work for compliance with the relevant technical requirements of the Building Regulations. A

completion certificate is issued upon completion if the works comply with the Building Regulations.

In addition, the Council may receive Initial Notices. These are notifications to the Council of intended building work by external 'Approved Inspectors' and the works can only commence once the notice has been registered as accepted by the Council. The Council has five days to review the notice and either accept or reject it. In these cases, there is no further involvement by the Council and the notifying contractor is responsible for procurement, site inspection and completion certificates.

We are informed that the Council received 230 Full Plans, 184 Building Notices and 276 Initial Notices in the period from 1 April 2021 to mid-January 2022.

The Council has a published Scheme of Charges which covered building regulation charges. The correct fees must be received before the Full Plan application or Building Notice can be accepted and a subsequent charge is receivable to cover the cost of all inspections after the first inspection.

The building control team will also respond to reports of unauthorised building works, usually tipped off by the public, to ensure that no construction is taking place without the appropriate approval and care for the regulations.

This audit reviewed the effectiveness of the Council's building control service including testing samples of Full Plan applications, Building Notices and Initial Notices to check if the required processes per the LABC procedures manual were adhered to and on a timely basis, that there was adequate evidence of site inspections (where relevant, as not all of the tested samples had reached completion stage yet at the time of the audit) and that the correct fees were charged by the Council.

# **GOOD PRACTICE:**

Our audit identified the following good practice areas:

- The Council has adopted the ISO-accredited LABC procedures manual, which clearly sets out the processes to follow in step-by-step flowcharts.
- The hardcopy case files for Full Plan and Building Notice applications are recorded on the system, with traceable reference numbers between the system records and the paper files.
- Our testing of a sample of 10 Initial Notices received and accepted found that they contain all the required information from the notifying contractor, as set out in the LABC procedures manual, such as signature and approval by the inspector, evidence of appropriate insurance and declarations regarding required consultations.
- The Building Control Team has appropriately qualified and experienced building surveyors, and where site inspections had commenced for the samples we tested, we found that site inspections were being conducted by a qualified officer.
- The Council's published Scheme of Charges clearly sets out the charges applicable to various applications and site inspections submitted. The correct fees are received by the Council in accordance with the Scheme. For 1 of the 10 Full Plan applications tested the fee fell outside of the published fee scales, however we were informed that this was due to the extensions being over 100m2 and therefore an individually determined charge was undertaken which was based on the time estimated to undertake the work.

# **KEY FINDINGS:**

Our audit identified the following findings:

- We found that in 2 out of 10 Full Plan applications tested, the relevant sections of the system were not adequately completed and the check screen updated to reflect items having been cleared prior to approval (Finding 1 Medium).
- Key performance indicators (KPIs), such as application completion deadlines, are currently
  monitored manually, with no central report informing management when applications
  should be completed/reviewed by and how the service is performing against ISO and
  statutory KPIs. For the 10 Full Plan applications sampled, one application review was
  completed 8 days after the statutory two month deadline (Finding 2 Medium).

# **CONCLUSION:**

The Council generally has adequate systems and processes in place to enable it to comply with the Building Control Regulations and a number of areas of good practice were identified. However, there is scope for improvement in how officers monitor and report on relevant KPIs. We also identified two instances of non-compliance in respect of the recording of approval processes for Full Plan applications and one instance of the Council exceeding the statutory period for completion of Full Plan applications.

Consequently, we provide moderate assurance on design and moderate assurance on the effectiveness of the key controls.

We have raised two medium priority recommendations.

# MANAGEMENT ACTION PLAN:

Recommendation	Priority	Management Response	Responsible Officer and Implementation Date
Approval of full plans  Training should be provided to all staff who use the system to ensure they fully understand their responsibilities when it comes to completing certain sections of the system as part of the Full Plan review process.  Management should carry out regular sample spot checks of the system, and where staff members are found to not be completing the required sections of the system, further training and feedback should be provided.	Medium	Agreed. Training has now been provided and we are monitoring whether this is being applied in practice. We plan to carry out spot checks as part of the ISO audit process. The first set of spot checks will be carried out at the end of March 2022 and initially every three months thereafter. The sample checks will cover 2022 Full Plans as this sample will reflect the move from hardcopy to digital documentation.	Rob Farman, (Senior Building Surveyor and Quality Management Officer) 30 June 2022
Key performance indicators  The service should request the Council's ICT department and third-party provider to enable functionality that allow management to download reports from the system which closely monitor progress against ISO and statutory KPIs. There should be reports that show:  - Application date and date approved or rejected versus the ISO and statutory completion date requirements - All current active applications being worked on - All rejected applications within a specified timeframe - All approved applications within a specified timeframe.  The Council should also liaise with the system service provider to ensure that the completion deadline dates are precisely calculated on the system.	Medium	Agreed. We will progress this action with our ICT department and third-party provider.	Gary Price- Sampson (Building Control Team Leader) 30 June 2022

# **KEY PERFORMANCE INDICATORS 2021/22**

Quality Assurance as per the Internal Audit Charter	KPI Results	RAG Rating
1. Annual Audit Plan delivered in line with timetable.	A few audits have been deferred, as detailed on page 3.	
2. Actual days are in accordance with Annual Audit Plan.	This KPI has been met.	
3. Customer satisfaction reports - overall score at least 70% for surveys issued at the end of each audit.	Survey responses received to date have been very positive.	
4. Annual survey to Audit Committee to achieve score of at least 70%.	2021/22 survey to be issued.	
5. At least 60% input from qualified staff.	This KPI has been met.	
6. Issue of draft report within 3 weeks of fieldwork 'closing' meeting.	This KPI has been met for 6 out of 6 audits (see table below).	
7. Finalise internal audit report 1 week after management responses to report are received.	This KPI has been met for 6 out of 6 audits (see table below).	
8. Positive result from any external review.	No external audit reviews have been carried out to date.	
9. Audit sponsor to respond to terms of reference within one week of receipt and to draft reports within two weeks of receipt.	The KPI regarding Council agreement of the terms of reference has been met for 8 out of 9 audits (see table below).  The KPI regarding draft report has been met for 6 out of 6 audits (see table below).	
10. Audit sponsor to implement audit recommendations within the agreed timeframe.	Of the 14 recommendations raised in 2021/22, 5 have been completed, 4 are in progress and 5 are not yet due.	
11. Internal audit to confirm to each meeting of the Audit and Scrutiny Committee whether appropriate cooperation has been provided by management and staff.	We can confirm that for the audit work undertaken to date, management and staff have supported our work and their co-operation has enabled us to carry out our work in line with the terms of reference through access to records, systems and staff as necessary.	

# AUDIT TIMETABLE DETAILS (2021/22 AUDITS)

Audit	Draft TOR issued	Management response to TOR received	Closing meeting	Draft report issued	Management response to draft report received	Final report issued
Affordable Housing	20/01/22	24/01/22 (KPI 9 met)				
Risk Management						
Main Financial Systems	02/02/22	02/02/22 (KPI 9 met)				
Covid-19 Grants Expenditure	28/07/21	02/08/21 (KPI 9 met)	02/09/21	10/09/21 (KPI 6 met)	15/09/21 (KPI 9 met)	20/09/21 (KPI 7 met)
Financial Planning and Monitoring						
Capital projects	04/11/21	08/11/21 (KPI 9 met)				
Partnerships	29/10/21	03/11/21 (KPI 9 met)				
Local Development Plan	13/08/21	18/08/21 (KPI 9 met)	31/08/21	10/09/21 (KPI 6 met)	13/09/21 (KPI 9 met)	20/09/21 (KPI 7 met)
IT Data Breaches	11/08/21	17/08/21 (KPI 9 met)	24/08/21	03/09/21 (KPI 6 met)	15/09/21 (KPI 9 met)	20/09/21 (KPI 7 met)
Building Control	24/01/22	1/02/22 (KPI 9 met)	07/02/22	21/02/22 (KPI 6 met)	28/02/22 (KPI 9 met)	28/02/22 (KPI 7 met)
Planning	04/11/21	15/11/21 (oral but not received in writing) (KPI 9 not met)	22/11/21	25/11/21 (KPI 6 met)	26/11/21 (KPI 9 met)	29/11/21 (KPI 7 met)
Housing - Homelessness	25/11/21	30/11/2021 (KPI 9 met)	22/12/21	22/12/21 (KPI 6 met)	23/12/21 updated 04/01/22 (KPI 9 met)	04/01/22 KPI 7 met)
Democratic Services						

# **KEY FOR RAG RATING:**

= met target

= not met target

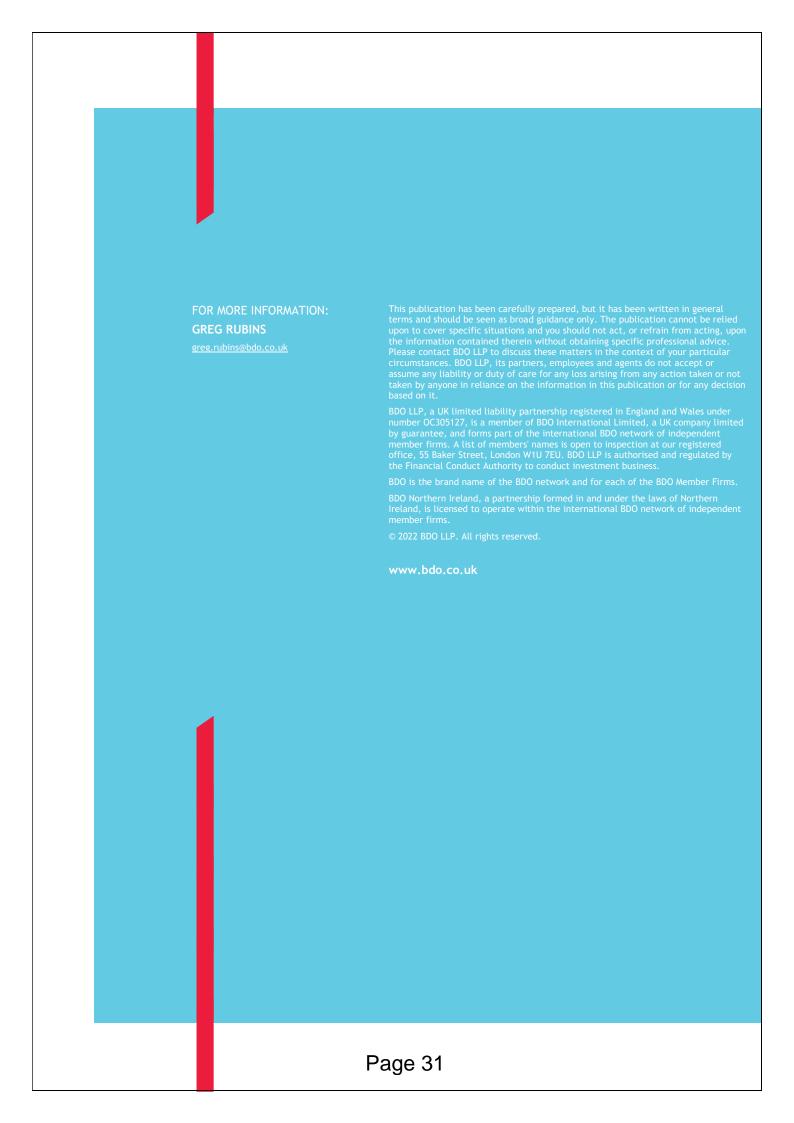
= partly met target

= not applicable

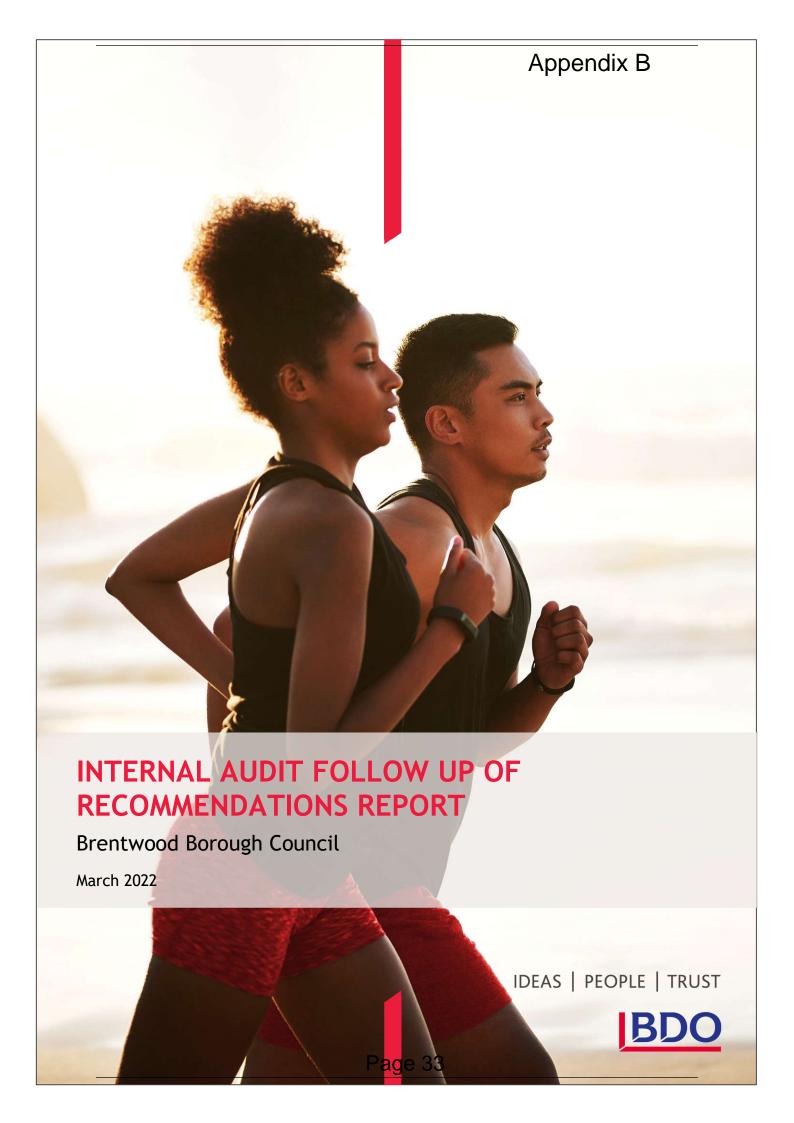
# **APPENDIX 1**

# **OPINION SIGNIFICANCE DEFINITION**

Level of Assurance	Design Opinion	Findings from review	Effectiveness Opinion	Findings from review
Substantial	Appropriate procedures and controls in place to mitigate the key risks.	There is a sound system of internal control designed to achieve system objectives.	No, or only minor, exceptions found in testing of the procedures and controls.	The controls that are in place are being consistently applied.
Moderate	In the main, there are appropriate procedures and controls in place to mitigate the key risks reviewed albeit with some that are not fully effective.	Generally a sound system of internal control designed to achieve system objectives with some exceptions.	A small number of exceptions found in testing of the procedures and controls.	Evidence of non compliance with some controls, that may put some of the system objectives at risk.
Limited	A number of significant gaps identified in the procedures and controls in key areas. Where practical, efforts should be made to address inyear.	System of internal controls is weakened with system objectives at risk of not being achieved.	A number of reoccurring exceptions found in testing of the procedures and controls. Where practical, efforts should be made to address inyear.	Non-compliance with key procedures and controls places the system objectives at risk.
No	For all risk areas there are significant gaps in the procedures and controls. Failure to address in-year affects the quality of the organisation's overall internal control framework.	Poor system of internal control.	Due to absence of effective controls and procedures, no reliance can be placed on their operation. Failure to address inyear affects the quality of the organisation's overall internal control framework.	Non compliance and/or compliance with inadequate controls.







# Summary

We have followed up on the status of those High (H) and Medium (M) recommendations due for implementation by 31 January 2022. The position as at 25 February 2022 is summarised below:

	Total H & M	Comp	lete	In Pro	gress	Overd	lue	Supers	seded	Not D	lue	% H & M Recs Completed / Superseded
	Recs	Н	М	н	М	Н	M	Н	M	Н	W	Superseded
2021/22	•											
Building control	2	-	-	-	-	-	-	-	-	-	2	0%
Homelessness	3	-	1	-	2	-	-	-	-	-	-	33%
Planning	3	-	-	-	-	-	-	-	-	-	3	0%
IT Data Breaches	4	-	2	-	2	-	-	-	-	-	-	50%
Local Development Plan	-	-	-	-	-	-	-	-	-	-	-	n/a
C-19 Grants Expenditure	2	-	2	-	-	-	-	-	-	-	-	100%
2020/21												
Risk Management	2	-	-	-	-	-	-	-	-	-	2	0%
Main Financial Systems	5	-	5	-	-	-	-	-	-	-	-	100%
Licensing	6	-	-	-	-	-	-	-	-	2	4	0%
Procurement & Contract	4	_	_	l <u>-</u>	4	_	_	_	_	l <u>-</u>	_	0%
Management												
Cyber security	3	-	1	-	-	-	2	-	-	-	-	33%
Street cleaning, Fly Tipping & Enforcement	6	-	-	2	2	-	-	-	-	-	2	0%
Disaster Recovery & Business Continuity	1	-	-	-	1	-	-	-	-	-	-	0%
Performance Management & Formal Complaints	1	-	1	-	-	-	-	-	-	-	-	100%
Sickness Absence	5	1	4	-	-	-	-	-	-	-	-	100%
Corporate Strategy	3	-	2	-	-	-	1	-	-	-	-	67%
Fraud risk assessment	13	1	12	-	-	-	-	-	-	-	-	100%
2019/20												
Risk Management	3	-	3	-	-	-	-	-	-	-	-	100%
Main Financial Systems	3	-	3	-	-	-	-	-	-	-	-	100%
Treasury Management	2	-	2	-	-	-	-	-	-	-	-	100%
Housing Repairs and Maintenance	1	-	1	-	-	-	-	-	-	-	-	100%
Leisure Services	2	-	2	-	-	-	-	-	-	-	-	100%
Housing Benefits	3	-	3	-	-	-	-	-	-	-	-	100%
Food Safety	1	-	1	-	-	-	-	-	-	-	-	100%
Trade Waste	1	-	-	-	-	-	1	-	-	-	-	0%
HR Recruitment	1	-	1	-	-	-	-	-	-	-	-	100%
2018/19		1					,		,	,		
Workforce Strategy	2	-	2	-	-	-	-	-	-	-	-	100%
Housing Department	2	1	1	-	-	-	-	-	-	-	-	100%
Main Financial Systems	6	-	6	-	-	-	-	-	-	-	-	100%
Housing - Homelessness	2	1	1	-	-	-	-	-	-	-	-	100%
GDPR Compliance	1	-	1	-	-	-	-	-	-	-	-	100%
Disaster Recovery and Business Continuity	3	-	3	-	-	-	-	-	-	-	-	100%
Local Development Plan	2	-	2	-	-	-	-	-	-	-	-	100%
Corporate Projects	3	-	3	-	-	-	-	-	-	-	-	100%
PCI/DSS Compliance	5	1	3	-	-	-	1	-	-	-	-	80%
2017/18 and c/f from 2016/1												
All audits	80	14	66		-	-	-	-	-		-	100%
	186	19	134	2	11	0	5	-	-	2	13	

#### **Total BDO Recommendations**

Of the total 186 recommendations (relating to 2017/18 to 2021/22), 171 were due to be implemented by 31 January 2022. We have confirmed with reference to evidence that 153 have been completed/closed. Two high priority recommendations are outstanding (2 in progress and 2 not yet due).

### 2021/22 Recommendations

Of the 12 recommendations raised in 2021/22, 5 have been completed, 4 are in progress and 5 are not yet due.

#### 2020/21 Recommendations

Of the 49 recommendations raised in 2020/21, 27 have been completed, 9 are in progress, 3 are overdue and 10 are not yet due. The not yet due recommendations include 6 Licensing recommendations (2 of which are high priority) which will be followed up by a further audit of the area (including sample testing) as part of the 2022/23 internal audit plan.

### 2019/20 Recommendations

Of the 17 recommendations raised in 2019/20, 16 have been completed and 1 is overdue.

#### 2018/19 Recommendations

Of the 26 recommendations raised in 2018/19, 25 have been completed and 1 is overdue.

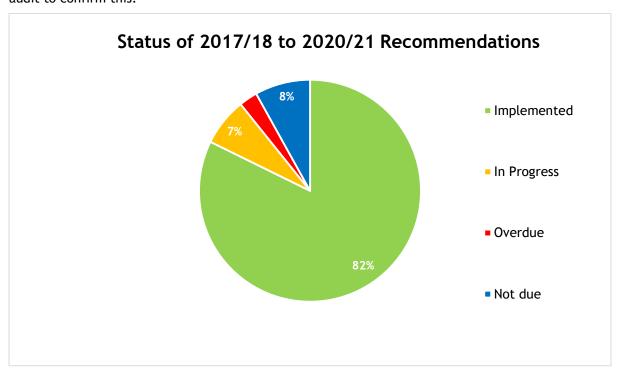
### 2016/17 and 2017/18 Recommendations

Of the 80 recommendations raised in 2016/17 and 2017/18, all have been closed.

Those which are overdue have surpassed both the original implementation date and the revised implementation dates more than once or no update has been received from officers.

Recommendations not completed will be followed up again ahead of the next Audit and Scrutiny Committee, along with other recommendations due.

Where recommendations are in progress, more information on the current status is provided in the pages that follow. This includes those recommendations where management has advised us that the recommendation has been implemented but evidence has yet to be received to enable internal audit to confirm this.



# Recommendations: Overdue

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
2018/19 - PCI/DSS Compliance		·		
18/19 PCI/DSS rec 5:	Medium	Tim Huggins	September	Management update:
A policy should be developed, which sets out how the Council will manage PCI DSS compliance activities and the policy should be reviewed on a regular basis. The		(ICT Manager)	June 2020 September 2020	The policy has been developed. Further work delayed to deliver priority services for Covid-19 response.
policy should include but not be limited to:  • Assignment of roles and			October 2020 December	Storage of data in within the information security policies and management of data is
responsibilities for ensuring that the Council is PCI DSS complaint have been assigned			2020 March 2021	part of the GDPR training.  Training to be made available.
<ul> <li>Procedures for staff that are responsible for taking card payments</li> </ul>			August 2021 October	Training has not yet been provided due to conflicting priorities with Covid-19 and
The Council's security strategy in relation to the storage, processing and transmission of credit card data			<del>2021</del> June 2022	limited resources. A review will need to be carried out on appropriate virtual training as there are now limited staff dealing with
A set of instructions for detecting, responding to and				card payments.  Internal audit comment:
limiting the effects of an information security event. The Council should develop and disseminate suitable procedure notes for staff, to ensure that working practices are compliant. Appropriate training should be provided on PCI DSS requirements to all members of staff dealing with card payments.				Internal Audit was previously satisfied from review of the policy dated November 2019 that these elements have been included. However, recommendation kept open until training has been provided.
2019/20 - Trade Waste				
a) Actively search and identify possible opportunities/events available to promote the trade waste service, ensuring that the market audience is understood prior to attending	Medium	Mike Dun (Trade Waste Officer)	a) March 2020 March 2021 September 2022	Management update:  Parts a) and d): Although these would have been something we would have liked to undertake, since the pandemic we have had to focus on keeping our
events to ensure they are aligned with the service's target market.  b) Liaise with the business rates team to ensure that trade waste leaflets with fee information are distributed as part of the annual business rates information packs.			b) October 2019 February 2020 Closed  c) October 2019	existing customers' needs met. We have had to adjust contracts continually as businesses have closed and opened on various occasions. This has consumed a large amount of admin time. We will being looking to promote
•				additional contracts but this is on hold until we manage

#### Recommendations: Overdue

Recommendation made	Priority	Manager	Due Date	Current Progress
c) Liaise with the food safety team to identify new businesses that may require trade waste services.  d) Undertake cold-calling of local businesses in the borough to attract new customers.	Level	Responsible	February 2020 Closed d) Ongoing 31 March 2021 March 2022 September 2022	to get our current data base correct for the April 2022 renewal.  Previous management update:  a) Staff issues and the impact of coronavirus have adversely affected progress.  We have now employed a Compliance & Performance Manager who is proactively seeking solutions to the challenges facing the Business Waste services.  We have circulated information on the new recycling service to all our clients by email, which has generated some interest.  b) A leaflet was drawn up that promotes the services of the Business Waste Team and was delivered in March along with the NDR demand to all businesses in Brentwood.  c) The Food Safety Team do refer to the waste services that the Council can offer.  d) Staff issues and the adverse impact of Corona Virus making this activity difficult at the moment. All efforts going on existing client base to protect it.  Internal audit comment:  Part b was previously closed following receipt of the leaflet.  Part c was previously closed following confirmation received from the service.  Parts (a) and (d) remain open. Moved from 'In progress' to 'Overdue'.

#### Recommendations: Overdue

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
2020/21- Cyber Security				
<ul> <li>20/21 CSec rec 1:</li> <li>a) The Council should establish a cyber security awareness programme for all staff and implement the approach that is planned to raise awareness for Members and senior management.</li> <li>b) Training completion should be monitored and there should be a record of all the training that has been provided and completed.</li> </ul>	Medium	Tim Huggins (ICT Manager)	July 2021 October 2021 April 2022 June 2022	Management update:  The Council has partnered with Evalian and is implementing their elearning portal for GDPR/DPA/Info Security training. The Council has signed up to a Phishing Exercises service and will be launching exercises. The Council has also partnered with CM Alliance for further cyber awareness training.  SLT and ELT have completed awareness training.  Awareness training for Members remains to be arranged. This will need to be pushed back until after May elections.  Internal audit comment:  Recommendation remains open until monitoring of the above awareness activity completion can be evidenced and awareness training for members completed. Moved from 'In progress' to 'overdue'.
20/21 CSec rec 2:  The draft Cyber Incident Response Plan should be finalised and approved and made available to all relevant members of staff.	Medium	Tim Huggins (ICT Manager)	May 2021 August 2021 October 2021 June 2022	Management update:  A draft Cyber Incident Response Plan has been developed with some of the supporting documentation - i.e. playbooks and treat actor library. There was a delay in the setting up IG group but that has now been agreed so will take plan to the group for sign off.  Internal audit comment: Remains open until fully complete and evidenced.

#### Recommendations: Overdue

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
2020/21 - Corporate Strategy				
20/21 CS rec 3:	Medium			Management update:
a) Management should ensure that the service plans for Corporate Finance, Risk & Insurance and Communications are completed and made available to staff.		Jacqui Van Mellaerts (Director of Corporate Resources)& Steve Summers (Chief	August 2021 October 2021	a) Outstanding service plans have been delayed due to other high priority commitments, however will be done in time for the next IG meeting in April 2022.
		Operating officer)	February 2022 April 2022	b) The task of matching projects and service plans was undertaken. A new Business plan has been developed and a projects and
b) The focus areas and annual targets in service plans should clearly identify and reference to each of the strategic objectives for the year, as relevant to each service.		Tim Huggins (ICT Manager)	January 2021 August 2021 October 2021 Complete	programmes board formally set up.  The Projects team will review the strategic outcomes for 2022/23 as well. To be agreed at next IG Group - April 2022.
				Internal audit comment:  Part (b) previously closed by Internal Audit. Part (a) remains open until we obtain evidence that all service plans have been completed.

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
2020/21 - Street cleaning, Fly Tippin				
20/21 ENV rec 1:  Performance standards and KPIs should be agreed as part of the service review and reviewed annually to ensure they reflect any changing business and service needs. The KPIs should be monitored on a monthly basis to ensure the Council is operating in compliance with the requirements of the revised CoP service standards and response times. Performance against the KPIs should be regularly reported to the Environmental, Enforcement and Housing Committee.	High	Darren Laver (Operations Manager)	December 2021 June 2022	The KPI for the
				Monitoring is currently undertaken on an infrequent basis. The Service however recognises the need to measure its performance. It has recently employed two supervisors, who are undertaking site visits on a daily basis. At present they document on a basic form of who and where they visit but at this stage they are not undertaking KPI inspections and recording. The service intends to introduce a system in April 2022.
				It should be noted that the Council has not been subject to a Litter Abatement Order. There is no evidence that the Council has allowed its land to fall below acceptable standards for longer than the allowed response time, however the service accepts that reporting to the Environmental, Enforcement and Housing Committee can be improved and this will be reviewed and tackled with appropriate performance measures that will be put into place.

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
				Internal audit comment:
				Recommendation remains open until KPI reporting is in place.
20/21 ENV rec 2:  The SCT should complete the N195 categorisation exercise identifying all the land they manage and reclassify them in the intensity of use zones as required by the revised CoP.  Supporting the database, a detailed annual work plan should be developed identifying all the land reclassified in the CoP zones, related cleansing activities and appropriate frequencies and timeframes should be allocated, depending on the response times required by the CoP and the resources available to the SCT.	Medium	Darren Laver (Operations Manager)	December 2021 June 2022	Management update:  Officers have decided to review street scene and grounds service delivery as a single entity in an effort to improve efficiencies. This work is being carried out in partnership with consultants to deliver a detailed list of cleansing schedules that will hopefully be superior to the CoP guidelines.  Internal audit comment:  Recommendation remains open until the detailed list of cleansing schedules is available.
A formal tracker should be maintained, including all mitigating actions raised as part of risk assessments, actions risk rated, allocated owners and fixed timeframes for implementation. Actions should be subsequently monitored with their status recorded to confirm implementation and sufficient formal supporting evidence retained. An explanation should be documented for any delays to the implementation timeframes.  Formal reports should be presented at Depot Health and Safety meetings to state the number of actions due, broken down into those outstanding and those that have been implemented within the required period.	Medium	David Wellings (Corporate Health & Safety Advisor)	December 2021	Management update:  Actions have been progressed to identify why mitigating actions, (known on the Council's H&S risk assessments as 'State the additional control measures') were being raised in the first place and as part of this audit action. It was found to be a partial misunderstanding by certain managers misinterpreting the reason for inserting the 'mitigating action' in the wrong column, rather than the correct column of 'Existing Controls' (what we are currently doing to manage the risk).  In addressing this audit action and taking into consideration the points raised about monitoring the actions, a revised risk assessment template has been produced to address these points. This is currently being populated with the first revised risk assessment which involves

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
				working with managers to ensure the actions are allocated in the correct columns, as well as identifying any 'additional control measures' / mitigating actions, that need to be addressed and the timeframe for this and the person responsible for this action.
				Further work is also being undertaken to record the further actions/ mitigating actions, as an action tracker, and their implementation through an excel spreadsheet which needs to be set up to monitor the further actions and their completion. This will be completed and shared with the Depot H&S meetings and respective managers as the service moves forward with the revised use and implementation of the new risk assessment format.
				Internal audit comment:
				First part of the recommendation closed by Internal Audit following receipt of an example of how the revised risk assessment tool is being completed. The recommendation will be closed in full once reporting to the Depot Health and Safety meetings take place.
20/21 ENV rec 6:	High	Daniel Cannon	October	Previous management
a) The Environmental Health and Enforcement Team should develop detailed protocols or procedures, providing guidance on their activities and current working practices. The protocols should include their current working arrangements including documentation, response targets and actions, follow up actions, risk profiling,		(Community Safety & CCTV Manager)	2021 February 2022 June 2022	Management agrees with some of the findings documented in the content of this report. The recommendations put forward were something the service were looking to implement as a department and this report only reiterated the

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress	
2020/21 - Disaster Recovery and Bus					
20/21 DRBC rec 1:	Medium	Sue White,	October	Management update:	
Management should perform a training needs analysis to identify and assess the level and type of training required by all members of staff with regards to business		(Risk and Insurance Officer)	<del>2021</del> June 2022	The Risk and Insurance Officer had a meeting with Zurich Risk Engineering in August 2021 to discuss this.	
continuity and disaster recovery and should develop a mandatory training programme that is based upon these requirements. Training delivery methods could include, but not be limited to, the exercise types suggested in Appendix I in our report. Attendance should be recorded and monitored and training records should be maintained for audit purposes.  Furthermore, Management should conduct a formally documented test of its business continuity and disaster recovery arrangements and should put arrangements in place to test them on a routine basis or following a significant change to the Council's operations. The results of the tests should be reported to Senior Management and any issues identified should be resolved in a timely manner.				The Council has agreed with Zurich that they will provide the training for extended leadership team (ELT) officers. Prior to the training, ELT members will be asked to make themselves familiar with their business continuity plan. If any officer is unable to attend Zurich will request they send a deputy in their place. The training will be for 2 ½ hours, during which Zurich will also present the group with a Cyber exercise which they will have no prior knowledge of.  A date has not yet been set, but is expected to be carried out in late April or early May.  Internal audit comment:  Recommendation remains	
				open until training and a test of business continuity arrangements has been carried out.	
2020/21 - Procurement and Contrac	t Manageme	ent			
20/21 P&CM rec 1:	Medium	Jane Mitchell		Management update:	
a) A training need analysis should be carried out and a training programme for contract management and procurement devised.		(Senior Procurement Officer)	June 2021 Closed	Training on contract management and procurement was discussed at a Senior Leadership Team meeting in February 2021. Actions	
b) Training in this area should be delivered to relevant members of staff according to their needs and completion of training should be overseen by				30 September 2021 March 2022	agreed were to repeat a diagnostic of the Council's contract management capability, and then to
the Senior Leadership Team.				Proposal for training received and approved.	

			<u> </u>		
Re	commendation made	Priority Level	Manager Responsible	Due Date	Current Progress
					Dates currently being planned.
					Internal audit comment
					Part (a) closed by Internal audit following receipt of the diagnostic results. Part (b) remains open until the training has been carried out.
20/	/21 P&CM rec 2:	Medium	Jane Mitchell (Senior		Management update:
a)	A senior member of the procurement team should review contract waiver documentation for current waivers to ensure that correct procedures are being followed and that information contained within the documents is consistent.		Procurement Officer)	June 2021 Closed	a) Waiver threshold reviewed. All Staff email sent noting change in statutory guidance on fairness and transparency in publishing tenders, change in threshold from £10,000 to £25,000 at which a waiver is required, and that all contracts over £25,000 now need to be published on Contracts Finder effectively making them open tenders.
b)	Evidence to support procurement activity should be organised and stored appropriately. A senior member of the procurement team should review procurement files to ensure accuracy and completeness.			<del>June 2021</del> March 2022	b) Training will be provided to members of staff to improve documentation. To be included in training noted under P&CM rec 1.
c)	The Council's procurement policies should be followed for all purchases over £10,000 (the minimum level at which quotations and tender exercises are required).			September 2021 March 2022	c) Training will be provided to members of staff to improve procurement processes. Change in requirements to be included in training noted under P&CM rec 1.
					Internal Audit comment:
					Part (a) closed by Internal audit following receipt of amended process note to staff. Parts (b) and (c) remain open until the

Re	commendation made	Priority Level	Manager Responsible	Due Date	Current Progress
					training has been carried out.
Evi ext sto are use pro	dence to support contract ensions should be organised and red appropriately so that they easily retrievable for future e. A senior member of the ocurement team should review documentation for adequacy d completeness.	Medium	Jane Mitchell (Senior Procurement Officer)	January 2022	Management update: When reviewing the Contracts Register and asked to extend a contract, the Procurement Officer to ask for evidence for the extension. This action is ongoing. Internal Audit comment: Recommendation remains open.
20/	/21 P&CM rec 4:	Medium	Jane Mitchell (Senior Procurement Officer)		Management update:
a)	Officers should be reminded of the need to send instructions for drawing up contracts on a timely basis and the importance of obtaining signed contracts.			<del>September</del> <del>2021</del> March 2022	a) To be included in training noted under P&CM rec 1.
b)	The finance team should be advised not to release payments to suppliers where a valid contract is not in place.			Closed	b) The recommendation was not accepted. Contracts do not have to be signed to be legal and do not agree that this would expose the Council to legal proceedings. However, the introduction of no Purchase-no Payment system will ensure that purchase orders are issued to suppliers under BBC terms and conditions.
					Internal Audit comment:  Part (a) remains open until the training has been carried out. Part (b) closed by Internal audit following receipt of evidence that No Purchase Order No Pay process has been implemented, as purchase orders carry the Council's terms and conditions.

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
2021/22 - IT Data Breaches				
a) Management should review and update the Council's Data Protection policy and Data Breach policy to ensure that it remains in compliance with the UK GDPR requirements and they are relevant to the Council's needs and in line with the Council's strategic objectives. b) The Data Breach policy should include detailed procedures for reporting a data breach. This should include but not be limited to:  Defining roles and responsibilities Description of type of personal data breach Steps taken in case of a breach Risk assessments and escalations Containment and recovery Contact details of the DPO,	Medium	Tim Huggins (ICT Manager)	January 2022 June 2022	Management update:  Brentwood Council has gone into partnership with Evalian to support the Council's statutory requirements for Data Protection. As part of this a full gap analysis will be conducted for Data Protection including but not limited to Policies, Processes for Data Protection and Data Breaches. Following this a formal remediation action plan will be developed and actions implemented. This work will support the newly formed Information Governance (IG) Group in their role around information Governance, and the contract will be monitored by the Corporate Manager - IT & Service Improvement.
or other point of contact  Measures taken to evaluate and mitigate any possible breaches  Breach notifications to the ICO  Training and awareness  Monitoring and reporting compliance  The revised policies should be approved and communicated to members of staff and				Delay due to an unusual level of SAR requests and a particular case which had to take priority for statutory deadline reasons. Have escalated with Evalian to see if extra resources can be provided to move project along - any extra costs would have to be approved first.
arrangements should be put in place for reviewing the policies on an annual basis.				a) Reviewing of Information Governance policies is part of the role for the IG group and therefore this action will be co-ordinated by the group working with appropriate officers and partners.
				b) In addition to above - the group will review the recommendations as part of its action plan. Once the suggestions have been reviewed the agreed ones will be included.

			<u> </u>		
Reco	mmendation made	Priority Level	Manager Responsible	Due Date	Current Progress
					c) Agreed this is normal practice and will be published in document library and formal communication will be shared with all staff, and also including other IG activities such as training and awareness. Regular reviewing of IG policies is part of the roles and responsibilities of the newly formed IG group and will be undertaken.
					Internal audit comment:
					Recommendation remains open.
21/2	2 ITDB rec 4:	Medium	Tim Huggins	December	Management update:
b) 4	The Council should develop an G training programme, which includes basic IG training for everyone, including new starters, annual refresher training and additional training for key staff groups or roles. Furthermore, training completion should be monitored and there should be a record of all the training that has been provided and completed. A comprehensive training needs analysis should be completed and approved by IGG. The training needs analysis should then be annually reviewed and updated against the continuously evolving industry regulations and best practices to ascertain if staff have been appropriately trained.		(ICT Manager)	<del>2021</del> June 2022	a) The Council already has embedded processes for new starters to carry out information governance training before they start. The elearning platform course was developed with another local authority and requires the passing of a short test. If this is not passed access to systems are stopped. Due to the enormous impact of the pandemic within the last year the provision of annual "refresher" training wasn't enforced. We will work with Evalian to carry out regular training, building on current processes. This will also be supplemented by "cyber awareness training" using a variety of cyber scenarios.
					b) Brentwood has gone into partnership with Evalian to support the statutory requirements for Data Protection. Part of this is regular training. Evalian will provide a training portal to allow Brentwood to train, monitor and analyse and the IG Group will work with Evailian to continue to update the training in

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
				line with industry regulations.
				The ICT Manager has escalated at account meeting (22/2/22) with 3rd party - the portal has not been fully commissioned.  Internal audit comment:
				Recommendation remains open.
2021/22 - Homelessness				
21/22 HLN rec 2:  Where cases are approaching the 56 day limit, the Council should review such cases as a priority to determine the cause of the delay and whether further information is required from the applicant, such that a decision can be made before the 56 day limit. Where cases have not met the 56 day rule, clear notes should be held on file explaining why.	Medium	Marie Gentgall (Housing Options Team Leader)	January 2022 June 2022	Management update:  A review will be undertaken to see what automatic reporting can be put in place with the Locata system to highlight cases approaching 56 days to ensure appropriate action is taken. The Senior Manager will undertake regular case reviews monthly which will be recorded on the Locata system.
				Need to extend completion date for this due to staff shortages. The Council has been working with Locata, who have a new system starting 1 April 2022, which can set up new tasks and dates so that it will be easy to see what needs to be completed in what time and reports can then be run from this for the Team Leader to manage more easily. Currently staff use their own excel spreadsheets.
				The Council has a new Part 7 assessment and interview toolkit which can be downloaded via Locata's website, which officers have to complete, and the Council has just had 155 new letters fully updated and expanded covering changes in

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
				caselaw and up to date code references.
				Internal audit comment:
				Recommendation remains open.
21/22 HLN rec 4:	Medium	Angela Abbott	January	Management update:
The Council should review the KPIs that it reports to SLT as well as the Environment, Enforcement and Housing Committee in respect of homelessness, rough sleeping and temporary accommodation.		(Corporate Manager - Housing Needs and Delivery)	<del>2022</del> June 2022	A suite of proposed KPIs and Service Standards has been prepared, which includes the recommended KPIs referred to in this report.
Consideration should be given to inclusion of the following KPIs:				Internal audit comment:  Recommendation kept
The number of homelessness cases received as a cumulative total in the year and for the month				open until the KPIs are reported to SLT and Members.
The number of homelessness cases by case type i.e. prevention, relief, triage and decision				
The number of open and closed homelessness cases				
% of cases where the 56 day rule has been met				
Number of rough sleepers in the borough				
Number of referrals made via StreetLink.				

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
2018/19 - PCI/DSS Compliance	<u> </u>	nesponsible		
<ul> <li>18/19 PCI/DSS rec 2:</li> <li>a) Identify and clearly and fully document the Council's complete card payment environment</li> <li>b) Review the existing arrangements whereby different systems are used for payment processing and consider rationalising the card payment process</li> <li>c) Complete the annual Self-Assessment Questionnaire as a means of identifying gaps in the Council's requirements of PCI-DSS across the Council's three card payment channels and develop actions to address them</li> <li>Establish a timetable for the completion of the annual Self-Assessment Questionnaire.</li> </ul>	Medium	Tim Huggins (ICT Manager)	September 2019 June 2020 September 2020 December 2020 March 2021 August 2021 October 2021 Closed	Management update: All elements complete. Officers have confirmed that they are not aware of any outstanding self-assessment questionnaire (SAQs) or Attestation of Compliance (AOC).  Internal Audit comment: Parts (a) to (c) were previously closed by Internal Audit. Part (d) now closed following receipt of confirmation that no there are no outstanding SAQs.
2018/19 - Housing				
<ul> <li>a) When communicating with Members, officers should maintain a record of any significant discussions, particularly around setting pre meeting agendas and these should be made available to Members.</li> <li>b) Officers should prepare different options for Members on management information to be provided on Housing operational matters and agree this formally. A process should be agreed for updating key Members of issues between meetings.</li> <li>c) An internal audit should be commissioned to cover Housing department management information, with the focus on information provided to Members. This should focus on the timeliness, accuracy and relevance of information.</li> </ul>	High	Steve Summers (Strategic Director (Deputy Chief Executive)	Part c) March 2022 Closed	Internal audit comment  Parts a) and b) previously closed by Internal audit following receipt of evidence.  Part c): The Housing audit included in the 2021/22 audit plan became an audit of \$106 agreements following a risk discussion with officers.  Recommendation closed as it has been agreed that a Housing management information audit will be included in the 2022/23 audit plan.

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
2018/19 - Workforce Strategy				
Where outcomes are monitored to confirm progress, evidence should be retained to confirm that the outcome is on track or completed. This ensures that any potential slippage is discovered early and there is a greater chance of resolving issues in a timely manner. When formal reviews of the RAG spreadsheet are completed evidence should be checked and, if missing, requested and retained on file to support the progress of these outcomes.	Medium	Jacqueline Van Mellaerts (Director of Corporate Resources)	February 2020  December 2020  March 2021  August 2021  October 2021  January 2022  Closed	Management update Outcomes are monitored and evidence retained.  Internal audit comment: Recommendation closed by Internal Audit following receipt of evidence of outcomes monitoring.
2020/21 - Sickness Absence				
20/21 SA rec 1:  Depot management should ensure that all staff complete a sickness self-certification form on return to work for absences of less than seven days, or provide a fitness for work certificate from their doctor or hospital for absences over seven days, and that this documentation is retained.	High	Darren Laver (Operations Manager) & Nichola Mann (HR Manager)	February 2021 August 2021 October 2021 January 2022 Closed	Management update:  The Absence Management Policy has been updated to cover this.  Previous Management update:  Self-certification forms on return to work for absences of less than seven days are not completed and on review are not required. The HR manager has carried out an exercise to review sickness absence procedures since implementation of iTrent on 1 April 2021 and is using the information from the review to liaise with the Extended Leadership team to identify areas of support and guidance requirements. The findings have shown that in the majority of cases, if an absence goes beyond 7 calendar days fit notes are supplied and the managers have been receiving these and emailing to the HR inbox

Priority	Manager	Due Date	Current Progress
Level	Responsible		to be filed on the employee file. Where they have not been received for absences over 7 calendar days, the HR manager is contacting the individual managers to ask them to obtain the relevant fit notes. The Absence Management Policy will be reviewed and updated to reflect this and any necessary training will be provided. Internal Audit comment:
			Recommendation closed following receipt of updated Absence Management Policy.
Medium	Nichola Mann (HR Manager) supported by Extended Leadership Team  Extended Leadership Team & Nichola Mann (HR Manager) Darren Laver (Operations Manager) & Nichola Mann (HR Manager)	February 2021  August 2021  October 2021  January 2022  Closed	Management update:  The HR Manager completed the training with the relevant managers at the depot in December 2021 and is continuing to work with the relevant managers, by offering support following the initial training. A template letter has been provided to assist.  Previous management update:  On reviewing the HR Manager has noted that there is still disparity. She has liaised with the Corporate Director - Environment & Communities to discuss this and it has been agreed that a number of bitesize training sessions will be arranged to ensure managers are clear of what their roles and responsibilities are in terms of absence management.  Internal Audit comment:
	Level	Medium  Nichola Mann (HR Manager) supported by Extended Leadership Team  Extended Leadership Team & Nichola Mann (HR Manager) Supported by Extended Leadership Team & Nichola Mann (HR Manager) Darren Laver (Operations Manager) & Nichola Mann	Medium  Nichola Mann (HR Manager) supported by Extended Leadership Team  Extended Leadership Team & Nichola Mann (HR Manager)  Darren Laver (Operations Manager) & Nichola Mann Manager)  Nichola Mann

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
		·		that the training has been provided.
2020/21 - Main Financial Systems				
20/21 MFS rec 5:	Medium			Management update:
a) The debt recovery and write off policy should be reviewed and management should consider amending the due dates if current dates are not considered realistic in the current climate.		Alex Webber (Systems accountant) and Phoebe Barnes (Corporate Finance Manager)	November 2021 Closed	The policy has been reviewed and updated.
b) Staff should be reminded to take recovery actions in line with the policy.		Alex Webber (Systems accountant)	November 2021 Closed	Verbal refresher regarding corporate debt recovery was provided to officers as part of 1-2-1s with staff in November 2021.
				Internal audit comment:
				Part (a) previously closed by Internal Audit following receipt of updated policy.
				Part (b) now closed following confirmation that the reminders have been provided.
20/21 MFS rec 6:	Medium	Alistair Greer	January 2022	Management update:
Officers should be reminded that approvals of borrowing should be documented and the evidence of approval retained.		(Principal Accountant, Financial Reporting)	ZOZZ	The undocumented borrowing was in conjunction with taking out borrowing before the PWLB changes came into effect last November. The perceived need at the time was to submit a borrowing request before the changes came into effect. The officer received verbal approval from the \$151 and due to remote working challenges and the time constraints the officer acted on the verbal approval. A follow up confirming this approval could have been actioned

Red	commendation made	Priority Level	Manager Responsible	Due Date	Current Progress
					through email. For Treasury Management investments and borrowing and refinancing the deals are now followed up with formal approval through emails.
					Internal audit comment:
					This recommendation has been followed up by sample testing of borrowing approvals in the 2021/22 main financial systems audit and no issues were identified, therefore recommendation closed by Internal audit.
202	20/21 - Cyber Security				
20/	21 CSec rec 3:	Medium	Tim Huggins (ICT Manager)		Management update:
a) b)	The Council should either deploy appropriate vulnerability scanning tools or approach Hytec for adding extra functionality to Alien Vault to identify all vulnerabilities present across its IT network on a routine basis (monthly/quarterly).  There should be defined			September 2021 Closed	a) The Council has moved on from doing scanning then reacting to those scans - due to our move to the cloud Azure is proactively bringing vulnerabilities to us so this is now business as usual. In addition the Council uses a Managed Security Service who is on the lookout for live threats and notifying problems to us, along with regular monthly account meetings and regular monthly technical Investigation Case reviews.
	procedures in place for addressing vulnerabilities as and when they are identified.			September 2021 April 2022	b) Completed. OODA loop documentation provided.
				Closed	Internal audit comment:
					Part (a) previously closed by Internal Audit following receipt of management update.
					Part (b) now closed following receipt of

Recommendation made	commendation made Priority Mana Level Respor		Due Date	Current Progress
				procedure documentation.
2021/22 - IT Data Breaches				
a) The IGG should ensure that the governance of data breaches and incidents including both IG and IT/Cyber, are discussed as a standing agenda item during their meetings.	Medium	Tim Huggins (ICT Manager)	October 2021 February 2022 Closed	Management update:  a) A standing item has been added to the IGG's agenda for data breaches and incidents, and Cyber incidents. The appropriate officers will be informed to supply regular timely updates for IGG meetings.
b) The SLT should review the formal minutes from Information Governance Group's (IGG) bimonthly meetings, during their quarterly meetings to review the Council's information handling activities and to gain assurance on management and accountability arrangements for Information Governance and compliance with law.			Closed	b) A formal Terms of Reference (ToR) has already been developed and approved by the Senior Leadership Team (SLT). The action for the IG group to regularly update SLT is stated within the ToR. The policy has been reviewed and updated.  Internal Audit comment:  Part (b) previously closed by Internal Audit. Part (a) now closed following receipt of IG update provided to the February
2024/22 Hamalasanasa				2022 SLT meeting.
2021/22 - Homelessness				
21/22 HLN rec 3:  The Council should ensure all PHPs are independently reviewed and approved on the Locata system before the decision letter is provided to the applicant.	Medium	Marie Gentgall (Housing Options Team Leader)	January 2022 Closed	Management update:  PHPs need to be completed before any prevention/relief is granted and are authorised by Team Leader. PHPs need to be changed when circumstances change, and this will be checked and reviewed when any decision is made and signed off by Team Leader in the sign off

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
				sheet as well as the sign off check list. This is all recorded on locata so record not lost.
				Internal audit comment:
				Recommendation closed by Internal Audit following receipt of evidence of sign offs.

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Committee: Audit and Scrutiny Committee	<b>Date:</b> 08 March 2022
Subject: Risk Management	Wards Affected: All
Report of: Jacqueline Van Mellaerts, Corporate	Public
Director – Finance & Resources	
Report Author/s:	For Information
Name: Sue White, Risk & Insurance Officer	
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#### **Summary**

The report updates members of the Audit & Scrutiny Committee on the status of the Council's 2021/22 Strategic Risk Register and high-level operational risks.

As a result of the current risk review one Strategic risk has reduced and one amended. The other risk scores have remained the same from the recent Committee in December.

Of the high-level operational risks, five risk scores have been reduced, and the other risks scores have remained the same.

#### **Main Report**

#### **Introduction and Background**

- The governance arrangements set out in the 'Insurance & Risk Management Strategy' and terms of reference of committees from our constitution require the Audit and Scrutiny Committee to review the strategic and operational risks every quarter.
- 2. The strategic and operational risk registers are monitored by Senior Leadership Team (SLT) and the Extended Leadership Team (ELT) who consider the risks, the mitigations and agrees the content. It is the responsibility of the Audit & Scrutiny Committee to review the strategic risks and confirm they are confident that the risks associated within this register are those which are strategic and relevant to the organisation at this point in time and the considered future.
- 3. Work continues to embed Risk Management within the Council. It is important that all staff become involved in the risk management process and become aware of their responsibilities in identifying and managing risk. A Risk Management Fund of £5k was allocated within the insurance tender, which is deducted from the annual premium, for use on Risk Management improvements for the Council.

- 4. An Accident Investigations and Claims Defensibility Review was carried out in November. The scope of this review was to look at Employers' Liability and Public Liability claims. Claims information from Zurich Municipal was utilised, together with a selection of incident reports and interviews with members of staff from the Housing Department and Depot. The purpose of this review was to assess the robustness of the Council's processes and procedures for investigating incidents and complaints and to provide recommendations for improvement where applicable.
- 5. This was followed in December by an Accident Investigation and Claims
  Defensibility training session attended by Housing Officers. The aim of the
  course was to provide an understanding of the moral and legal obligations to
  investigate accidents and incidents and identify areas where improvements can
  be made.

#### Issue, Options and Analysis of Options

- 6. During 2021/22, a new template to record risks has been developed and enhanced to now include risk categorisation and target scores. These scores are based on the successful completion of actions in the 'Further Actions/Comments' column as seen in Appendix A. The tables demonstrate the movement of risk scores from Original to Current and also detail the anticipated Target score, with any outstanding or further actions for each risk.
- 7. Risk Management continues to be imbedded quarterly within the Senior Leadership Team reports, where Service Heads discuss the top-level risks for their service areas to ensure that the risks are updated to reflect the ongoing changes.
- 8. The Risk and Insurance Officer will continue to work with risk managers to maintain the good progress to date and further develop a consistent application of risk management considerations across all operations of the Council.

#### Strategic Risks

- 9. In accordance with the Council's Insurance and Risk Management Strategy, risk owners have reviewed their risks and updated them. These were discussed and agreed by the Senior Leadership Team on Wednesday, 23 February 2022.
- 10. Attached to this report at Appendix A is a summary showing the current status of each risk.

- 11. As a result of the current risk review one score has reduced and there is an amendment to the risk score for one risk. The remaining scores have remained unchanged.
- 12. The risk where the risk score has reduced is as follows:
  - Yellow Risk RSK Failure to deliver the Council's Strategic Housing
     Development Plan (row 23) L1 xl4 = Med 4

     The risk score has been decreased as programme progressing with no concerns.
- 13. The risk where there is an amendment to the score is as follows:
  - Red Risk RSK13 The Council is at risk from a critical cyber threat that would affect all areas of business (row 68) L3 x I5 = Very High 15
     When this risk was transferred to the Strategic Risk Register in November, the current score was recorded as the target score in error.

#### Risk Matrix

14. The thirteen risks are plotted on the risk matrix in Table 1. The current assessment identifies that four risks are categorised as very high in the red area of the risk matrix.

Table 1 - Risk Matrix

		Low (5)	Medium (10)	High (15)	V. High (20)	V. High (25)	
	Definite						
ability	Very Likely	Low (4)	Medium (8)	High (12)	V. High (16)	V. High (20) RSK10	
Likelihood / Probability	Likely	Low (3)	Medium (6)	Medium (9)	High (12) RSK9; RSK11	V. High (15) RSK1; RSK7 RSK13	
Likelil	Unlikely	Low (2)	Low (4) RSK5 RSK6	Medium (6) RSK8	Medium (8) RSK3 RSK12	High (10)	
	Highly Unlikely	Low (1)	Low (2)	Low (3) RSK2	Medium (4) RSK4	Medium (5)	
		Negligible	Minor	Moderate	Significant	Major	
	Negative Impact / Severity						

#### Likelihood x Impact = Risk Score

No.	Risk	No.	Risk
1	Failure to adopt a local plan in line with national policy	8	Unable to react to major incident
2	Failure to develop an environmental strategy and action plan	9	Lack of Organisational Capacity
3	Failure to deliver a clear Leisure Strategy	10	Unable to meet income projections
4	Failure to deliver Strategic Housing Development Plan	11	Not compliant with data protection legislation
5	Lack of Strategic Direction	12	Contract/Partnership Failure within organisation
6	Failure to deliver objectives within Corporate Strategy	13	Risk from a critical cyber threat
7	General Fund budgets could fall below the minimum level of reserves		

#### **Operational Risks**

- 15. Operational risk management is concerned with reviewing those risks that are faced in the day-to-day delivery of services, particularly where effective management of those risks could result in a reduction in insurance claims and related costs.
- 16. The Operational Risks have been reviewed by risk owners, Extended Leadership Team and the Senior Leadership Team. They have been updated and amended where necessary to reflect the actions taken to manage the risks.
- 17. Attached to this report at Appendix B is the operational risk summary sheet showing the very high and high-level risks. The risk references are shown in brackets in the table below which match to Appendix B.
- 18. At the review in January risks E&C1, H&C7, H&C9, D&C1 and D&C3 were reduced, with the other risks scores remaining the same from the last Committee meeting in December.
- 19. The table below shows the total number of risks identified in operational risk registers across the Council

Directorate	Open risks on register	Very High Risk	High Risk	Medium Risk	Low Risk
Environment &	12		3 E&C1,	3	6
Communities	12		E&C2, E&C5	O	
Planning &	3			3	
Economy	3			3	
Housing &					,
Community	10	1 H&C2	1 н&сз	6	1
Safety					
Finance &	9		1 F&R3	5	3
Resources	9		I F&R3	3	
Law &	11			9	2
Governance	11			9	_
Digital &	4	1 D&C2	3 D&C1,		
Customer	<del>' ' '</del>	I D&C2	D&C3, D&C4		

#### Consultation

20. None

#### **References to Corporate Strategy**

21. Effective risk management arrangements will enable the Council to achieve its corporate priorities. The process will allow identification of risks and issues, enabling informed decision making to remove or reduce them, in order for the priorities to be achieved.

#### **Implications**

**Financial Implications** 

Name/Title: Jacqueline Van Mellaerts, Corporate Director (Finance & Resources)

and Section 151 Officer

Tel/Email: 01277 312500/jacqueline.vanmellaerts@brentwood.gov.uk

22. None arising specifically from this report, but control measures identified in risk registers could have financial or resource implications.

**Legal Implications** 

Name & Title: Amanda Julian, Corporate Director (Law & Governance) and

**Monitoring Officer** 

Tel & Email: 01277 312500/amanda.julian@brentwood.gov.uk

23. Effective risk management provides a means of identifying, managing and reducing the likelihood of legal claims or regulatory challenges against the Council.

**Economic Implications** 

Name/Title: Phil Drane, Corporate Director (Planning & Economy)

Tel/Email: 01277 312500/philip.drane@brentwood.gov.uk

24. Economic implications are contained within the report and identified in risk registers.

#### **Background Papers**

Insurance & Risk Management Strategy

#### **Appendices to this report**

Appendix A: Strategic Risk Register

Appendix B: Operational Risk Register

Appendix C: Risk Ranking Table

#### BRENTWOOD BOROUGH COUNCIL STRATEGIC RISK REGISTER

								JANUA	RY							
Risk No.	Risk Details	Risk Owner	Risk Categorisation		Original Sco		Mitigations to date	Cı	urrent Sco	res	Direction of travel from previous	Further Actions / Comments	Planned Completion Date(s)	(followin	arget Sco ng comple ther actio	etion of all
				L	1	S		L	I	S	quarter			L	I	S
Corpor	ate Strategy: Growing our Economy	- A thriving borou	gh that welcomes a wea	lth of busi	ness and c	culture										
Risk 1	Cause: Lack of local planning policies to plan and manage development  Uncertain Event (Risk): Failure to adopt a Local Plan in line with national policy  Consequence(s): Planning applications being judged solely against national policy "in favour of sustainable development" and/or unplanned development	Director (Planning & Economy)	Reputation  Legal/Compliance  Effect on Project objectives	5	5	V High 25	Meeting targets set out in the Local Plan timetable (Local Development Scheme, approved September 2019).  Ongoing discussion with neighbouring Local Planning Authorities and key stakeholders (Duty to Cooperate).  Partnership in Association of South Essex Local Authorities (ASELA).  Preparation of Community Infrastructure Levy (CIL).  Delivery of Dunton Hills Garden Village (DHGV).  Retention of permanent staff and recruitment of temporary staff to meet short-term needs when required.	3	5	V High 15	Stayed the same	Awaiting Inspectors Final Report with conclusions on soundness subject to modifications. Working to bring the plan to Full Council in March 2022 for adoption. This decision would reduce the strategic risk to target score.	Mar-22	1	5	Med 5
Corpor	ate Strategy: Protecting our Environ	ment - Developing	g a clean and green envir	onment fo	or evervon	ne to eniov										
	Cause: Lack of engagement with communities and businesses; non delivery of our plans for waste management services		Effects on Service			3.99	Strategy and action plan are in progress					Brentwood Benvironmental Business Alliance				
Risk 2	Uncertain Event (Risk): Failure to develop an Environmental strategy and action plan  Consequence(s): Council would be actively contributing to climate decline	Director (Environment & Communities)	Reputation	5	4	V High 20	Introduction of new recycling scheme Co Wheel Scheme implemented Electric charging pilots implemented New climate & Sustainability officer employed Brentwood Environmental Business Alliance (BEBA) launched	1	3	Low 3	•	continue to meet. Environmental and Sustainability Strategy ready for consultation being taken to Committee in March 2022 Tree planting schedule in place and work continues towards the Hutton Country Park Scheme	On going	1	3	Low 3

Corp	orate Strategy: Developing our Communities - Safe a	nd strong communities where re	esidents live hap	ppy, healthy	and independent lives									
	Cause: Unable to identify risk and liabilities for Brentwood Centre, Copmmunity Halls and Hartswood Golf Course, Play Areas and recommend options for the future	Effects on Service												
Ris 3	(Environmen	t &	3 4	High 12	Leisure Strategy reviewed and updated Feasibility/business plan in progress for King George's Playing Fields. Budget agreed for KGPF and 5-year Play Area Improvement programme	2	4	Med 8	Stayed the same	Work continues to identify future provision of communiy halls. Identified priority halls to be considered first Lesiure strategy update 2021, continue	On going	2	4	Med 8
	Consequence(s):  Reduced leisure provision within the Borough, health and well being of residents affected, less desirable place to live or visit with poor offerring of leisure facilities.  Financial failure of the leisure facilites provided causing issues with the overall budget	People			Workstream established for transition of Brentwood Centre to Council.					discussions on the development of the future of the Brentwood Centre taking place				

Page 66	Cause: Resources not adequetly in place to deliver plan  Uncertain Event (Risk): Failure to deliver the Council's Strategic Housing Development Plan  Consequence(s): Fewer new homes are built within the borough	Director (Housing & Community Safety)	Effects on Service  Reputation  Legal/Compliance	3 5		Strategic Housing Delivery Plan 21-26 now developed to meet objectives within the Housing Strategy HRA busines plan	1	4	Med 4	decreased	Risk decreased from L2 x I4 = Med 8.  Programme progressing with no concerns.	1	4	Med 4	
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orpor	rate Strategy: Delivering an efficient a	and effective coun	cil - An ambitious and in	novative o	council tha	at delivers c	juality services									
Risk 5	Cause: No Strategic direction provided  Uncertain Event (Risk): Lack of Strategic Direction  Consequence(s): Projects and programmes not delivered Community benefits not delivered	Chief Executive	Effects on Service  Reputation  Effect on Project objectives	3	3	Med 9	Corporate Strategy Training and Development for Officers and Members Code of Conduct. Consultation / surveys. Project and performance Management Framework. Business recovery plans in place and monitored with senior management & members.	2	2	Low 4	Stayed the same	Both Councils have now approved the Partnership between Brentwood Borough Council and Rochford District Council. The first phase of the programme will begin.	Jul-22	1	2	Lo
ornor	rate Strategy: Delivering an efficient a	and affective coun	cil - An amhitique and in	novative	council the	at delivers o	urality services									
Risk 6	Cause: Unable to deliver projects as set out in the Corporate Plan.  Uncertain Event (Risk): Failure to deliver objectives within the Corporate Strategy  Consequence(s): Community benefits not delivered	Strategic Director	Effect on Project objectives  Effects on Service  Reputation	4	5	V High 20	PRED Committee appointed as Programme Board. Continued communication on Corporate Strategy within organisation Ownership of delivery of projects identified at all levels within the Council. Business Plan is monitored by the Senior Leadership Team and the Leader regularly through project management techniques i.e RAG ratings	2	2	Low 4		A few projects currently require action but considered minor against ranking table.	Ongoing	1	1	
	veta Chustanu Delivenina en efficiente				 											
Risk 7	Cause: Finances are not adequately managed  Uncertain Event (Risk): General Fund budget forecasts could fall below the Minimum Level of Reserves  Consequence(s): Council will be unable to deliver statutory services.	Director (Finance & Resources)	Financial & Resources  Reputation	novatíve o	5	V High 25	Medium Term Financial Strategic (MTFS) is undertaken on an annual basis, with monthly budget monitoring and half year reports to Committee. Budget Challenge meeting are in place for Senior Officers to review and challenge Budget Managers as well as regular reporting to SLT and Committee chairs A Funding Volatility Reserve has been created to specifically address the uncertainty of Government funding levels. Risk Assesment of Minimum level of reserves is	3	5	V High 15	Stayed the same	Balanced Budget for 2022/23 was reported at Full Council on 23rd February, however still showing future financial uncertainity of £1.3m budget gaps for 2023/24 and beyond bringing reserves down to below minimum levels, unless earmarked reserves are utilsied.	Ongoing	1	5	Ī

Corpo	prate Strategy: Delivering an efficient	and effective coun	ncil - An ambitious and in	novative (	council tha	at delivers o	quality services								
Risl 8	Cause:  If we don't have in place adequate plans and procedures, understood, tested and reviewed  Uncertain Event (Risk):  We will be unable to react to a major incident leading to a breach of our statutory duties under the Civil Contingencies Act	Director (Finance & Resources)	People Effects on Service	4	5	V High 20	All services areas have Business Continuity Plans in place. Support and ongoing embedding of Emergency Planning & Business Continuity Plans within service departments	2	3	Med 6	Stayed the same Explore further testing on emergency planning & Business Continuity Plans. Training to be provided for Leadership Teams	Ongoing	2	3	Med 6
	Consequence(s): Ineffective response to an incident leading to greater inconvenience and hardship and a longer timescale for return to normal		Reputation				departments								
Corne	prate Strategy: Delivering an efficient	and effective coun	ncil - An amhitious and in	novative (	council th	at delivers o	nuality services								
Page 68	Cause:  If recruitment processes are not effective and resources are adequately in place.  Uncertain Event (Risk):  Lack of capacity to effectively govern the organisation will result in delay in delivery of business objectives		Effects on Service	3	4	High 12	Monitor vacancy factor within Medium Term Financial Strategy (MTFS) Communications Protocol & Strategy Workforce Strategy Regular meetings between senior members & officers. Review options for alternative service delivery model	3	4	High 12	Workforce Strategy needs reviewing and updating Stayed the Some services are struggling to recruit to specfic posts due to national shortages. Targetted recruitment plans underway	Ongoing	1	5	Med 5
	Consequence(s): Key projects not delivered. Reputation severely damaged Services not delivered		Effect on Project objectives				Recruitment service brought in house Establishment Review Group between Finance & HR								
Corpo	prate Strategy: Delivering an efficient	and effective coun	ncil - An ambitious and in	novative (	council tha	at delivers o	quality services								
Risl	Cause:  If the commercial income target from the Joint Venture and other activities are not achieved  Uncertain Event (Risk):  We may be unable to meet the income projections for the	Director (Finance	Financial & Resources	Λ	4	V High	Consultants have been engaged to advise and assist in delivery of projects Appropriate governance arrangements have been set up for the Council's Wholley owned company - Seven Arches Investment Ltd	4	5 V	/ High	Certain saving targets and baseline income due to COVID-19 are not yet achieved in Stayed the Medium Term Financial Strategy and will not	Mar-22	1	4	Low
10	income projections for the Council  Consequence(s): Council unable to meet budget requirements Spending/service cutbacks Greater use of reserves	& Resources)		4	4	16	Progress reports to Committee. Robust business modeling and financial projections. Monthly SLT & Leader meetings to monitor finances Financial Initiatives working group established	7	J	20	same be met.  However balanced budget reported to Full  Council on 23rd February and Income  projections have been rebased for 2022/23.	IVIGI-ZZ	1	<b></b>	4

orpor	rate Strategy: Delivering an efficient	and effective coun	cil - An ambitious and in	novative	council th	at delivers c	uality services									
Risk 11	Cause: If we do not have good information governance strategies and controls  Uncertain Event (Risk): We may not be compliant with data protection legislation  Consequence(s): Fine from the Information Commissioner's Office (ICO) Risk of litigation challenges to decisions made	Director (Law & Governance)	Legal/Compliance  Reputation  Financial & Resources	5	4	V High 20	Information Governance Group set up to ensure that the Council has the correct controls in place to ensure good governance in all decision making Data Protection Policies Training Data Protection Officer in post	3	4	High 12	Stayed the same	The IG group has now met. A Framework will be presented to SLT, data gap analysis and a documents library are being updated	Ongoing	2	4	
orpor	rate Strategy: Delivering an efficient	and effective coun	cil - An ambitious and in	novative	council th	at delivers c	uality services									
Risk 12	Cause: Contract and procurement management not in place  Uncertain Event (Risk): Contract/Partnership failure within organisation  Consequence(s): Negative impact on Council finances Reduction in Community benefits	Director (Law & Governance)	Legal/Compliance  Effect on Project  objectives	3	4	High 12	Service Level Agreements embedded within contract and penalties in place for non performance. Regular reporting on contract performance. Escalation and governance in place Contract management diagnostic survey underway Procurement and contract manager meetings in place. Procurement strategy been adopted by the Council.	2	4	Med 8	-	Contract management training as a result of the diagnostic survey is being procured. The Procurement forward plans are being updated with specific procurement plans being identified for strategic projects to minimise risk to the Council.	Ongoing	2	4	
rpor	rate Strategy: Delivering an efficient	and effective coun	cil - An ambitious and in	novative	council th	at delivers c	uality services									
tisk	Cause: Increased risk of ransomware  Uncertain Event (Risk): The Council is at risk from a	Director (Digital	Effects on Service			V High	We have a Managed Security Service that has been running for second year, part of this service uses a Security Operations Centre to monitor cyber threats. Immediate response plans are in place for critical threats, and regular investigation review			Villiah	Stayed the	As previously stated we have invested in technology to monitor across digital platforms, along with a SoC service for intervention.  Currently project to further this protection as				
L3	critical cyber threat that would effect all areas of business  Consequence(s): All digital services would be down. Failure of providing services to customers and vulnerable people	& Customer Engagement)	Financial & Resources Reputation	5	5	25	are held, along with Account contract meetings.  Along with the cyber security baked into Azure, threats and unusual behaviour are gathered and AI tools look for complex patterns to look for further threats across our digital platforms	3	5	15	same	there is a contiuous threat from ransomeware - costs are being reviewed.  The likelihood of an attack will always remain reasonable high, we are working with partners on driving down the impact of such an attack.	ongoing	3	4	

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#### **BRENTWOOD BOROUGH COUNCIL OPERATIONAL RISK REGISTER 2021**

Risk No.	Risk Details	Risk Owner	Risk Categorisation		iginal Scor	Mitigations to date			rrent Scor auary 202		Direction of travel from	Further Actions / Comments	Planned Completion Date(s)	(followin	arget Scongle of comple	etion of al
				L	ı	S		L	ı	S	previous quarter			L	ı	S
orporat	e Strategy: Protecting our Environmen	nt - Developing a cl	ean and green environr	ment for e	veryone t	to enjoy										
Risk E&C1	Cause: If we fail to protect our employees and other persons to whom we owe a duty of care  Uncertain Event (Risk): The safety, health, welfare and wellbeing of individuals may be compromised  Consequence(s): Injury or harm to employees, tenants or visitors. Fines from the HSE. Insurance claims. Reputational impact to the Council	Health & Safety Officer	Legal/Compliance  People  Financial & Resources	5	5	V High 25	All areas have received training and ongoing support in risk assessment and Health and Safety management. Regular monthly meetings are undertaken for compliance across Corporate and Housing Directorates, to ensure arrangements and systems are inbedded and robust, or if not, then adjustments and improvements are made. Separate operational compliance risks have been identified for Corporate and Housing Directorates respectively. The Council's H&S Microsite provides information and respective forms for risk assessment and Safe Systems Of Work. H&S Standards and Policies and reviewed and updated as leglislation or organisational changes develop.	3	4	High 12		Risk decreased from L4 x I4 = Very High 16.  Development of interventions to reduce the current risks are being implemented. Some actions will take time due to budget constraints.	Dec-23	2	4	Med 8
Risk E&C2	Cause: Lack of inspection and maintenance regime to manage trees  Uncertain Event (Risk): Risk of unmaintained trees wholly or partly falling on persons/property and other infrastructure  Consequence(s): Increased likelihood of prosecution by HSE and claims against the Council	Arboricultural Officer	People  Reputation  Financial & Resources	4	5	V High 20	Woodland management plans that have been negotiated over the last 4 years have now been approved and are beginning to be implemented to manage woodland edge trees over a 10-year period. However, a risk remains for non-woodland trees for which there is no proactive system	3	4	High 12	same	Reviewing Tree officers work load to allow 2 days per week to start tree survey. Spoken to pear tree surveys to find a soultion that reduces manual input via handheld device	Ongoing	2	3	Med 6
Risk E&C5	Cause: National shortage of drivers and ageing workforce  Uncertain Event (Risk): Unable to recruit LGV waste drivers  Consequence(s): Unable to deliver Waste and recycling collections	Waste and recyling Manager	Reputation Financial & Resources	3	4	High 12	Nationally there is a shortage of HGV drivers and this has been evident in recruitment at Brentwood and many other local authorities. Staff are reaching retirement age or leaving for higher paid jobs. Attempts to up skill loaders to drivers has been advertised but not had any impact due to salary difference	3	4	High 12	Stayed the same	HR undertaking review. One loader accepted to be trained and long term sick driver now obtained his licence	Ongoing	2	4	Med 8

#### **BRENTWOOD BOROUGH COUNCIL OPERATIONAL RISK REGISTER 2021**

Risk No	. Risk Details	Risk Owner	Risk Categorisation		iginal Sco e any mitig		Mitigations to date		rrent Scor		Direction of travel from previous	Further Actions / Comments	Planned Completion Date(s)	(followin	arget Sco g comple ther actio	tion of all
Corporat	e Strategy: Improving Housing - Access	to a range of dece	nt homes that meet loca	L I needs	I	S		L	I	S	quarter			L	ı	S
Complia	nce - the risk is that the Council will not a	achieve the plans t	to deliver compliance for	the key a	reas and t	the delive	ry of the compliance project plan.									
	Cause: Not achieving the plans to improve compliance by the required timescale.  Uncertain Event (Risk): The management of compliance is		Legal/Compliance				A specific compliance risk register has been produced with detail on the risks. A new					Good progress is being made in all areas of compliance and a central overview of all compliance performance reported to SLT monthly. Keystone KRM is in the testing stage with the Foundation module ready for trail/testing early December 21 to				
Risk H&C2	Consequence(s): Compliance is not achieved by March 2022.	Compliance Manager	Reputation  Effects on Service	5	5	V High 25	performance reporting template has been produced which identifies the areas of noncompliance and the gap to compliance. Actions are in place to reduce the gaps in the known compliance issues. Regular meetings are in place to address the concerns.	4	5	V High 20	Stayed the same	carry out FRAs and upload actions automatically. Further testing on the Foundation module due for mid-Feb to ensure all data is being captured correctly. Growth bids in Capital and Revenue have been submitted and awaiting approval. This will allow the rest of the EICR test and works to be completed, lift refurbishment/upgrades, FRA works, water hygiene remedial works/tank replacements to all be completed.	Mar-23	1	5	Med 5
Decision	s on HRA stock - the risk is that the Coun	l ncil does not make	timely decisions on the	retention	and inves	tment in t	he HRA stock.									
	Cause: Decisions on the HRA stock not taken, leading to additional expenditure.		Financial & Resources													
Risk H&C3	Uncertain Event (Risk): The assets have not been reviewed to identify long-term use of the sites.	Corporate Manager	Effects on Service	4	3	High 12	Sheltered housing review has started, with a review of the garage sites and the sites for potential regeneration to be identified.	4	3	High 12	Stayed the same	The review of various sites is ongoing to determine the approach as part of the SHDP which will determine the long term investment required to support the HRA business plan		1	4	Med 4
	Consequence(s): That resources are used on properties that the Council does not wish to retain in the long-term.		Reputation													
Drake Ho	buse - the risk is that the building will ne	ed to be evacuate	I d before the planned fire	safety w	orks are c	ompleted										
	Cause: The lack of an agreed solution for the second phase of works Drakes House.		Legal/Compliance													
Risk H&C7	Uncertain Event (Risk): The risk is that the proposed solution cannot achieve the required sign off.	Contract Manager	Reputation	3	5	V High 15	The Fire Brigade is aware of the situation and attends regular meetings. The solution will be designed by a third party, with the solution signed off by the installers and building control.	2	4	Med 8	decreased	Risk decreased from L2 x I5 = High 10.  Phase 1 completed. Sprinkler system agreed and being designed before tender.	Dec-22	1	3	Low 3
	Consequence(s): That residents have to be decanted until a permanent solution if achieved.		Financial & Resources													

# **BRENTWOOD BOROUGH COUNCIL OPERATIONAL RISK REGISTER 2021**

Risk No	o. Risk Details	Risk Owner	Risk Categorisation		r <b>iginal Sco</b> e any mitig		Mitigations to date  Current Scores Jnauary 2022		Direction of travel from		Further Actions / Comments	Planned Completion Date(s)	(followin	rget Sco g comple ther actio	etion of all				
				L	1	S		L	-	S	previous quarter			L	1	S			
Training Risk	- the risk is that the housing team do not  Cause:  The level and type of training does not meet the needs of the service.  Uncertain Event (Risk):  That the service is not delivered	Corporate	Effects on Service  Reputation	sonal dev	elopment		t the current plans for the service.  A review of the existing training plan will take	1	4	Low	decressed	Risk decreased from L4 x I4 = Very High 16  The matrix training document is now complete which	31.01.22	1	4	Low			
Н&С9	effectively (e.g. compliance).  Consequence(s):  A mistake occurs due to a lack of awareness or training	Manager	People	4	4	16	place and a revised training plan developed.	1	7	4		highlights all training requirements and dates for review. This document is held centrally which all Managers can view.	31.01.22	1	7	4			
Corpora	te Strategy: Delivering an efficient and	effective council -	An ambitious and innov	vative cou	uncil that	delivers q	uality services												
Page	Cause: Lack of robust and resourced regime for addressing failures in Corporate property compliance		Financial & Resources																
Risk F&R3	Uncertain Event (Risk): Risks to the Council, its staff and its residents where key compliance checks have not been satisfactorily completed for corporate buildings, etc. and any issues address (e.g. fire, water, gas, etc)  Consequences:	Facilities Manager	Facilities Manager	Facilities			5	5	V High 25	Undertaking routine compliance and remedial actions when identified. Retain appropiate documentation for evidence	4	3	High 12	Stayed the	Develop document retention process, explore utilisation of assets database, commence programme of property inspections to ensure compliance is being maintatined.	31.03.22	2	3	Med 6
	Risk of closure of buildings, damage to buildings, reputation risk to Councill, loss of earnings and life and prosecution from HSE		People																
	Cause:  If we do not have the appropriate cyber security or cyber incident response plan		Effects on Service																
Risk D&C1	Uncertain Event (Risk): The Council may be at risk of loss of data or service delivery through cyber attack	I.C.T. Manager	Financial & Resources	4	5	V High 20	Manages Security Service has been running for second year, now with an introduction of a monthly review. Azure Security services are being expanded. IT staff attended Cyber Incident Response Planning	2	5	High 10	decreased	Risk decreased from L3 x I5 = Very High 15.  Working with security sector to continue to improve our security posture	Ongoing	2	5	High 10			
	Consequence(s): Loss of key systems/inability to provide key services Loss or corruption of data Financial Loss Cost/time spent to recover		Reputation				Course.												

# **BRENTWOOD BOROUGH COUNCIL OPERATIONAL RISK REGISTER 2021**

Ri	sk No.	Risk Details	Risk Owner	Risk Categorisation		r <b>iginal Sco</b> e any mitig		Mitigations to date		Current Scores Jnauary 2022 Direction of travel from previous		travel from	Further Actions / Comments	Planned Completion Date(s)	(followin	Target Scores (following completion of further actions)	
					L	- 1	S		L	- 1	S	quarter			L	- 1	S
	Risk D&C2	Cause:  If we don't have the level of resourcing to provide an effective service or deliver Corporate Objectives and the Digital Strategy  Uncertain Event (Risk): The Council may be at risk of delivering an effective service  Consequence(s): It will result in service delivery failure affecting many services across the council	I.C.T Manager	Effects on Service  Reputation  Legal/Compliance	4	5	V High 20	We have several vacant posts across IT, Digital and projects and if we loose any further resources or have any sickness we will struggle to provide an effective service. We have relationships to leverage to help provide services and potential use of agencies if required. Permanant staff is a preferred option	3	5	V High 15	Stayed the same	Delayed recruitment to allow savings.  Issues recruiting across Essex. Working with other LA's to mitigate  Also considering options to work with Rochford joint recruitment	Jul-22	2	5	High 10
M I	Risk D&C3	Cause: Loss of availability of Business applications and access data  Uncertain Event (Risk): The Council may be at risk of delivering an effective service  Consequence(s): Failure of providing services to customers and vulnerable people	I.C.T. Manager	Effects on Service  Reputation  Legal/Compliance	3	5	V High 15	Using the principle "High Availability by design" we have invested in technology and built a digital plaftform for officers - the "Cloud Desktop". This has taken advantage of cloud technologies this has made the availability of business applications and access to data.	3	4	High 12		Risk decreased from L3 x I5 = High 15.  We are working with partners to accelerate the cloud desktop project and improve resilience.  Project is at the point to beta test with General Users.  Also updating Thin Clients in preparation.  Linked with Hybrid working project	May-22	2	4	Med 8
	Risk O&C4	Cause: Loss of Customer facing digital platforms  Uncertain Event (Risk): The Council may be at risk of delivering an ineffective service  Consequence(s): Failure of providing services to customers and vulnerable people	I.C.T. Manager	Effects on Service  Reputation  Legal/Compliance	3	5	V High 15	Similar to Risk 3 using the principle "High Availability by design" we have invested in cloud technology to build customer facing digital plaftforms to our customers.	2	5	High 10	Stayed the	Work continues with improving resilience of digital platforms and cyber testing  Additional options and partners are being reviewed to mitigate outages  We can manage the likelihood but the impact will always remain high	on-going	2	5	High 10

# Appendix C

# **Risk Ranking Table**

Brentwood Council has introduced a best practice five stage approach to Risk Management.

	(5)	Definite/very high	Low (5)	Medium (10)	High (15)	Very High (20)	Very High (25)
po	(4)	Very likely	Low (4)	Medium (8)	High (12)	Very High (16)	Very High (20)
Likelihood	(3)	Likely	Low (3)	Medium (6)	Medium (9)	High (12)	Very High (15)
ij	(2)	Unlikely	Low (2)	Low (4)	Medium (6)	Medium (8)	High (10)
	(1)	Highly unlikely	Low (1)	Low (2)	Low (3)	Medium (4)	Medium (5)
			Negligible	Minor	Moderate	Significant	Major
			(1)	(2)	(3)	(4)	(5)
					Impact		

Likelihood x Impact = Risk Score

Level of Risk	Level of Concern	Recommended review pattern	
Very High 15-25	Very concerned	1-2 months	
High Risk 10-15	Concerned	2-3 months	
Medium	Quite Concerned		
Risk 4-10	Risk can be tolerated at this time	3-4 months	
Low Risk 1-5	Not concerned Risk accepted at this time	4-6 months	

Score	Likelihood	Description
1	Highly Unlikely/	5% likely to happen or hasn't happened within the
	rarely happens	last 5 years
2	Unlikely/moderate	20% likely to happen or has happened once or
		twice in the last 5 years
3	Likely/possible	50% likely to happen or has happened once or
		twice in the last 24 months
4	Very likely/high	75% likely to happen or has happened at least once
		or twice in the last 12 months
5	Definite/very high	99% likely to happen or has happened on a regular
		basis over the last 12 months

Score	Impact	Effect on Service	Financial & Resources	Reputation	Legal	People	Effect on project objectives
1	Negligible	<ul> <li>Small impact on customer service which may result in complaints</li> <li>Nuisance</li> </ul>	<ul> <li>Small financial loss; less than £10K</li> <li>Negligible property damage</li> </ul>	No adverse effect on perception	No legal implication	No injury	Minimal impact to project     Minor slippage
2	Minor	<ul> <li>Small setback</li> <li>Disruptive impact on service</li> <li>Localised disgruntlement</li> </ul>	<ul> <li>Noticeable financial loss; £10-£100K</li> <li>Slight damage to one property</li> </ul>	Minimal effect to perception (e.g. minor criticism of the Council)	Breach of statutory process, duty or law resulting in possibility of legal action	Minor Injury	<ul> <li>Adverse effect to project.</li> <li>Slippage requires review finances / short term programme</li> </ul>
3	Moderate	<ul> <li>Widespread disgruntlement</li> <li>Disrupted service delivery from one service area for up to 3 days</li> <li>Can handle but with difficulty</li> </ul>	<ul> <li>Moderate financial loss £100-300K</li> <li>Inability to deliver popular policies due to budgetary constrictions</li> <li>Substantial damage to one part of a building</li> </ul>	Negative effect on perception, e.g.  Criticism of the council  Local bad press	Breach of major statutory duty or law resulting in probably legal action	RIDDOR (Reporting of Injuries, Diseases & Dangerous Occurrences Regulations (1995) Reportable major injury to an individual	Important impact on project or most of expected benefits.     Considerable slippage     Possible impact on overall finances / programme
4	Significant	<ul> <li>Intervention in a key service</li> <li>Disruption to service delivery for one or more service areas for 3-5 days</li> <li>Failure of an operational partnership</li> </ul>	<ul> <li>Sizeable financial loss up to 50% of budget or between £300K-1M</li> <li>Extensive damage to a critical building or considerable damage to several properties from one source</li> </ul>	Criticism of key process     Large scandal     High level of complaints at corporate level across several service areas     Adverse national media coverage	Breach of law resulting in legal action against the Council which would be difficult to defend	Reportable major injuries to several people or death of an individual	Extreme delay

Score	Impact	Effect of Service	Financial & Resources	Reputation	Legal	People	Effect on project objectives
5	Major	Complete breakdown in service delivery with severe, prolonged impact on customer service affecting the whole organisation     Failure of a strategic partnership	A substantial failure in accountability or integrity     A large financial loss over 50% of budget or greater than £1M     Total loss of a critical building	<ul> <li>A vote of no confidence in one service area</li> <li>Officer(s) &amp;/or Members forced to resign &amp;/or Audit Commission enquiry</li> <li>Substantial adverse &amp; persistent national media coverage</li> </ul>	Breach of law resulting in legal action against the Council which would be very difficult / impossible to defend	Death of several people	Complete failure of project

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Date: 8 March 2022
Wards Affected: All
Public
For Decision

# **Summary**

This report submits the report and recommendations of the Formal Complaints and Performance Indicators Working Group for consideration by the Audit & Scrutiny Committee.

# Recommendation(s)

#### Members are asked to:

R1. To note the Formal Complaints and Performance Indicators Working Group report, as attached at Appendix A, and agree the recommendations contained within it.

# **Main Report**

#### **Introduction and Background**

 The Committees Terms of Reference include responsibility for the monitoring of Council service performance including Performance Indicators and Formal Complaints.

#### **Reasons for Recommendation**

2. To ensure the Council provides quality customer services.

## **References to Corporate Plan**

3. The priority of 'Delivering an efficient and effective council' includes the delivery of quality customer services. An effective scrutiny function of customer complaints and service performance is an essential element of that priority.

## **Implications**

Financial Implications
Jacqueline Van Mellaerts, Corporate Director (Finance & Resources)
01277 312829/jacqueline.vanmellaerts@brentwood.gov.uk

4. There are no direct financial implications from this report.

## **Legal Implications**

Amanda Julian, Corporate Director (Law & Governance) and Monitoring Officer 01277 312705/amanda.julian@brentwood.gov.uk

5. The Council is required to have a complaints procedure, to ensure transparency and accountability it is good governance for the Council to report on the complaints and performance indicators.

Economic Implications
Phil Drane, Corporate Director (Planning & Economy)
01277 312610/philip.drane@brentwood.gov.uk

6. There are no direct economic implications from this report.

#### **Background Papers**

None

# **Appendices to this report**

 Appendix A: Formal Complaints and Performance Indicator Working Group Report Date: 22 February 2022

# **Audit & Scrutiny Committee**

# Performance Indicators and Formal Complaints Working Group Report

## **Working Group Members**

Cllr Nolan

Cllr Dr

**Barrett** 

**Cllr Hirst** 

Cllr Naylor

**Cllr Tanner** 

# **Supporting Officers**

Steve Summers – Strategic Director (Deputy Chief Executive)

# Scope

The scope of the Performance Indicators and Formal Complaints Working Group is set out below:

- To monitor and consider the Council's service Performance Indicators.
- To consider in detail Formal Complaints received by the Council.
- To consider how Performance Indicators and Formal Complaints are reported to the Audit & Scrutiny Committee
- To make recommendations to the appropriate Audit & Scrutiny Committee.

#### **Meeting Date**

8<sup>th</sup> February 2022

Attached as Addendum 1 are the notes of the meeting.

# **Terms of Reference**

The Working Groups Terms of Reference are attached at Addendum 2

## 1. Report Recommendations

The report recommendations are set out in full below.

- R.1 That the working group continue to monitor the outcomes of the Formal Complaints for the remainder of 2021/22.
- R.2 That the working group continue to monitor the outcomes of the Performance Indicators for the remainder of 2021/22.

# 2. Introduction

- 2.1 The council operates a two stage complaints process for customers to take issue with any perceived failure to provide a service, failure to respond to requests or failure to adhere to standards on the part of the council and its officers.
- 2.2 The council uses a variety of performance indicators to monitor how well services are performing in meeting the needs of service users. The council has set of key indicators of performance, the "toplines". The toplines include a variety of indicators that relate to the delivery of the council's priorities.
- 2.3The toplines measure performance across a range of council activity including: planning, housing, streetscene and revenue and benefits.

#### 3. Explanation of Recommendations

#### Recommendation 1

That the working group continue to monitor the outcomes of the Formal Complaints for the remainder of 2021/22.

#### **Explanation**

To continue to monitor formal complaints quarterly to identify common themes, trends or concerns.

#### Recommendation 2

That the working group continue to monitor the outcomes of the Performance Indicators for the remainder of 2021/22.

#### **Explanation**

To monitor associated annual or quarterly trends and identify areas of performance concern.

## Addendum 1

# Performance Indicators and Formal Complaints Working Group Minutes of Meeting 8<sup>th</sup> February 2022 18:30 Virtual via Microsoft Teams

Present: Cllr Charles Nolan (CN) - Chair

Cllr Roger Hirst (RH)
Cllr Dominic Naylor (DN).

Also present: Steve Summers (SS) – Strategic Director (Deputy Chief

Executive)

Jacqueline Van Mellaerts (JVM) – Corporate Director

(Finance & Resources)

Greg Campbell (GC) – Corporate Director (Environment

& Communities)

Tracey Lilley (TL) – Corporate Director (Housing &

Community Safety)

Angela Abbott (AA) – Corporate Manager (Housing

Needs & Independent Living)

Nichola Marsh (NM) – Corporate Manager (Housing

Estates)

Leona Murray Green (LMG) – Corporate Manager

(Customer Engagement)

**Apologies**: Cllr Dr Tim Barrett

Cllr Sandy Tanner

Phil Drane – Corporate Director (Planning & Economy)
Amanda Julian. - Corporate Director (Law & Governance)

#### 1. Welcome

The Chair welcomed all present to the meeting.

#### 2. Terms of Reference

These are attached to these minutes.

# 3. Formal Complaints

A presentation on formal complaints received for Q3 2021/22 was provided to the working group (Addendum 3) by SS.

Overall number of complaints for 2021/22 were compared with previous years and the number of complaints was noted. Whilst

noting the slight improvement in responding to formal complaints within the agreed timeframes CN asked if data for 2020/21 could be supplied for this for comparison purposes.

<u>Action</u>: SS to review whether 2020/21 data can be provided on formal complaints response times for comparison.

An improvement in street scene complaints was noted by the group. GC confirmed that there was no pattern for the missed collections and was not necessarily the same crew.

A question was raised regarding whether there was time limits to collect fly tips. GC advised there was however in certain cases where it was a large fly tip then certain machinery would need to be used.

The working group then reviewed outstanding Local Government Ombudsman (LGO) and Housing Ombudsman complaints. Outcomes of outstanding investigations will continue to be reported to the working group as they are received.

## **Working Group Action**:

 For the working group to monitor these complaints against future quarters to identify concerns or themes.

## Performance Indicators

The working group were provided with data for the council's key Performance Indicators (PIs) (Addendum 4) for Q3 2021/22.

SS advised the group that the recent Peer Review had suggested that benchmarking with other local authorities was undertaken. This will be reported to a future meeting.

RH advised that he had a separate meeting with Street Scene Officers regarding the waste and recycling PI's (as requested at a previous working group). As a result Officers are going to review the indicators and report back.

**Action**: GC to review Waste and Recycling Pls.

In relation to PI HO7 (No of applicants on the waiting list for local authority housing). RH queried the current figure which felt low and when officers felt this figure would stabilise. AA advised that applicants needed to re-apply hence the current level of figures, these figures had also been benchmarked and were standard.

In relation to EO1 and EO2 (% of invoices paid within20/30 days) JVM advised the group that the council had recently moved to 'No Purchase Order No Pay'. This was a cultural change within the organisation and was having an initial effect on performance. Again, there was a need to undertake benchmarking with other authorities to compare performance and targets.

CN asked in relation to HR03 (Number of days sickness lost per month) whether additional information regarding the split between manual and office staff could be provided.

<u>Action:</u> JVM to review whether split between manual and office staff can be provided.

# **Working Group Action:**

 For the working group to continue to review progress of the quarterly Performance Indicators.

# 5. Any Other Business

None

## 6. Date of next meeting

To be arranged.

# Addendum 2

# Audit & Scrutiny Committee Performance Indicators & Formal Complaints Working Group

Members of Working Group

Cllrs. Nolan, Dr Barrett, Naylor, Tanner and Hirst.

# Terms of Reference

- To monitor and consider the Council's service Performance Indicators.
- To consider in detail Formal Complaints received by the Council.
- To consider how Performance Indicators and Formal Complaints are reported to the Audit & Scrutiny Committee.
- To make recommendations to the appropriate Audit & Scrutiny Committee.



# Members Working Group Formal Complaints Q3 2021/22

Oct-Dec 2021

# Formal Complaints received annually

Department	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21
Assets	0	2	0	1	1	2	3	0
Building Control	0	0	0	0	0	0	1	0
Community Safety	0	0	0	0	0	1	1	7
Community Services	0	0	0	2	1	0	2	0
Customer Service	0	0	0	1	1	4	5	7
Democratic Services	0	0	1	1	0	0	2	1
Housing	10	11	32	30	38	47	75	66
Env Health & Licensing	0	1	1	0	1	3	4	10
Finance	0	0	0	0	0	2	0	0
Legal	3	0	2	1	0	0	0	0
Licensing	0	0	0	0	0	0	0	2
Parking	0	0	0	0	1	1	3	1
Planning	10	4	23	13	10	10	16	15
Revs & Bens	9	2	12	9	31	33	28	8
Streetscene	1	3	5	3	5	15	44	63
Total	33	23	76	61	89	118	184	180

# 2021/22 Formal Complaints received

Oct to Dec 2021

Q3						
Department	Total	Upheld	%			
Assets	0	N/A	N/A			
Community Services	0	N/A	N/A			
Electoral Services	0	N/A	N/A			
Environmental Health	1	0	0%			
Housing	18	7	39%			
Planning	3	0	0%			
Revenues & Benefits	4	2	50%			
Streetscene	10	8	80%			
Total	36	17	47%			

	YTD		
Department	Total	Upheld	%
Assets	1	N/A	N/A
Community Services	1	N/A	N/A
Electoral Services	1	0	0%
Environmental Health	6	3	50%
Housing	48	17	35%
Planning	15	4	27%
Revenues & Benefits	8	4	50%
Streetscene	22	14	63%
Total	102	42	41%

# **2021/22 Formal Complaints responded to within agreed timeframe** Oct to Dec 2021

Q	3
Department	%
Assets	N/A
Community Services	N/A
Electoral Services	N/A
Environmental Health	100%
Housing	72%
Planning	100%
Revenues & Benefits	100%
Streetscene	60%
Total	72%

YT	D
Department	%
Assets	0%
Community Services	0%
Electoral Services	100%
Environmental Health	100%
Housing	71%
Planning	76%
Revenues & Benefits	83%
Streetscene	55%
Total	80%

# Channel received



	Q1	Q2	Q3	Q4
Online form	41%	46%	50%	
Email	43%	50%	42%	
Website enquiry	11%	0%	3%	
Via LGO/HO	3%	0%	0%	
Telephone	0%	0%	0%	
Letter	2%	4%	6%	

# **Upheld Formal Complaints – Oct to Dec 2021 Housing**



No	Complaint	Stage
1	Axis advised engineer was on way to property which was not correct	Stage 1
2	Boiler could not be serviced due to boiler not being switched off leading to a number of appointments being made	Stage 1
3	Poor workmanship toilet cistern	Stage 1
4	Delay in initial contact and subsequent contact from Officer	Stage 1
5	Not accepted onto Housing Register	Stage 2 – Part Upheld
6	No response regarding fitting of heaters and no offer of temporary heaters	Stage 1
7	Incorrect work undertaken and delays and lack of communication	Stage 2 – Part Upheld

# **Upheld Formal Complaints – Oct to Dec 2021 Revenues and Benefits**



No	Complaint	Stage
1	Received two Council Tax bills and couldn't get through to the Billing Team	Stage 1
2	Length of time benefit claim to be processed, loss of documents and calls not returned	Stage 1 – Part upheld

# **Upheld Formal Complaints – Oct to Dec 2021 Streetscene**



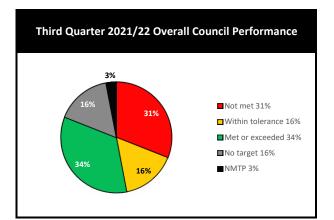
No	Complaint	Stage
1	Bin was used by crews	Stage 1
2	Repeated missed collections	Stage 2
3	Repeated missed collections	Stage 2
4	Missed collection	Stage 1
5	Poor customer service	Stage 1
6	No action taken on reported flytipping	Stage 1
7	Brown bin missed collection	Stage 1
8	Poor customer service from crew	Stage 2

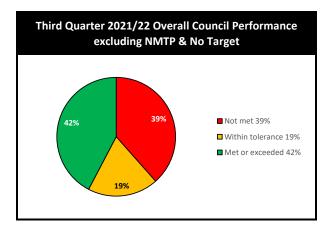
# **Ombudsman**

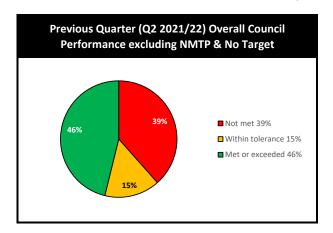


	Service	LGO/HO	Complaint	Council's decision	Ombudsman outcome
1	Environmental Health	LGO	Business operating from next door household property	Part upheld	No fault found
2	Housing	НО	Told conflicting information about being able to move whilst having rent arrears and handling of ASB reports	Part upheld	No fault found
3	Planning	LGO	Dispute that planning condition has been achieved	Not upheld	Under investigation
4	Streetscene		Failure to address complaints about littering on the A12 and linked slip roads	Upheld	Decision not to investigate – insufficient injustice
5	Planning		Length of time taken to determine retrospective planning application and reluctance to use enforcement	Not upheld	Decision not to investigate – too early to investigate the issues complained about

#### **Brentwood Borough Council - Performance Indicator Dashboard**







		Third Qu	arter 202	21/22 Pe	rforman	ce by De	partmen	t				
		R	ted	An	Amber		een	No T	arget	NN	Total	
70		No.	%	No.	%	No.	%	No.	%	No.	%	No.
Economy	Planning	1	17%	0	0%	4	67%	0	0%	1	17%	6
Econment	Street Scene	2	29%	3	43%	2	29%	0	0%	0	0%	7
D	Environmental Health	1	50%	1	50%	0	0%	0	0%	0	0%	2
Housing	Housing	3	60%	1	20%	0	0%	1	20%	0	0%	5
7.6	Finance	2	67%	0	0%	0	0%	1	33%	0	0%	3
Effective	Human Resources	0	0%	0	0%	0	0%	1	100%	0	0%	1
Effective	Revenues and Benefits	0	0%	0	0%	5	100%	0	0%	0	0%	5
	Contact Centre	1	33%	0	0%	0	0%	2	67%	0	0%	3
Total		10	31%	5	16%	11	34%	5	16%	1	3%	32
<b>Previous Quarter</b>	Total	10	31%	4	13%	12	38%	5	16%	1	3%	32

	Key
	Current performance is below target by more than the specified target deviation.
	Current performance is below target but is within tolerance.
	Current target has been met or exceeded.
	No target.
NMTP	Not measured this period.
1	Performance for the quarter or year to date is improving (up) or deteriorating (down) compared to previous quarter or across the year.

	ur economy		Previou	ıs Quarterly	Results	Latest	Quarterly F	Results		2021	/22 Year to	Date	
Department and PI Code	Performance Indicator	Measure	Q4 Result					Q Status & Trend	Q Graphic	YTD Result	YTD Target	YTD Status & Trend	Commentary
Planning P01	Number of new homes approved to be built in the Borough	Annual	61	NMTP	NMTP	NMTP	No target	NMTP	550 471 492 541 450 350 291 291 61 50 61 50 70 70 70 70 70 70 70 70 70 70 70 70 70	NMTP	No target	NMTP	The gross number of new homes approved to be built in the Borough. Approvals for new homes help towards the Borough's supply of homes, specifically the required five-year housing supply (published annually). The total for 2020/21 is lower than previous years. This is likely due to an increase in extensions to existing dwelling since the pandemic, lack of available land (we need the Local Plan to be adopted to unlock green belt sites) and people turning their focus to home renovations.  Not measured at this point.
Planning P02 Page	% of appeals allowed against the authority's decision to refuse planning applications	Quarterly	39.90%	53.30%	41%	46%	31%	Red	60% 40% 20% 0% Q4 Q1 Q2 Q3	47%	31%	Red	Monitoring is done to understand why appeals happen and what can be done to reduce them / reduce number of overturns. Also working with agents to understand what we can do to help. An 'Appeals Update' is presented to Planning Committee which started on Feb 2021 to provide more detail on appeals.
Planning 803	Processing of planning applications as measured against targets for 'Major' application types	Quarterly	100%	100%	100%	100%	50%	Green	100% 50% 0% Q4 Q1 Q2 Q3	100%	50%	Green	Consistently high performance achieved throughout the year. Processes/performance are constantly being reviewed to ensure standard remain high. Number of Major application types received have not been affected by COVID. Processes have been tweaked to ensure business as usual and no detrimental effect to applicants.
Planning P04	Processing of planning applications as measured against targets for 'Minor' application types	Quarterly	97.30%	95.90%	98%	95%	70%	Green	100% 50% Q4 Q1 Q2 Q3	96.33%	70%	Green	Consistently high performance. Processes/performance are constantly being reviewed to ensure standards remain high. Number of minor application types dropped off this year due to COVID, but not as much as expected. Processes have been tweaked to ensure business as usual and no detrimental effect to applicants.

Planning P05	Processing of planning applications as measured against targets for 'Other' application types		99.10%	99.10%	95.80%	98.90%	80%	Green	100% 50% 0% Q4 Q1 Q2 Q3	97.93%	80%		Consistently high performance achieved throughout the year. Processes/performance is constantly being reviewed to ensure standards remain high. Number of other application types dropped off this year due to COVID, but not as much as expected. Processes have been tweaked to ensure business as usual and no detrimental effect to applicants.
Planning P06	Percentage of planning applications approved	Quarterly	NMTP	76.30%	83.40%	78.80%	75%	Green	85% 80% 75% Q4 Q1 Q2 Q4	79.50%	75%	l	This is a new PI for 2021/22 and reports approvals of all PS1 and PS2 applications (i.e. excl. pre-applications)

#### **Brentwood Borough Council - Performance Indicator Dashboard**

Protecting	our environr	nent											
			Previou	us Quarterly	Results	Latest	Quarterly	Results		202:	1/22 Year to		
Department and PI Code	Performance Indicator	Measure	Q4 Result	Q1 Result	Q2 Result	Q3 Result	Q Target	Q Status & Trend	Q Graphic	YTD Result	YTD Target	YTD Status & Trend	Commentary
Street Scene	Residual	Quarterly	137.81kg	139.11kg	137.13kg	132.10kg	109kg	Red	150	136.11kg	109kg	Red	Estimated as statistics to be verified by ECC.
and Environment E01	household waste per household							1	100 50 Q4 Q1 Q2 Q3			1	2020/21 actuals - 544.4kg per household (34,010 households)  Residual waste has risen nationally in response to COVID-19 with more people being at home, ecommerce etc. Qtr 3 sees a slight improvement with Government encouraging people to visit the office once again, but this is causing further problems with new strains of the virus occurring.
Street Scene and Environment E02	Percentage of household waste arisings which have been sent by the authority for reuse, recycling, composting or anaerobic	Quarterly	34.99%	40.38%	42.04%	38.72%	53%	Red	60% 50% 40% 30% 20% 10% Q4 Q1 Q2 Q3	40.38%	53%	Red	Estimated as statistics to be verified by ECC  2020/21 actuals - 41.51%  The changeover of flats onto the New Recycling Scheme is proving difficult, with constant contamination of the communal bins, and some of these properties having insufficient room for kerbside collections.
Street trene and Environment E03	digestion Paper and card recycled by tonne	Quarterly	NMTP	720.45 tonne	652.73 tonne	668.4 tonne	600 tonne	Green	800 600 400 200 0 Q4 Q1 Q2 Q3	2071.58 tonne	1800 tonne	Green	This is a new PI for 2021/22.  Paper & card fluctuates per period with the main production centred around the public holidays of Easter and Christmas. The target set was uncertain at the time as we changed over from Orange Sacks to the new kerbside collection regime.
Street Scene and Environment E04	Cans and plastic recycled by tonne	Quarterly	NMTP	207.3 tonne	205.8 tonne	198.3 tonne	200 tonne	Amber	300 200 100 0 Q4 Q1 Q2 Q3	621.58 tonne	600 tonne	Green	This is a new PI for 2021/22.  Cans & plastics are proving difficult for residents to understand due to the nature allowed by the recycling centre stringent targets. Most contamination arises around the Christmas period possibly to do with thin films and packaging from Amazon having an effect.
Street Scene and Environment E05	Mixed glass recycled by tonne	Quarterly	NMTP	613.72 tonne	543.76 tonne	503.9 tonne	550 tonne	Amber	800 600 400 200 0 Q3 Q4 Q1 Q2	1661.38 tonne	1650 tonne	Green	This is a new PI for 2021/22.  The use of glass could be skewed due to Government not allowing the Hospitality industry to remain open and more people being at home, with a drop coming out of the earlier strains of the COVID virus.

and	Food waste recycled by tonne	Quarterly		327.9 tonne	307.2 tonne	312.5 tonne	300 tonne	Green	400 300 200 100 0 Q4 Q1 Q2 Q3	992.6 tonne	900 tonne	Green	This is a new PI for 2021/22.  Food waste data should remain fairly static with minor variations depending on number of days collected, or with Q2 families were allowed to go on holidays once more.
Street Scene and Environment E07	Garden waste recycled and diverted from landfill per tonne	Quarterly		1388.9 tonne	1672.6 tonne	1169.5 tonne	1300 tonne	Amber	2000 1500 1000 500 0 Q4 Q1 Q2 Q3	4240.70 tonne	3900 tonne	Green	This is a new PI for 2021/22.  There has been a marked increase in the number of Brown Bin leases this year with a steady increase on quarter collections, but fluctuations will arise as the seasons change so will update the quarter targets accordingly going forward.
Environmenta I Health EH01	Food safety/ hygiene standards in food premises - % of broadly compliant food premises	Quarterly	See commenta ry	95.10%	96.21%	96.19%	97%	Amber	100% 98% 96% 94% 92% 90% Q4 Q1 Q2 Q3	95.83%	97%	Amber	The Q3 result continues to be lower than target. This is due to a large number of new premises registering with us during COVID-19 (well over double that we would get in a year pre-COVID) and a delay in us inspecting premises due to being engaged in COVID-19 work. In addition, the Food Standards Agency suspended inspections for six months during the initial stages of the pandemic. We are therefore carrying an outstanding inspection list, which to my knowledge has never been the case at Brentwood Borough Council.
EH02	Service requests investigated within target time (5 days)	Quarterly	NMTP	NMTP	62.50%	65.00%	100%	Red	150 — — — — — — — — — — — — — — — — — — —	63.75%	100%	Red	This is a new PI for 2021/22 and is being reported from Q2.  The figure for target response reflects the timeliness of responses by officers to service requests. The figure is improving with some way to go to achieve optimum performance. This figure can be effected by staff absences and work volumes and so is not necessarily reflective of the quality of the work undertaken.

mprovilig	mproving our housing  Previous Quarterly Results  Latest Quarterly Results									2021	L/22 Year to	Date	
Department and PI Code	Performance Indicator	Measure				Q3 Result		Q Status & Trend	Q Graphic	YTD Result	YTD Target	YTD Status & Trend	Commentary
	Average re-let times for Local Authority Housing	Quarterly	(45 Days GN, 55 Days SH,	(37 Days GN, 112 Days SH,	28 Days (24 Days GN, 0 Days SH, 35 Days TA)	58 Days (47 Days GN, 71 Days SH, 64 Days TA)	22 Days	Red	80 60 40 20 Q4 Q1 Q2 Q3	49 Days	22 Days	Red	Void turnaround has decreased as we see more voids coming in and works needed within them. We also saw a period here where voids were held longer than usual by estates to facilitate the decant of tenants from our development sites.
Housing H04	Households living in temporary accommodatio n	Quarterly	,	27	34	38	29	Red	40 20 Q4 Q1 Q2 Q3	33	29	Red	With recent Government directives towards the accommodation of rough sleepers we have seen an increase in the levels of TA through our Severe Weather Emergency Protocol and COVID response. We are forecasting a steady increase in placements due to the directive to omit the reason to believe priority need when accessing rough sleeper approaches.
Housing H05 age 10	Gas servicing in Council homes	Quarterly	100%	99.31%	99.25%	98.87%	100%	Amber	98% 96% Q4 Q1 Q2 Q3	99.14%	100%	Amber	LGSR (Landlord Gas Safety Record) compliance remains high and we continue to prioritise access to properties outstanding.
Housing 107	No. of applicants on the waiting list for Local Authority housing	Quarterly	NMTP	1,091	953	321	No Target	No Status	1,500  1,000  500  Q4 Q1 Q2 Q3	321	No Target	No Status	This is a new PI for 2021/22.  Housing Register: 143  Transfer Register: 177  Following the completion of the council's housing register reregistration project in line with the new Allocations Policy our figures have decreased quite significantly. We have benchmarked our post reregistration figures with neighboring boroughs and have identified that this is a reasonable response at this stage. We forecast a steady increase in applicants who continue to re-apply to join the register.
Housing H08	Average Rent Arrears Total (Current Tenants, Garages)	Quarterly	£712,342	£698,450	£744,917	£741,419	£650,000	Red	£800 £650 £600 Q4 Q1 Q2 Q3	£741,419	£650,000		There are now more staff processing accounts than previous quarters and there is capacity to complete all actions. Unfortunately, this quarter with the festive period is well known for having a large impact on arrears performance. We believe that we may have been able to reduce the arrears average further if it wasn't due to the Christmas increases.

			Previou	s Quarterly	Results	Latest Quarterly Results			2021/22 Year to Date				
Department and PI Code	Performance Indicator	Measure	Q4 Result	Q1 Result	Q2 Result	Q3 Result	Q Target	Q Status & Trend	Q Graphic	YTD Result	YTD Target	YTD Status & Trend	Commentary
Finance E01	% of invoices from local suppliers paid within 20 day	Quarterly	79.09%	91.02%	89.17%	88.11%	95%	Red	100% 90% 80% 70% Q4 Q1 Q2 Q3	89.43%	95%	Red	With shift over to No PO No Pay, managers are getting to grip with this and invoices were sent back when no PO was quoted. However, there was a delay in some managers authorising invoices which caused an effect on the scores.
Finance E02	% of invoices from all suppliers paid within 30 days	Quarterly	87.61%	96.38%	92.12%	91.90%	95%	Red	100% 90% 80% Q4 Q1 Q2 Q3	93.47%	95%	Amber	With shift over to No PO No Pay, managers are getting to grip with this and invoices were sent back when no PO was quoted. However, there wa a delay in some managers authorising invoices which caused an effect on the scores.
Finance E03 Page	Value of corporate debt	Quarterly	NMTP	£1.547m	£2.886m	£1.245m	Reduction from previous quarter	No Status	Million  4  2  0  Q4  Q1  Q2  Q3	£1.245m	Reduction from previous quarter	No Status	Debt decreased with largest value invoices being paid. Still vast proportion of debt is associated with SAIL and ECC with their invoices making up over 50% of all debt.
Human 1 Resou ( )	Number of days sickness lost per month	Monthly	Jan 162 Feb 110.5 Mar 136.5		Jul 176 Aug 186 Sep 147	Oct 202 Nov 168 Dec 154	No Target	No Status	200 150 100 50 Jan Mar May Jul Sep Nov	1497	No Target	No Status	This PI reflects the number of working days lost to sickness each month.  Absence figures for Q3 compared to this time last year have increased. This is due to a number of employees off due to long term absences (28 days or more). With the main reason for long term absence being Anxiety/Depression, long covid and musculoskeletal. We have been pro actively targeting support to managers over the last quarter and through managing absences under the policy have reduced the number of long term absences, with a positive return to work for a number of these employees. In terms of short term absences the main reasons for short term absences for Q3 was Covid (including side effects of the vaccine or self isolation), gastroenteritis conditions or coughs/cold or flu. We continue to offer support to all employees around their wellbeing by way of wellbeing check ins, employee assistance programme, regular 1:1s and Team meetings, Mental Health First Aiders, wellbeing teams channel, wellbeing sway site, lunch and learn sessions and encouraging a form of physical activity.

Revs & Bens CT01	Council Tax collection	Quarterly	97%	29.20%	56.30%	83.30%	81%	Green	100% 50% 0% Q4 Q1 Q2 Q3	83.30%	81%	Green	The back office team are being proactive in their approach to cases where no payment has been received. A 'soft' reminder letter has been issued inviting customers to contact for help, support and advice. Together with this the team have actively dialled out to customers to offer the same along with adjust instalment plans. For customers who have previous years arrears we are prioritising the in-year charge and will discuss previous years' arrears with customers later in the year.
Revs & Bens CT03	Housing Benefit and Pensioner Council Tax Support - time taken to process new claims	Quarterly	14.5 days	16 days	16 days	18 days	18 days	Green	24 22 20 18 16 14 12 10 Q4 Q1 Q2 Q3	16.66 days	18 days	Green	The target has been reduced from 21 days to 18 days for 2021/22.  New claims for this quarter and year to date remain at target despite increased call on resources for other activities and loss of experienced members of staff. With fewer new claims received due to changes in legislation where fewer are left eligible to claim Housing Benefit rather than Universal Credit Housing costs, it is the more complicated cases of temporary and supported accommodation which the team are to deal with. By the nature of these vulnerable tenants obtaining documentation with the month that legislation requires us to give customers to do so makes targets less than one month quite a challenge but one that we are meeting with careful monitoring and chasing customers and relevant organisations in order to get Housing Benefit in payment at the earliest opportunity
Revs & Re	Housing Benefit and Pensioner Council Tax Support - time taken to process Change of Circumstances	Quarterly	4.5 days	5 days	5.5 days	6 days	6 days	Green	10 8 6 4 2 0 Q4 Q1 Q2 Q3	5.5 days	6 days	Green	The target has been reduced from 8 days to 6 days for 2021/22.  We are at target for this PI despite additional calls on our resources.  Continued monitoring of days to process and outstanding work to ensure work is moved through to completion
Revs & Bens CT07	Reduction scheme for working age persons - time taken to process <b>new</b> applications	Quarterly	3 days	3 days	3 days	2 days	3 days	Green	6 4 2 0 Q4 Q1 Q2 Q3	2.66 days	3 days	Green	The target has been reduced from 5 days to 3 days for 2021/22. We have dedicated officers working on CTR applications to ensure these are processed in a timely manner to ensure that accounts are up to date so that residents made aware how much and when they are required to pay their Council Tax.
Revs & Bens CT08	Council Tax Reduction scheme for working age persons - time taken to process change of circumstances	Quarterly	2 days	2 days	3 days	2 days	3 days	Green	6 5 4 3 2 1 0 Q4 Q1 Q2 Q3	2.33 days	3 days	Green	The target has been reduced from 5 days to 3 days for 2021/22.  We have dedicated officers working on CTR applications to ensure these are processed in a timely manner to ensure that accounts are up to date so that residents made aware how much and when they are required to pay their Council Tax.

Contact Centre CC02	Telephone calls taken by the Contact Centre for those services undertaken by the Contact Centre	Quarterly	14,385	13,969	13,769	11,665	No Target	No Status	30000 20000 10000 Q4 Q1 Q2 Q3 Previous Current	39,403	No Target	No Status	This figure depicts the number of calls received via the main Council telephone no. 01277 312500 and that have selected the applicable service from the options provided. It does not include calls that have selected option '0' (this figure is reflected in CC01). The services undertaken by the Contact Centre are Environmental Health, Licensing, Planning, Building Control, Parking, Operational Services and Housing Services.
Contact Centre CC04	Website sessions	Quarterly	211,054	200,356	133,370	180,536	No Target	No Status	250,000 200,000 150,000 50,000 Q4 Q1 Q2 Q3 Previous Current	514,262	No Target		Website sessions are defined as:  A session is the period time a user is actively engaged with your website. By default, if a user is inactive for 30 minutes or more, any future activity is attributed to a new session. Users that leave your site and return within 30 minutes are counted as part of the original session.  A new corporate website was launched in June 2021, which now includes Cookie consent. We will carefully monitor trends associated with this across 2021/22.
Contact Centre CC05	% calls answered within SLA	Quarterly	NMTP	33 seconds	71 seconds	83 seconds	60 seconds	Red	100 80 60 40 20 Q4 Q1 Q2 Q3	62.33 seconds	60 seconds	Amber	This is a new PI for 2021/22.  Benchmarking across Essex reports varying targets for time to answer. We have set our target relatively low in recognition of the important of maintaining a good level of customer service.  Current trend - New staff have been training over the past 5 months.  Reception re-opened in October, moving 2 CCA's back to Reception with reduced numbers in the Contact Centre.

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Committee: Audit and Scrutiny Committee	Date: 8 March 2022
Subject: Local Development Plan Member Working	Wards Affected: All
Group Update	
Report of: Phil Drane, Corporate Director (Planning &	Public
Economy)	
Report Author:	For Information
Name: Phil Drane, Corporate Director (Planning &	
Economy)	
Telephone: 01277 312500	
E-mail: philip.drane@brentwood.gov.uk	

## **Summary**

The Local Development Plan (LDP) Member Working Group is an established engagement between Officers and Councillors focussed on delivery of the Council's Local Plan and related work. Its purpose was approved by Policy, Projects and Resources Committee in September 2017.

The work of the working group is monitored by the Audit and Scrutiny Committee as part of the committee's work programme. This report provides an update on the most recent meetings of the working group.

## **Main Report**

# **Introduction and Background**

- 1. The Local Development Plan (LDP) Member Working Group is an established engagement between Officers and Councillors that has taken place over several years alongside preparation of the Council's local plan. The purpose of the working group is to consider the local plan and associated documents before they are considered by the Council at a relevant meeting or committee. This purpose was approved by the Council in September 2017 (Item 114, Policy, Projects and Resources Committee, 19 September 2017).
- 2. Audit and Scrutiny Committee monitors the work of the LDP Member Working Group as part of its work programme. An update is provided in this report on the activities of the working group.
- 3. In addition to the working group, a separate Dunton Hills Garden Village Project Delivery Board regularly meets to provide oversight as the scheme progresses. Dunton Hills Garden Village is a key part of the local plan strategy for growth and so there is inevitably some cross-over between the issues discussed by the project board and LDP Member Working Group. The project board includes

representation from lead members of Brentwood Borough Council and Essex County Council, CEG as master-developer and majority land promoter, West Horndon Parish Council, and Homes England (representing the Government / Department for Levelling Up, Housing and Communities, regarding the delivery of garden communities). The purpose and membership of the project board was approved by the Council in March 2019 (Item 383, Policy, Projects and Resources Committee, 19 March 2019). A supporting governance framework is in place for the project, which sets out the purpose of the project board and the supporting technical steering group that meets regularly.

# Issue, Options and Analysis of Options

- 4. Audit and Scrutiny Committee was last provided with a LDP Member Working Group update on 12 January 2022 (Item 259). Since then, the working group has met on 9 February 2022 (see Appendix A for draft meeting notes that have not yet been approved by the group). Discussion focussed on the current local plan examination process as the inspectors' final report was awaited. On receipt of the inspectors' report this will be published and inform a recommendation to the Council regarding adoption of the plan.
- 5. There has not been a meeting of the Dunton Hills Garden Village Project Delivery Board or Technical Steering Group in the period since the last update to Audit & Scrutiny Committee. An update on the currently live outline planning application for the garden village is to be brought to Planning & Licensing Committee soon. Work towards finalising detailed design guidance specific to the garden village is to be aligned with adoption of the local plan.

#### Consultation

6. The local plan and associated documents are subject to public consultation.

#### **References to Corporate Strategy**

7. The local plan is a key vehicle for the delivery of many objectives set out within the Council's Corporate Strategy "Brentwood 2025". This includes growing our economy, protecting our environment, developing our communities, and improving housing.

#### **Implications**

**Financial Implications** 

Name/Title: Jacqueline Van Mellaerts, Corporate Director (Finance & Resources)

and S151 Officer

Tel/Email: 01277 312500/jacqueline.vanmellaerts@brentwood.gov.uk

8. There are no direct financial implications. There are appropriate budgets included within the medium-term financial strategy to resource the local plan and associated documents.

**Legal Implications** 

Name & Title: Amanda Julian, Corporate Director (Law and Governance) and

**Monitoring Officer** 

Tel & Email: 01277 312500/amanda.julian@brentwood.gov.uk

- 9. The procedures that the Council is required to follow when producing a local plan derive from the Planning and Compulsory Purchase Act 2004 (as amended) and the Town and Country Planning (Local Development) (England) Regulations 2012.
- 10. The legislation states that a local planning authority must only submit a plan for examination which it considers to be sound. This is defined by the National Planning Policy Framework as being:
  - a) Positively Prepared: based on a strategy which seeks to meet objectively assessed development and infrastructure requirements;
  - b) Justified: the most appropriate strategy, when considered against the reasonable alternatives, based on proportionate evidence;
  - c) Effective: deliverable over its period and based on effective joint working on cross-boundary strategic priorities; and
  - d) Consistent with national policy: enable the delivery of sustainable development in accordance with the policies in the Framework.
- 11. For the draft local plan to pass the tests of soundness, in particular the 'justified' and 'effective' tests, it is necessary for it to be based on an adequate, up to date and relevant evidence base. The Council also has a legal duty to comply with the Statement of Community Involvement in preparing the plan. (S19(3) 2004 Act).
- 12. In addition, the Council also has a legal "duty to cooperate" in preparing the plan. (S33A 2004 Act).

**Economic Implications** 

Name/Title: Phil Drane, Corporate Director (Planning & Economy)

Tel/Email: 01277 312500/philip.drane@brentwood.gov.uk

13. The local plan is a key vehicle for the delivery of economic growth, in line with the Council's objectives to grow the economy. It is important that the delivery of the plan is scrutinised through elected representation.

#### **Equality and Diversity Implications**

Name/Title: Kim Anderson, Corporate Manager (Communities, Leisure & Health) Tel/Email: 01277 312634/kim.anderson@brentwood.gov.uk

14. The local plan considers equality and diversity issues.

#### **Health & Wellbeing Implications**

Name/Title: Jo Cory, Corporate Health & Wellbeing Officer

Tel/Email: 01277 312500/jo.cory@brentwood.gov.uk

15. The local plan includes provisions to maintain and improve health and wellbeing in the borough.

**Other Implications** (where significant) – i.e. Health and Safety, Asset Management, Risk Management, Section 17 – Crime & Disorder, Sustainability, ICT.

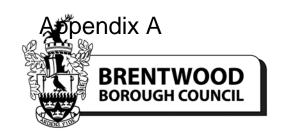
- 16. Delivery of the local plan is monitored through the Council's strategic risk register.
- 17. The local plan is accompanied by a Sustainability Appraisal.

#### **Background Papers**

- Local Development Plan Member Working Group Update, Item 259, Audit and Scrutiny Committee, 12 January 2022
- Local Development Plan Member Working Group Update, Item 131, Audit and Scrutiny Committee, 28 September 2021
- Local Development Plan Member Working Group Update, Item 76, Audit and Scrutiny Committee, 6 July 2021
- Dunton Hills Garden Village Project Governance, Item 383, Policy, Projects and Resources Committee, 19 March 2019
- Corporate Projects Report, Item 114, Policy, Projects and Resources Committee, 19 September 2017

#### **Appendices to this report**

Appendix A: Local Development Plan Member Working Group Draft Notes, 9
 February 2022



## **Notes**

**Meeting:** Local Development Plan Member Working Group (4)

Venue: Online via Microsoft Teams

Date: Wednesday 9 February 2022

**Time:** 18:00-18:50

Members Present: Cllr Thomas Bridge (Chair), Cllr Dominic Naylor

Officers Present: Jonathan Quilter (JQ), Corporate Manager – Strategic Planning

Andrea Pearson (AP), Senior Policy Planner Thom Hoang (TH), Senior Policy Planner

Apologies: Cllr Tim Barret, Cllr Jon Cloke, Cllr Philip Mynott, Cllr Olivia Sanders

#### 1. Notes from last meeting

- a) Notes from the last meeting (30/11/2021) were circulated for review.
- b) Cllr Bridge asked a question regarding paragraph 2h of the notes and the issue of bringing the plan to a meeting of Extraordinary Council. This requires clarification going forward as there is now a different approach being proposed regarding Ordinary Council.

#### 2. Local Plan Examination Update

- a) JQ updated on the position of the Local Plan, the Inspectors Report is expected shortly. The team is working with Democratic Services on when the plan can be brought to the Council, currently looking at whether it can be added to the Ordinary Council agenda on 16 March 2022.
- b) Cllr Bridge set out a preference for 16 March and wanted to ensure that the papers would be published beforehand in line with requirements.
- c) JQ explained that discussion with the Programme Officer indicated the draft Inspectors Report was expected for fact checking by Monday 21 February. Timings on the receipt of the report may impact publication of papers. The team is working on the committee report and supporting documents as much as possible in advance.
- d) Cllr Bridge asked what would happen if there were a mistake in the plan as published with the committee report compared to the main modifications version.



## **Notes**

- e) JQ advised that the Council should be in a position to amend any minor errors via 'additional modifications' if they do not amount to a main modification. Those additional modifications would need to be clearly recorded. However, the Council cannot make further amendments.
- f) JQ advised that subject to the emerging plan being adopted, it will carry full weight from that point on for decision-making. Legislation requires the Council to notify members of the public and there would be a six-week period for legal any challenge based on procedural errors. However, the Plan still carries full weight if and until any legal challenge is resolved. The Council is also required to notify the Secretary of State.
- g) Cllr Bridge asked for those applications in between the transition period, whether the decision notice would be based on the new plan.
- h) JQ suggested that advice may need to be sought on how long any transition period should be. Case officers and applicants recognise the need to start considering the emerging plan alongside the 2005 plan and the weights attached to them.
- i) Discussion about the need for an all member briefing ahead of a full council meeting. There needs to be very clear guidance on the process regarding any proposals for amendments and these would not permitted according to soundness.
- j) JQ advised that a key modification is the need for an immediate review of the plan.
- k) Cllr Naylor asked if the plan review would mean that the Council needs to find and plan for a higher number of new homes.
- I) JQ advised that through the examination process, the original standard housing need calculation was updated, and the delivery trajectory of large sites slipped because of the examination passage of time. That lead to a shortfall in the five year housing supply. The immediate review was a mechanism to address the five year housing shortfall whilst enabling the plan to be found sound. As part of the review, the Council will need to undertake a call for sites, site assessments and regulation 18 consultation on the future provision of new homes to meet needs.
- m) Cllr Naylor asked whether an extraordinary council would be more suitable to discuss the plan.
- n) JQ advised that discussion was taking place with the Democratic Services Team to identify the most suitable way of presenting and debating the plan.
- o) Cllr Naylor asked whether as part of the Plan review if current omission sites would come forward again.
- p) JQ advised that the Council would need to follow due process in assessing any site that could provide for development needs and decisions made in line with a strategy for sustainable growth.
- q) Cllr Naylor requested that the accompanying PowerPoint slides be circulated to members.



## **Notes**

#### 3. AOB

- a) Discussion about the next LDP member working group meeting currently scheduled to take place after Ordinary Council on 16 March. Agreed that this would be helpful to reschedule ahead of the decision to adopt and that this might provide an opportunity to have an all-member briefing.
- b) JQ agreed that the meeting would be rescheduled according to availability.





Committee(s): Audit & Scrutiny Committee	<b>Date:</b> 8 March.2022
Subject: Ordinary Council Motions 2021/2022	Wards Affected: All
Report of: Steve Summers – Strategic Director	Public
Report Author/s:	For
Name: Claire Mayhew- Corporate Manager (Democratic	Information
services)	
Telephone: 01277 312741	
E-mail: claire.mayhew@brentwood.gov.uk	

#### **Summary**

At a previous meeting of Audit & Scrutiny held on 6<sup>th</sup> July 2021 Cllr Dr Barrett, requested a report to be presented on the progress of Ordinary Council Motions (Min 77 refers) under the Scrutiny Work Programme

#### Recommendation(s)

#### Members are asked to:

R1. That members note the progress of Ordinary Council Motions for 2021/22.

#### **Main Report**

- 1. This report will form part of the Scrutiny Working Programme and an annual report will presented at last Audit and Scrutiny of the Municipal year to ensure transparent governance and open to scrutiny.
- 2. Appendix A shows a total of seven motions approved by Ordinary Council from July 2021 until December 2021. Any further motions approved in the municipal year 2021/22 will be reported accordingly.

#### **Introduction and Background**

3. Any one or more Members of the Council may, by notice received by the Monitoring Officer no later than 10.00 am eleven working days before the day of the Council meeting, require the Council to consider a motion about a matter relating to which the Council has powers or duties or which affects the Council's area. A notice of motion may be accompanied by a statement of not more than 200 words setting out the reason for the proposed motion.

- 4. The Monitoring Officer will record all notices of motions (not including a rejected notice) in the order in which they are received, and such record shall be open to public inspection on request.
- 5. Motions can be rejected by the Monitoring Officer if: -
  - (a) it does not comply with the requirements of this Rule;
  - (b) the notice of motion is defamatory of an individual, offensive, or otherwise infringes the proper conduct of local government; or
  - (c) the recommendation in the notice of motion would be illegal.
- 6. A motion or amendment in similar terms to one that has been rejected at a meeting of Council in the past six months cannot be moved except in accordance with Rules 8.3.17.
- 7. The Council shall not debate any motion which would give rise to a significant change to the income of the Council, to its expenditure or to contract terms, unless it has received a report from the Chief Finance Officer or the Monitoring Officer, as appropriate, setting out the legal or financial effect of the motion.
- 8. Motions of Council will not be accepted at Annual Council, Extra Ordinary Council or Ordinary Council (Budgetary Framework).

#### Consultation

9. None.

#### **References to Corporate Plan**

10. Delivery an efficient and effective Council – Transparent Decision making.

#### **Implications**

#### **Financial Implications**

Name/Title: Jacqueline Van Mellaerts, Corporate Director (Finance & Resources) Tel/Email: 01277 312829/jacqueline.vanmellaerts@brentwood.gov.uk

11. There are no direct financial implications.

**Legal Implications** 

Name & Title: Amanda Julian, Corporate Director (Law & Governance) and

**Monitoring Officer** 

Tel & Email: 01277 312705/amanda.julian@brentwood.gov.uk

12. There are within the body of the report.

**Economic Implications** 

Name/Title: Phil Drane, Corporate Director (Planning and Economy)

Tel/Email: 01277 312610/philip.drane@brentwood.gov.uk

13. There are no direct economic implications arising from this report.

**Equality and Diversity Implications** 

Name/Title: Kim Anderson, Partnerships, Leisure & Funding Manager

Tel/Email: 01277 312634/kim.anderson@brentwood.gov.uk

14. All Council decisions to reflect the Council's Section 149 duty.

**Other Implications** (where significant) – i.e. Health and Safety, Asset Management, Equality and Diversity, Risk Management, Section 17 – Crime & Disorder, Sustainability, ICT.

#### **Background Papers**

None

#### **Appendices to this report**

Appendix A: Ordinary Council Motions July 2021 – Dec 2021



# **Motions from Ordinary Council 2021/2022**

No	Date	Motions	Mover	Seconder	RAG	Comments
1	28 <sup>th</sup> July	That the Council notes that:	Cllr Dr	Cllr Barrett		Cllr Dr T Barrett presented his motion and
	2021	(1) humans have already caused	Barrett			ask the Council to Approve
		irreversible climate change, the				recommendations 11-15, an amendment
		impacts of which are being felt				to change 2030, to 2040 was CARRIED.
		around the world. Global				A climate and sustainability officer has
		temperatures have already				been employed, they ae working up a
		increased by 1 degree Celsius				strategy to tackle some of the issues
		from pre-industrial levels.				raised by the motion and will continue the
		Atmospheric CO2 levels are above				work referred to within the motion
ס		400 parts per million (ppm). This				however please note we did not declare a
Page		far exceeds the 350-ppm deemed				Climate Emergency
ge		to be a safe level for humanity;				
		(2) in order to reduce the chance of				
19		runaway Global Warming and limit the effects of Climate Breakdown,				
		it is imperative that we as a				
		species reduce our CO2eq (carbon				
		equivalent) emissions from their				
		current 6.5 tonnes per person per				_
		year to less than 2 tonnes as soon				<u>&gt;</u>
		as possible;				op
		(3) individuals cannot be expected				<del>Ö</del>
		to make this reduction on their				nc
		own. Society needs to change its				Appendix
		laws, taxation, infrastructure, etc.,				Â
		to make				

	low carbon living easier and the
	new norm;
	(4) carbon emissions result from
	both production and consumption;
	(5) unfortunately, the world is on
	track to overshoot the Paris
	Agreement's 1.5°C limit before
	2050;
	(6) the IPCC's Special Report on
	Global Warming of 1.5°C,
	published in the autumn of 2018,
	describes the enormous harm that
	a 2°C rise is likely to cause
ס	compared to a 1.5°C rise, and told
a	us that limiting Global Warming to
Page	1.5°C may still be possible with
_	ambitious action from national and
120	sub-national authorities, civil
	society, the private sector, and
	local communities;
	(7) Councils and Parliaments
	around the world are responding
	by declaring a 'Climate
	Emergency' and committing
	resources to address this
	emergency;
	That the Council believes that:
	(8) all governments (national,
	regional and local) have a duty to
	limit the negative impacts of
	Climate Breakdown, and local
	governments should be proactive

	to change their policies. It is
	important for the residents of
	Brentwood Borough Council and
	the UK that local authorities
	commit to carbon neutrality as
	quickly as possible;
	(9) the consequences of global
	temperature rising above 1.5°C are
	so severe that preventing this from
	happening must be humanity's
	priority;
	(10) bold climate action can deliver
	economic benefits in terms of new
	jobs, economic savings and market
T	opportunities (as well as improved
a	wellbeing for people worldwide);
Page	and That the Council resolves to:
<u> </u>	(11) declare a 'Climate
12	Emergency';
	(12) pledge to do everything within
	the Council's power to make
	Brentwood Borough Council area
	carbon neutral by 2040;
	(13) seek the provision to provide
	the powers and resources to make
	the 2040 target possible;
	(14) work with other authorities
	(both within the UK and
	internationally) to determine and
	implement best practice methods
	to limit Global Warming to less
	than 1.5°C;
	than 1.5 C,

		(15) continue to work with partners across the borough and region to deliver this new goal through all relevant strategies and plans;			
Page 122	13 <sup>th</sup> October 2021	The Council resolves that all future Brentwood Borough Council backed, or part backed developments, including those through the Brentwood Development Partnership, SAIL and other subsidiary companies will at a minimum meet the guidance on design and amenity standards set out in both Brentwood & Essex design guides. Cllr Dr Barrett present a revised Motion after discussion with Cllr Wagland, who informed him of some changes to National Planning Policy Framework.	Cllr Dr Barrett	Cllr Barrett	To be reported to Ordinary Council on the 16 <sup>th</sup> March 2022.
3	8 <sup>th</sup> December 2021	This Council resolves to write to the Secretary of State for the Department of Levelling Up, Housing and Communities to request consideration of an immediate introduction of a planning requirement that prior to considering any planning application for five properties or more, there would first need to be a proper and detailed assessment of how the existing sewerage and	Cllr Aspinell	Cllr Davies	Completed.

	drainage systems will be impacted and cope with further demands placed upon them.			
4 Page 123	This council recognises the efforts of the parking wardens in issuing a significant number of tickets to those that inconsiderately park on the high street pavement causing an unsafe situation and welcomes the physical measures that are due to be implemented as a pilot scheme. The current levels of PCN for on-street infringements are clearly not a significant enough deterrent and whilst it is recognised these are not set locally, representation must be made to the appropriate bodies for these to be increased and that incremental revenue is directly reinvested into sustained patrolling and enforcement.	Cllr Hossack	Clir Nolan	The Pilot Scheme has been implemented and will be reported back to Committee its findings.  It needs to be recognised that parking enforcement alone will not resolve the problems experienced in the High Street. The results of the above pilot are to be reported back to committee and consideration needs to be given to wider infrastructure issues such as pavement heights etc.  In terms of enforcement from the 1st January 2021 to the 31st January 2022 SEPP have issued 2330 PCN's.  Due to changes in software a full set of figures in terms of observations are not available. However, from 10th March 2021 to 31st January 2022 CEOs have visited the high street 1790, they observed 3301 vehicles and issued 1986 PCNs.
5	This Council appreciates the efforts of Essex Police in the various operations that have been carried out to tackle drug use and	Cllr Hossack	Cllr Barber	A long-standing ambition for community safety in Brentwood has now been realised with the new Community Safety partnership HUB which been established

Page	dealing in Brentwood's High Streets. This council requests discussion with Essex Police as to how they might work with us to achieve a more consistent approach in tackling this on-going issue in identifying problematic venues. Moreover, this council seeks a review as to what tougher actions we can take against licensed premises, that through our work with Essex Police, are identified as having a persistent problem.  This Council appreciates the efforts of local residents that have	Cllr Hossack	Cllr Wiles	within the Town Hall. Funding was received from the Community Safety Partnership and PFCC to see the HUB ambition being realised which will mean that Essex Police will now be working alongside Council officers and wider community safety partners such as ECFRS, Probation, NHW, Crime Stoppers, SEPP and Youth Services as well as many more. This will further seek to improve communication, collaboration and intelligence sharing for the benefit of the borough's residents, businesses, and visitors.  Engagement with local residents and groups (such as local businesses) has
124	enhance the offering and ambiance of Brentwood Town centre. We will seek to work with residents and local groups, wherever possible, to enable implementable ideas to come to fruition.			Conference event and initial Baytree Centre consultation. Further engagement is planned through these projects and other initiatives.
7	This Council resolves to instruct the Monitoring Officer to bring forward to this Council a proposal for a Standards Committee to be introduced by this Council within the next three months.	Cllr Aspinell	Cllr Mynott	This item has been taken to a Constitution Working Group in December and March. A full report to come back to Council in the new municipal year.

Committee(s): Audit and Scrutiny	<b>Date:</b> 08 March 2022
Subject: Scrutiny Work Programme 2021/22	Wards Affected: All
Report of: Steve Summers, Strategic Director (Deputy Chief	Public
Executive)	
Report Author/s:	For Decision
Name: Steve Summers	
Telephone: 01277 312500	
E-mail: steve.summers@brentwood.gov.uk	

#### **Summary**

The Constitution requires that the Audit & Scrutiny Committee agrees its Scrutiny work programme at each meeting of the Committee. This report provides an update of the current scrutiny work programme and is set out in Appendix A.

#### Recommendation(s)

R1. That the Committee considers and agrees the 2021/22 Scrutiny work programme as set out in Appendix A with any additions agreed by the committee at the meeting.

#### **Main Report**

#### **Introduction and Background**

- 1. At the Annual Council it was agreed that the committee structure would include the introduction of an Audit & Scrutiny Committee.
- 2. In relation to new scrutiny matters under its Terms of Reference any scrutiny matter identified by members must be agreed Audit and Scrutiny Committee.
- 3. The Audit & Scrutiny Committee also has responsibility to review decisions made, or other action taken, in connection with the discharge by the responsible authorities of their crime and disorder functions. In addition, it has responsibility for the monitoring of Council service performance, including Performance Indicators and Formal Complaints.
- 4. The Scrutiny work programme should not include management or staffing, issues which are the responsibility of the Head of Paid Service.

#### **Reasons for Recommendation**

The Constitution requires that the Audit & Scrutiny Committee agrees its Scrutiny work programme at each meeting of the Committee.

#### Consultation

None

#### **References to Corporate Plan**

The vision of Transformation includes an action to improve the Council's governance arrangements, leading to faster, more effective decision-making. An effective scrutiny function is an essential element of that priority.

#### **Implications**

**Financial Implications** 

Name/Title: Jacqueline Van Mellaerts, Corporate Director (Finance & Resources)

and Section 151 Officer

Tel/Email: 01277 312500/jacqueline.vanmellaerts@brentwood.gov.uk

There are no direct financial implications arising from this report.

**Legal Implications** 

Name & Title: Amanda Julian, Corporate Director (Law & Governance) and

**Monitoring Officer** 

Tel & Email: 01277 312500/amanda.julian@brentwood.gov.uk

There are no direct legal implications arising from this report.

**Economic Implications** 

Name/Title: Phil Drane, Corporate Director (Planning & Economy)

Tel/Email: 01277 312500/philip.drane@brentwood.gov.uk

There are no direct economic implications from this report.

**Other Implications** (where significant) – i.e. Health and Safety, Asset Management, Equality and Diversity, Risk Management, Section 17 – Crime & Disorder, Sustainability, ICT.

None

#### **Background Papers**

None

### **Appendices to this report**

• Appendix A: Draft Scrutiny Work Programme – March - 2021/22



# Appendix A

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Subject Matter	July	August	September	October	November	December	January	February	March	
Local Development Plan	Report to		Report to				Report to		Report to	
Local Development Flan	committee		committee				committee		committee	
<ol> <li>Review the Council's Plan making process as required by the National Planning Policy Framework (NPPF).</li> <li>Review efforts to ensure that necessary cooperation on strategic cross boundary matters have been made.</li> <li>Review subjects and issues covered by LDP evidence base to ensure it is appropriate and proportionate.</li> </ol>										
Membership 2021/2022	Cllrs Cloke, Cllr Bridge, Mynott, Naylor, Dr Barrett and Sanders.									
Detailed timeline										
1. Working Group Meetings - 14th Ju	ly 2021 and 15th Sept	ember 2021								
2. Report to Audit & Scrunity Committee	tee - 28th September	2021								
3. Working Group Meeting - 30th Nov	ember 2021									
4. Report to Audit & Scrunity Committee	4. Report to Audit & Scrunity Committee - 12th January 2022									
5. Working Group Meeting - 9th February	. Working Group Meeting - 9th February 2022									
6. Report to Audit & Scrunity Committee	tee - 8th March 2022									

Subject Matter	July	August	September	October	November	December	January	February	March
Performance and Formal Complaints	Collate Data	Member Working Group	Report to Committee	Collate Data	Member Working Group	Report to Committee	Collate Data	Member working Group	Report to Committee
Membership 2021/2022	Cllrs Nolan, Tanner,	Hirst, Dr Barre	tt, Naylor		-	-	-	-	
Detailed timeline									
<ol> <li>Working Group meeting - 4th Augu</li> </ol>									
<ol><li>Report to Audit &amp; Scrunity Committ</li></ol>	•	2021							
3. Working Group meeting - 9th Nove									
<ol><li>Report to Audit &amp; Scrunity Committ</li></ol>		021							
<ol><li>Working Group meeting - 8th February</li></ol>									
<ol><li>Report to Audit &amp; Scrunity Committ</li></ol>		T	T		I	•	1		
Subject Matter	July	August	September	October	November	December	January	February	March
Community Safety Partnership	Report to Committee								
Detailed timeline									
1. Report to Audit & Scrutiny Committ	ee - 5th July 2021								
Subject Matter	July	August	September	October	November	December	January	February	March
Housing R&M Contractor			Report to Committee						
Detailed timeline						•			
Membership 2021/2022	Cllrs Nolan, Tanner	and Fulcher.							
1. Report to Audit & Scrutiny Committ	ee - 24th November 2	2020							
2. Working Group Meeting - 13th Sep	tember 2021								
3. Report to Audit & Scrunity Committ	ee - 28th September	2021							
Subject Matter	July	August	September	October	November	December	January	February	March
Brentwood Leisure Trust		Member Working Group							Report to Committee
Scope	To determine lessons that can be learnt from the process of Brentwood Leisure Trust, the terms of transfer of provision of leisure, and the relationship between Brentwood Borough Council and Brentwood Leisure Trust throughout is existence. Identify recommendations for future								
Membership 2021/2022	Cllrs Tanner, Hones	, Poppy, Fulche	r, Naylor and D	r Barrett.					
Detailed timeline									
1. Report to Audit & Scrutiny Committ	ee - 26th January 202	21							
2. Working Group Meeting - 3rd Marc									
3. Working Group Meeting - 10th Aug									
4. Working Group Meeting - 20th Dec	ember 2021								

#### **Members Interests**

Members of the Council must declare any pecuniary or non-pecuniary interests and the nature of the interest at the beginning of an agenda item and that, on declaring a pecuniary interest, they are required to leave the Chamber.

#### What are pecuniary interests?

A person's pecuniary interests are their business interests (for example their employment trade, profession, contracts, or any company with which they are associated) and wider financial interests they might have (for example trust funds, investments, and asset including land and property).

#### Do I have any disclosable pecuniary interests?

You have a disclosable pecuniary interest if you, your spouse or civil partner, or a person you are living with as a spouse or civil partner have a disclosable pecuniary interest set out in the Council's Members' Code of Conduct.

#### What does having a disclosable pecuniary interest stop me doing?

If you are present at a meeting of your council or authority, of its executive or any committee of the executive, or any committee, sub-committee, joint committee, or joint sub-committee of your authority, and you have a disclosable pecuniary interest relating to any business that is or will be considered at the meeting, you must not:

- participate in any discussion of the business at the meeting, of if you become aware of your disclosable pecuniary interest during the meeting participate further in any discussion of the business or,
- participate in any vote or further vote taken on the matter at the meeting.

These prohibitions apply to any form of participation, including speaking as a member of the public.

#### Other Pecuniary Interests

Other Pecuniary Interests are also set out in the Members' Code of Conduct and apply only to you as a Member.

If you have an Other Pecuniary Interest in an item of business on the agenda then you must disclose that interest and withdraw from the room while that business is being considered

#### Non-Pecuniary Interests

Non –pecuniary interests are set out in the Council's Code of Conduct and apply to you as a Member and also to relevant persons where the decision might reasonably be regarded as affecting their wellbeing.

A 'relevant person' is your spouse or civil partner, or a person you are living with as a spouse or civil partner

If you have a non-pecuniary interest in any business of the Authority and you are present at a meeting of the Authority at which the business is considered, you must disclose to that meeting the existence and nature of that interest whether or not such interest is registered on your Register of Interests or for which you have made a pending notification.

# Audit and Scrutiny Committee Term of Reference

The Audit and Scrutiny Committee provides advice to the Council and the committees on the effectiveness of the arrangements for the proper administration of the Council's financial affairs, including all relevant strategies and plans.

It also acts as the Council's Overview and Scrutiny Committee with all the powers under Part 3 of the Local Authorities (Committee System) (England) Regulations 2012, and discharges the functions under section 19 of the Police and Justice Act 2006 (local authority scrutiny of crime and disorder matters).

Without prejudice to the generality of the above, the terms of reference include those matters set out below.

#### **Audit Activity**

- (a) To approve the Annual Internal Audit risk based plan of work.
- (b) To consider the Head of Internal Audit's annual report and opinion, and a summary of Internal Audit activity and the level of assurance it can give over the Council's corporate governance, risk management and internal control arrangements.
- (c) To consider regular progress reports from Internal Audit on agreed recommendations not implemented within a reasonable timescale.
- (d) To consider the External Auditor's annual letter, relevant reports, and the report to those charged with governance.
- (e) To comment on the scope and depth of external audit work and to ensure it gives value for money.
- (f) To consider the arrangements for the appointment of the Council's Internal and External Auditors.

#### Regulatory Framework

- 1) To review any issue referred to it by a Statutory Officer of the Council or any Council body.
- 2) To monitor the effective development and operation of risk management and corporate governance in the Council.

3) To monitor Council policies and strategies on an Annual basis

Whistleblowing
Money Laundering
Anti-Fraud and Corruption
Insurance and Risk Management
Emergency Planning
Business Continuity

- 4) To monitor the corporate complaints process.
- 5) To consider the Council's arrangements for corporate governance and agreeing necessary actions to ensure compliance with best practice.
- 6) To consider the Council's compliance with its own and other published standards and controls.
- 7) To monitor the Council processes in relation to
  - Freedom of Information
  - Member Enquires
- 8) To monitor the Council's Data Quality arrangements.
- 9) To monitor the Council's Member's Training arrangements.

#### Accounts

- To review the annual statement of accounts. Specifically, to consider whether appropriate accounting policies have been followed and whether there are concerns arising from the financial statements or from the audit that need to be brought to the attention of the Council.
- 2) To review the Council's Annual Governance Statement.
- 3) To consider the External Auditor's report to those charged with governance on issues arising from the audit of the accounts.

#### Scrutiny Activity

- 1) Responsible to scrutinise any matters as identified and agreed by the Policy, Resources and Economic Development Committee as set out in the Audit and Scrutiny Procedure rules.
- 2) To report to the Policy, Resources and Economic Development Committee or the appropriate committee on the progress of any matters that have been requested and to make relevant recommendations as required.
- 3) To establish working groups as appropriate(in line with agreed protocols) to undertake the scrutiny of any matters requested by the Policy, Resources and Economic Development Committee, including setting their terms of reference, the reporting arrangements, and to co-ordinate and review the work of the working groups.
- 4) Responsibility for the monitoring of Council service performance, including Performance Indicators and, Formal Complaints, making reports if required to any committee, or subcommittee, any officer of the Local Authority, or any joint committee on which the Local Authority is represented, or any sub-committee of such a committee.
- 5) To review and/or scrutinise decisions made, or other action taken, in connection with the discharge of any functions of the Local Authority.
- 6) To deal with those issues raised through the 'Councillor Call for Action' scheme in line with agreed protocols and procedures.
- 7) To review and/or scrutinise decisions made, or other action taken, in connection with the discharge by the responsible authorities of their crime and disorder functions.
- 8) To make reports or recommendations to the Local Authority with respect to the discharge by the responsible authorities of their crime and disorder functions.

