

Public Document Pack



Cyngor Sir
CEREDIGION
County Council

Neuadd Cyngor Ceredigion, Penmorfa,
Aberaeron, Ceredigion SA46 0PA
ceredigion.gov.uk

Due to COVID-19 and the health and safety of Councillors and staff, members of the public and the press cannot attend the meeting in person. Please email democracy@ceredigion.gov.uk to request a link to view the meeting.

20 September 2022

Dear Sir / Madam

I write to inform you that a Meeting of the Governance and Audit Committee will be held HYBRID - NEUADD CYNGOR CEREDIGION, PENMORFA, ABERAERON / REMOTELY VIA VIDEO CONFERENCE on Tuesday, 27 September 2022 at 9.30 am for the transaction of the following business:

1. **Apologies**
2. **Personal Matters**
3. **Disclosures of Personal / Prejudicial interest**
4. **To confirm the Minutes of the Governance and Audit Committee held on 6 June 2022 and to consider any matters arising from those Minutes (Pages 3 - 10)**
5. **Governance and Audit Committee Meeting Actions Log (Pages 11 - 16)**
6. **External Quality Assessment Report (Pages 17 - 32)**
7. **CMIA Response to Cyngor Sir Ynys Môn External Quality Assessment (Pages 33 - 42)**
8. **Regulator & Inspectorate Reports & Updates (Pages 43 - 232)**
9. **Council Responses to Regulator & Inspectorate Reports (Pages 233 - 272)**
10. **Estyn Inspections, Summer term 2022 (Pages 273 - 274)**
11. **Internal Audit Progress Report 2022-2023 (Quarter 1) (Pages 275 - 298)**

12. **Internal Audit Self-Assessment 2021-22 (Pages 299 - 354)**
13. **AGS Progress Update Report (Pages 355 - 356)**
14. **Annual Report of Compliments, Complaints and Freedom of Information (2021-2022) (Pages 357 - 378)**
15. **Corporate Risk Register - Q1 (Pages 379 - 400)**
16. **Ceredigion County Council Draft Self-Assessment Report 2021/22 (Pages 401 - 434)**
17. **Forward Work Programme (Pages 435 - 436)**

Members are reminded to sign the Attendance Register

A Translation Services will be provided at this meeting and those present are welcome to speak in Welsh or English at the meeting.

Yours faithfully



Miss Lowri Edwards
Corporate Lead Officer: Democratic Services

To: Chairman and Members of Governance and Audit Committee
The remaining Members of the Council for information only.

**Minutes of the Meeting of GOVERNANCE AND AUDIT COMMITTEE
held Hybrid - Neuadd Cyngor Ceredigion, Penmorfa, Aberaeron / remotely via video
conference on Monday, 6 June 2022**

PRESENT: Mr Alan Davies (Chair) Councillors Endaf Edwards, Elizabeth Evans, Wyn Evans and Gareth Lloyd together with Mr Liam Hull and Mrs Caroline Whitby

Also in attendance: Councillors Gareth Davies, Keith Henson and Catrin MS Davies (Cabinet Members) Rhodri Evans, Maldwyn Lewis and Carl Worrall,

Officers in attendance: Ms Elin Prysor, Corporate Lead Officer-Legal and Governance & Monitoring Officer; Miss Lowri Edwards- Corporate Lead Officer – Democratic Services, Mr Stephen Johnson, Corporate Lead Officer – Finance & Procurement, Mr Rob Starr- Performance and Research Manager, Ms Nia Jones, Corporate Manager – Democratic Services, Mrs Alex Jenkins, Corporate Manager- Internal Audit, Legal and Governance Services, Ms Hannah Rees- Governance Officer, Mrs Alison Hodgson , Corporate Performance and Improvement Officer, Mrs Dana Jones, Democratic Services and Standards Officer,

Audit Wales: Miss Non Jenkins and Mr Jason Blewitt

(2:00pm-4:15pm)

1 Appointment of Governance and Audit Committee Chair and Deputy Chair

It was RESOLVED to appoint Mr Alan Davies as Chair of the Governance and Audit Committee for municipal years 2022/23 and 2023/24.

It was RESOLVED to appoint Mr Liam Hull as Deputy Chair of the Governance and Audit Committee for municipal years 2022/23 and 2023/24.

2 Apologies

Councillors Bryan Davies, Mark Strong and Matthew Vaux apologised for their inability to attend the meeting.

3 Personal Matters

Best wishes were expressed to Hannah Rees, Governance Officer on her last meeting before her maternity leave; and all wished her well for the future.

Mr Harry Dimmack had been appointed to cover her maternity leave.

4 Disclosures of Personal / Prejudicial interest

None.

5 To confirm the Minutes of the Governance and Audit Committee held on 10 March 2022 and to consider any matters arising from those Minutes

It was AGREED to confirm as a true record the Minutes of the Meeting of the Committee held 10 March 2022 subject to amending the following:-

(i) to amend minute 8 to read “Professor Roffe suggested that Internal Audit considers for the Forward Work Programme:-

(i) Working from Home-including positives and negatives; and (ii) Gold Command, including lessons learnt”

(ii) to amend typographical errors:

at the end of item 10 to “it was AGREED to note”;

(iii) to remove “a” on item 11 – “a reports” and

(v) to amend the 29 June date at the end of the minutes to the 06 June

6 Governance and Audit Committee Meeting Actions Log

Consideration was given to the Governance and Audit Committee Meeting Actions Log.

It was AGREED to note the content as presented.

Procedure

It was AGREED that items 7 and 8 be considered at the end of the meeting as Officers from Audit Wales were unable to attend at the start due to another meeting.

7 Regulator & Inspectorate Reports and Updates

Consideration was given to the Regulatory & Inspectorate Reports and Updates Item. The report sets out Regulator and Inspectorate Reports and updates and had three parts:

a) Audit Wales quarterly update to Governance and Audit Committee;

b) Any local risk work issued/published since the last Governance and Audit Committee meeting

c) Audit Wales National Reports

It was AGREED to note the current position.

8 Council Responses to Regulator & Inspectorate Reports

Consideration was given to the Report that sets out the Council’s responses regarding Regulator and Inspectorate Reports and progress made regarding proposals and recommendations.

This Report had two parts:

a) Council tracker of Regulator/Inspectorate proposals for improvement and recommendations; and

b) Other Council related matters.

Current Position

a) Council tracker of Regulator/Inspectorate proposals for improvement and recommendations

Council Management Response Forms 2021-2022 Update:
MRF – Direct Payments for Adult Social Care

b) Other Council related matters

Regarding a), it was explained to the Committee that 3 additional Management Response Forms ('MRFs') were now marked as completed (the Committee has had sight of these previously and they would not be presented again):

1. MRF – Commercialisation in Local Government;
2. MRF – Financial Sustainability Assessment; and
3. MRF – Regenerating Town Centres.

Only 1 MRF from the 2019-20/2020-21 period may be presented again in the future to the Committee – MRF Raising our Game, Tackling Fraud in Wales.

The Corporate Manager- Internal Audit provided the Committee with an explanation of the MRF– Direct Payments for Adult Social Care.

It was AGREED to note the current position.

9 Internal Audit Progress Report 2021-2022 (Quarter 4)

Consideration was given to the report of the Corporate Manager-Internal Audit on The Internal Audit Progress Report Quarter 4. The report had been presented to ensure that the Committee was satisfied that the Internal Audit Section was undertaking sufficient and appropriate work in order to provide a realistic assurance at year-end, whilst adding value and assisting the Council in achieving its objectives.

It was AGREED to note the work undertaken and current position of the Internal Audit Service

10 Internal Audit Annual Report 2021/22

Following a question from the floor, consideration was given to the Internal Audit Annual Report 2021/22. The Annual Report provided a summary of the internal audit activity during the year to 31 March 2022 and incorporates the audit opinion.

It also documents the current resource position, and the Section's quality, improvement and progress plans.

It was AGREED to approve the report

11 Internal Audit Annual Counter Fraud Report 2021/22

Consideration was given to the Internal Audit Annual Counter Fraud Report 2021/22. It was reported that the report supports the Annual Report & outlines the counter fraud work IA have been involved in during the year.

Following a question from the floor, it was AGREED to approve the report.

12 Internal Audit Report - Updated Governance Framework Review 2021/22

It was reported that an updated review had recently been undertaken of the Framework supporting the Annual Governance Statement (AGS) for 2021/22.

The Governance Framework, AGS and Local Code of Corporate Governance were presented to the Committee in January 2022. Members of the Committee were also involved in its review. Audit Wales provided an audit opinion on the AGS based on its consistency with their knowledge and compliance with legislation.

The internal audit review consists of an assessment of the procedures in place to compile the governance framework, the scoring methodology used, and consideration of the 'evidence' noted in the framework. Their view therefore complements AW's work on the AGS, and provided assurance that the procedure was robust, focussed and effective.

It was AGREED to note the review of the Framework.

- 13 Report on Draft Annual Governance Statement 2021-2022 and Governance Framework Document, and AGS Progress Update**
Consideration was given to the Report on the Draft Annual Governance Statement 2021-2022 and Governance Framework Document, and AGS Progress Update. The report had been presented in order to inform the Committee of the most recent review of the Governance Framework 2021-2022 and the Annual Governance Statement 2021-2022, as well as an update regarding progress with the 2022-2023 Annual Governance Statement and Current Year Action Plan.

Following question from the floor regarding the monitoring of actions and scoring, it was AGREED to:-

- i) note the contents of the updated Governance Framework Document
- ii) recommend that Council endorses the Draft Annual Governance Statement 2021-22 and
- iii) note the Progress Report on actions set out in the updated Draft Annual Governance Statement 2021-22

- 14 Governance and Audit Committee Annual Report 2021-2022**
Consideration was given to the Governance and Audit Committee Annual Report 2021-22. The report had been presented to gain assurances that effective arrangements were in place to manage the authority's financial affairs, risk management, internal control and corporate governance arrangements and that the authority's internal and external audit arrangements are adequate.

It was AGREED to

- (i) note the content of the draft Governance and Audit Committee Annual Report 2021-22; and
- (ii) Approve the draft Governance and Audit Committee Annual Report 2021-22 (subject to also incorporating the attendance record of Committee Members during the year in the report prior to presentation to Council)

15 Introduction to Performance Self-assessment arrangements as required by the Local Government and Elections (Wales) Act 2021

A presentation was provided to Members upon the Ceredigion County Council- Self- Assessment Process. The following was outlined:-

- Part 6 of the Local Government and Elections (Wales) Act 2021
- Key points of the Self- Assessment Process
- Key Lines of Enquiry
- Timeline
- Election Cycle 2022-27
- Integrating with the Performance Self- Assessment
- What does it mean for Governance and Audit?

It was AGREED to note the updated provided for information.

16 Corporate Risk Register - Q4

It was reported that regular reports were provided to the Governance and Audit Committee regarding the Council's Corporate Risk Register to provide on-going information and assurance that risks identified by senior managers are managed appropriately. This reinforces the Governance and Audit Committee role of providing independent assurance to Council of the appropriate management of the Corporate Risk Register.

All risks had been reviewed and include updated commentary. Although the majority of risks remain unchanged, Governance and Audit Committee were requested to note the following changes to the Register since the last update:

•R005 Medium Term Financial Plan – the risk score had increased from 15 to 20 to reflect the impact of rising inflationary pressures. Oil and prices of other goods are increasing above those budgeted. There was also a risk that pay awards will be higher than costed and inflation indices affecting contracts would impact on next and the following year's budget.

•R016 Brexit – this had been removed from the register as it had become impossible to determine the impact of Brexit alone versus other global factors contributing to the economic situation.

•R018 Covid 19 – the risk score has reduced from 20 to 12. The current Omicron variant had proved to be more transmissible but less serious to health than some of its predecessors as the vaccination programme had been particularly effective. Both UKG and WG had rolled back regulation and nearly all restrictions have been lifted, resulting in Council services reintroduced, subject to risk assessments.

Following questions from the floor, it was AGREED to note the updated Risk Register and that Members receive:

- i) further information on the reason why the R016 Brexit risk was removed, including an explanation at the next meeting where the risk is identified, once removed from the register;
- ii) explanations for changes to risks to be provided in future meetings;

and
iii) information on the calculation of the scoring matrix used in the register (e.g. ash die-back being a larger risk than cyber security) at a future meeting.

17 Forward Work Programme

It was reported that a report on the 2021-22 self-assessment of good practice and evaluating effectiveness of the Governance and Audit Committee was presented at the Committee's March meeting and it was agreed that the document would be reconsidered so a final review document could be presented at the next meeting. This has now been added to the Forward Work Programme under September's scheduled meeting as it was hoped that a Workshop was scheduled for the new Committee in advance of this meeting in order to reconsider the document and discuss the skills of the new Committee.

It was also reported that the Annual Governance Statement and Annual Financial Statement was listed for the Committee's November meeting and that it was envisaged that the updated Annual Governance Statement would be presented to Council at its July Meeting, after which Audit Wales would have an opportunity to review the document, with any changes made following any Audit Wales recommendations inserted prior to the November Committee and Council Meeting.

Following questions from the floor, it was AGREED to note the Forward Work Programme as presented and to note that further reports could be added to the FWP. It was suggested that the Chair should attend the Overview and Scrutiny Committee to consider items that required further consideration from a governance and audit prospective, and request further information from officers or further feedback by the relevant Scrutiny Committee, if required.

18 Any other matter which the Chair decides is for the urgent attention of the Committee

That a workshop be held prior to the Committee's September meeting on self-assessment of good practice and evaluating effectiveness of the Governance and Audit Committee, and in order to collate skills of Committee Members.

The Chair thanked Councillor Elizabeth Evans for her work during her time as Chair.

The Chair also stated that he would welcome feedback on the meeting and ways of improvement. This would be considered following the meeting.

**Confirmed at the Meeting of the Governance and Audit Committee held
on 21 September 2022**

Chairman: _____

Date: _____

Ceredigion County Council Governance and Audit Committee Meeting Actions Log 2022-2023*

The purpose of this Actions Log is to monitor Actions agreed by the Governance and Audit Committee at their Meetings e.g. where the Governance and Audit Committee have requested a future Report to be presented to them, or information sought at a future Meeting.

For further information regarding the Actions Log please contact the Governance Officer.

Last updated: 1st September 2022

*Municipal Year

Actions marked green and Completed ('Y') shall be removed from the subsequent Actions Log

Acronyms:

AW – Audit Wales	CM – Corporate Manager
CE: Chief Executive	CMIA – Corporate Manager, Internal Audit
CLO – Corporate Lead Officer	DPO – Data Protection Officer
DCC – Development Control Committee	GAC – Governance & Audit Committee
FWP – Forward Work Programme	L&G – Legal & Governance
GO – Governance Officer	N/A – Not Applicable
MO – Monitoring Officer	TBC – To Be Confirmed

No.	GAC Meeting Date	Item	Noted/ Comments	Action	Officer(s) responsible for Action	Progress Update	To next be Reported	Completed ? Y/N
1.	17.1.22	AW Review of Planning Service	Report noted.	<p>Councillor Lynford Thomas, DCC Chair, to circulate queries and send to CLO Economy & Regeneration. Responses from AW to points raised by Councillor Thomas.</p> <p>GAC Chair also requested future update by CLO Economy & Regeneration & Chair of Task & Finish Group</p>	Councillor Lynford Thomas, CLO Economy & Regeneration, Chair of Task & Finish Group and AW	<p>AW responses have been received and circulated to GAC members.</p> <p>CLO Economy & Regeneration to provide update at 21.9.2022 by presenting updated Task and Finish Group Action Plan.</p>	21.9.2022	Y

No.	GAC Meeting Date	Item	Noted/ Comments	Action	Officer(s) responsible for Action	Progress Update	To next be Reported	Completed ? Y/N
2.	6.6.222	14. GAC Annual Report 2021-22	The GAC agreed to note the content of the draft GAC Annual Report 2021-22 and approve the draft GAC Annual Report 2021-22 subject to also incorporating the attendance record of Committee Members during the year, prior to presentation to Council	Insertion of the attendance record of Committee Members into the draft GAC Annual Report 2021-22 prior to presenting the final document to Council	CLO L&G/GO	Inserted in final version being presented to Council at 8.7.22 Meeting	N/A	Y
3.	6.6.22	16. Corporate Risk Register – Q4	The GAC noted the updated Risk Register and agreed that Members receive i) further information on	i) provision to the Committee of further information on the reason why the R016 Brexit risk was removed including an	CLO Policy, Performance & Public Protection	i) CLO Policy and Performance to provide verbal update at 21.9.22 meeting. ii) To be addressed	21.9.22	Y

No.	GAC Meeting Date	Item	Noted/ Comments	Action	Officer(s) responsible for Action	Progress Update	To next be Reported	Completed ? Y/N
			<p>the reason why the R016 Brexit risk was removed including an explanation at the next meeting where the risk is identified, once removed from the register; ii) Explanations for changes to risks to be provided in future meetings; and iii) information on the calculation of the scoring matrix used in the register (e.g. ash die-back being a larger risk than cyber security)</p>	<p>explanation at the next meeting where the risk is identified, once removed from the register ii) provision of explanations for changes to risks to be provided in future meetings; and iii) provision of information on the calculation of the scoring matrix used in the register (including re ash die-back/cyber security)</p>		<p>going forward as risk scores change. iii) Information requested distributed to committee members. Ash dieback and cyber security risk scores reviewed by Leadership Group with decision made that no change necessary.</p>		

No.	GAC Meeting Date	Item	Noted/ Comments	Action	Officer(s) responsible for Action	Progress Update	To next be Reported	Completed ? Y/N
			at a future meeting					

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Cyngor Sir CEREDIGION County Council

REPORT TO: Governance and Audit Committee

DATE: 27 September 2022

LOCATION: Remotely via Video Conference

TITLE: Ceredigion County Council – Internal Audit External Quality Assessment

PURPOSE OF REPORT: To present the Internal Audit External Quality Assessment conducted by the Isle of Anglesey County Council to the committee

Background

The Public Sector Internal Audit Standards (PSIAS) became effective from 1 April 2013 and introduced a requirement for an external assessment of all internal audit services, which must be conducted at least once every five years by a qualified, independent reviewer from outside the organisation.

A review team from the Isle of Anglesey County Council, consisting of the Head of Audit and Risk and the Principal Auditor, undertook an evaluation of Ceredigion County Council's self-assessment between May and July 2022. This report sets out the findings of their assessment. (**Appendix 1**)

Recommendation(s): That the Governance and Audit Committee:

1; Notes the contents of the Internal Audit External Quality Assessment

Reason(s) for Recommendation(s): To keep the Governance and Audit Committee informed of the outcome of the Internal Audit External Quality Assessment

Appendices: **Appendix 1:** Ceredigion County Council – Internal Audit External Quality Assessment

Corporate Lead

Officer: Elin Prysor – CLO Legal and Governance Services / Monitoring Officer

Reporting Officer:

Marion Pryor (Head of Audit and Risk - Isle of Anglesey County Council)
Alex Jenkins (Corporate Manager – Internal Audit)

Date: 31/8/2022



Ceredigion County Council – Internal Audit External Quality Assessment

Marion Pryor BA MA CMIIA CPFA, Head of Audit & Risk

August 2022

Nanette Williams BA (Hons) MSc CMIIA, Principal Auditor



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INTRODUCTION

1. The Public Sector Internal Audit Standards (PSIAS) became effective from 1 April 2013¹, and introduced a requirement for an external assessment of all internal audit services, which must be conducted at least once every five years by a qualified, independent reviewer from outside of the organisation.
2. The two possible approaches to external assessments outlined in the standards included either a full external assessment, or an internal self-assessment, which is validated by an external reviewer.
3. Members of the Welsh Chief Auditor Group (WCAG) elected to adopt the self-assessment approach, with another member of the WCAG undertaking the independent validation.
4. For Ceredigion County Council, a review team from the Isle of Anglesey County Council, consisting of the Head of Audit and Risk and the Principal Auditor, undertook an evaluation of the self-assessment between May and July 2022. In accordance with the PSIAS, both reviewers were appropriately qualified and experienced internal auditors.
5. The validation assessment comprised a desktop review of the self-assessment and supporting evidence, as well as discussions with the Corporate Manager - Internal Audit, the Chair of the Governance and Audit Committee and the Corporate Lead Officer - Legal and Governance / Monitoring Officer, to gain insight and views on the operation of the Internal Audit Team and adherence to the Standards.
6. Any non-conformance with the Standards and the impact must be disclosed to senior management and the Governance and Audit Committee.

¹ Last revised in 2017

ASSESSMENT RESULTS

7. The PSIAS encompass the mandatory elements of the Institute of Internal Auditors (IIA) International Professional Practices Framework (IPPF), namely: the Definition of Internal Auditing, the Code of Ethics, and the International Standards for the Professional Practice of Internal Auditing.
8. Across the mandatory elements of the PSIAS, there are 56 best practice areas or standards, which comprise 304 best practice lines. The [table](#) at page 4 below gives a colour-coded summary of the results of the external validation assessment.
9. Definitions of the assessment criteria and ratings used are given at [Appendix 1](#).

The validation assessment conducted in July 2022 concludes that the internal audit service for Ceredigion County Council is currently conforming with 50 of the Public Sector Internal Audit Standards (PSIAS) and partially conforming in six areas. There are no examples of non-conformance identified.

An overall assessment of 'Generally Conforms' with the Public Sector Internal Audit Standards is therefore applicable.

2

10. As shown above, the results of the external assessment are mainly positive, with the Council achieving 'general conformance' with the majority of the standards. The main areas where the Council has demonstrated 'partial conformance' with the PSIAS are as follows;
 - The Corporate Manager - Internal Audit does not yet hold a professional Internal Audit qualification.
 - As a result of the pandemic and its ongoing impact, the Corporate Manager - Internal Audit did not undertake the usual risk assessment exercise to determine the annual internal audit plan of work for 2021/22. For 2022/23, whilst the Corporate Manager - Internal Audit performed and took account of the usual risk assessment in developing the annual audit plan, the programme of work has been flexible, focussing on previously identified areas of work along with some key risks from the corporate risk register and specific requests for assurance.
 - Since the onset of the pandemic, the Internal Audit team has not followed up agreed management actions, identified during audit work, to ensure services have implemented them effectively.

² 'Generally Conforms' is the highest overall rating available to the assessor

- The Corporate Manager - Internal Audit is currently developing and improving the Council's assurance map, which identifies sources of assurance from across the Council. Once complete, the revised assurance map will provide useful insight and direction for the annual internal audit planning process.
 - The process for issuing scopes for internal audit assignments to services the subject of an audit review is informal, and may benefit from a more structured approach. In addition, auditors should consider seeking agreement on the scope of the work from management in advance, to help generate buy-in and ownership for the audit and any resultant recommendations and improvement actions identified.
 - A small number of amendments to the Corporate Manager - Internal Audit's Annual Report, the Internal Audit Charter and the Audit Manual are needed to ensure all elements of the PSIAS are fully satisfied.
11. A detailed action plan of eight improvement areas identified during the assessment is included at [Appendix 2](#), which includes suggested timescales for implementation and responsibilities for the actions.
 12. We have provided the Corporate Manager - Internal Audit with a copy of the detailed assessment in a separate document.

ASSESSMENT SUMMARY

Reference	Public Sector Internal Audit Standard	Assessment Results
1	Mission of Internal Audit	
2	Definition of Internal Auditing	
3	Core Principles for the Professional Practice of Internal Auditing:	
4	Code of Ethics	
5	Attribute Standards:	
1000	Purpose, Authority and Responsibility	
1010	Recognising Mandatory Guidance in the Internal Audit Charter	
1100	Independence and Objectivity	
1110	Organisational Independence	
1111	Direct Interaction with the Board	
1112	Chief Audit Executive Roles Beyond Internal Auditing	
1120	Individual Objectivity	
1130	Impairment to Independence or Objectivity	
1200	Proficiency and Due Professional Care (Standards 1210-1230):	

Reference	Public Sector Internal Audit Standard	Assessment Results
1210	- <i>Proficiency</i>	
1220	- <i>Due Professional Care</i>	
1230	- <i>Continuing Professional Development</i>	
1300	Quality Assurance and Improvement Programme (Standards 1310-1320):	
1310	- <i>Requirements of the Quality Assurance and Improvement Programme</i>	
1311	- <i>Internal Assessments</i>	
1312	- <i>External Assessments</i>	
1320	- <i>Reporting on the Quality Assurance and Improvement Programme</i>	
1321	Use of Conforms with the International Standards for the Professional Practice of Internal Auditing	
1322	Disclosure of Non-conformance	
6	Performance Standards:	
2000	Managing the Internal Audit Activity (Standards 2010 - 2060):	
2010	- <i>Planning</i>	
2020	- <i>Communication and Approval</i>	
2030	- <i>Resource Management</i>	

Reference	Public Sector Internal Audit Standard	Assessment Results
2040	- <i>Policies and Procedures</i>	
2050	- <i>Coordination and Reliance</i>	
2060	- <i>Reporting to Senior Management and the Board</i>	
2070	External Service Provider and Organisational Responsibility for Internal Audit	
2100	Nature of Work (Standards 2110 - 2130):	
2110	- <i>Governance</i>	
2120	- <i>Risk Management</i>	
2130	- <i>Control</i>	
2200	Engagement Planning (Standards 2201-2240):	
2201	- <i>Planning Considerations</i>	
2210	- <i>Engagement Objectives</i>	
2220	- <i>Engagement Scope</i>	
2230	- <i>Engagement Resource Allocation</i>	
2240	- <i>Engagement Work Programme</i>	
2300	Performing the Engagement (Standards 2300-2340):	

Reference	Public Sector Internal Audit Standard	Assessment Results
2310	- <i>Identifying Information</i>	
2320	- <i>Analysis and Evaluation</i>	
2330	- <i>Documenting Information</i>	
2340	- <i>Engagement Supervision</i>	
2400	Communicating Results (Standards 2410-2440):	
2410	- <i>Criteria for Communicating</i>	
2420	- <i>Quality of Communications</i>	
2421	- <i>Errors and Omissions</i>	
2430	- <i>Use of 'conducted in conformance with the International Standards for the Professional Practice of Internal Auditing'</i>	
2431	- <i>Engagement Disclosure of Non-conformance</i>	
2440	- <i>Disseminating Results</i>	
2450	Overall Opinions	
2500	Monitoring Progress	
2600	Communicating the Acceptance of Risks	

APPENDIX 1: ASSESSMENT CRITERIA DEFINITIONS

Assessment	Definition
<p>Generally Conforms</p>	<p>The evaluator has concluded that the relevant structures, policies and procedures of the internal audit service, as well as the processes by which they are applied, comply with the requirements of the individual Standard or element of the Code of Ethics in all material respects. For the sections and major categories, this means that there is general conformance to a majority of the individual Standards or elements of the Code of Ethics, and at least partial conformance to the others, within the section/category.</p> <p>General conformance does not require complete / perfect conformance, the ideal situation, successful practice, etc. There may be opportunities for improvement, but these must not represent situations where the service has not implemented the Standards or the Code of Ethics, has not applied them effectively, or has not achieved their stated objectives.</p>
<p>Partially Conforms</p>	<p>The evaluator has concluded that the internal audit service is making good-faith efforts to comply with the requirements of the individual Standard or element of the Code of Ethics, section, or major category, but falls short of achieving some major objectives.</p> <p>These will usually represent significant opportunities for improvement in effectively applying the Standards or Code of Ethics and/or achieving their objectives. Some deficiencies may be beyond the control of the service and may result in recommendations to senior management or the board of the organisation.</p>
<p>Does Not Conform</p>	<p>The evaluator has concluded that the internal audit service is not aware of, is not making good-faith efforts to comply with, or is failing to achieve many/all of the objectives of the individual Standard or element of the Code of Ethics, section, or major category.</p> <p>These deficiencies will usually have a significant negative impact on the service's effectiveness and its potential to add value to the organisation. These may also represent significant opportunities for improvement, including actions by senior management or the board.</p>

APPENDIX 2: IMPROVEMENT ACTION PLAN

Ref	PSIAS Ref.	Improvement Area	Recommendation	Responsibility	Timescale
1	1000	The Internal Audit Charter does not currently outline the specific responsibilities of the Governance and Audit Committee, or the role of statutory officers (CEO / CFO / Monitoring Officer) with regards to Internal Audit.	Update and seek approval of Internal Audit Charter to include responsibilities of the Governance and Audit Committee and Statutory Officers in respect of Internal Audit.	Corporate Manager - Internal Audit	Next annual IA Charter review
2	1210	The Corporate Manager - Internal Audit (CMIA) does not hold a professional Internal Audit qualification. However, she is currently studying towards the Chartered Institute of Internal Auditors (CIIA) professional qualification. The head of internal audit occupies a critical position in the Council. CIPFA, in its Statement ³ determines that to perform the role, the head of internal audit must be professionally qualified and suitably experienced.	The Council should significantly support the CMIA in achieving, at the earliest opportunity, the Chartered Institute of Internal Auditors professional qualification (CMIIA).	Corporate Manager - Internal Audit	As soon as possible
3	2010	As a result of the COVID 19 pandemic, the Corporate Manager - Internal Audit did not carry out the usual risk assessment exercise to develop the annual audit plan in 2021/22. For 2022/23, whilst the CMIA took into account the usual risk assessment in developing the annual audit plan, the programme of work has been flexible, focussing on previously identified areas of work along with some key risks from the corporate risk register and specific requests for assurance. In addition, the priority of work to be undertaken is not explicitly detailed in the annual plan.	The new CMIA should continue to develop the risk assessment process to inform the annual plan of internal audit activity, and outline the priority of works to be undertaken in the plan. This is an ideal opportunity to ensure the annual audit plan is fully aligned with the Council's risk management framework and focussed on the key risks to its strategic objectives.	Corporate Manager - Internal Audit	Within 12 months

³ The CIPFA Statement on the role of the head of internal audit in Public Service Organisations (2019) aligns to the PSIAS (2017) and explicitly links to the Core Principles for the Professional Practice of Internal Auditing.

Ref	PSIAS Ref.	Improvement Area	Recommendation	Responsibility	Timescale
4	2050	<p>Prior to the COVID 19 pandemic, the Internal Audit team had developed an assurance map identifying sources of assurance across the Council, however the coverage and maturity of the map was limited.</p> <p>The new CMIA and Senior Auditor are currently in the process of improving and strengthening the assurance map to include a broader coverage of assurance and use of the Chartered Institute of Internal Auditor's 'Three Lines Model'.</p>	<p>Continue to develop the process of mapping and categorising sources of assurance for the Council, using the 'Three Lines' model.</p> <p>Once complete, integrate the assurance map into the annual audit planning process in respect of PSIAS standard '2050 Coordination'.</p>	Corporate Manager - Internal Audit	Within 12 months
5	2220	<p>Auditors do not issue a formal document outlining the scope and objectives of each audit prior to it commencing, nor do they seek 'agreement' of the scope with the relevant Head of Service / Manager. Notification of audit work is usually done informally through email etc. in advance of the audit.</p> <p>Formally engaging with the relevant service prior to the audit and agreeing on the scope of the work in advance helps to generate buy-in and ownership for the audit and any resultant recommendations identified.</p>	<p>Introduce a process of documenting, issuing and agreeing formal audit scopes with management in advance of the audit work commencing.</p> <p>The IA team are in the process of implementing a new internal audit software system (Pentana MKI), which has audit scoping functionality and can therefore be utilised for this purpose.</p>	Corporate Manager - Internal Audit	Within 12 months
6	2421	While in practice, if an audit report contains a significant error or omission and requires amendment, the CMIA or relevant auditor will ensure that an updated version is issued to all recipients on the original distribution list. However, this process is not included in the Audit Manual.	Update the Internal Audit Manual accordingly.	Corporate Manager - Internal Audit	Within 3 months

Ref	PSIAS Ref.	Improvement Area	Recommendation	Responsibility	Timescale
7	2450	<p>The CMIA's Annual Report 2021/22, which includes the overall audit opinion for the period does not include any limitations of scope.</p> <p>Limitations of scope exist in all internal audit work. Internal audit, especially a small team, cannot be relied upon to identify all strengths and weaknesses that may exist within the Council's operations. It is important to note that the responsibility for a sound system of internal controls ultimately rests with management and the work of internal audit should be taken as a substitute for management's responsibilities for the application of sound internal control practices.</p>	<p>Include a section within the Annual Report to include any limitations of scope for the work undertaken by Internal Audit for the relevant year.</p>	<p>Corporate Manager - Internal Audit</p>	<p>Next Annual Report (2022/23)</p>
8	2500	<p>Since the onset of the COVID 19 pandemic, the internal audit team have not followed up agreed management actions to ensure that services have implemented them effectively, or that senior management have accepted the risk of not taking action.</p>	<p>Re-instate the follow up process.</p> <p>The Pentana (MKI) system has action tracking functionality, so once implemented, can be utilised for this purpose.</p>	<p>Corporate Manager - Internal Audit</p>	<p>Within 6 months</p>

APPENDIX 3: DISTRIBUTION LIST

Draft Summary Report and Detailed Assessment

- Alex Jenkins, Corporate Manager - Internal Audit
- Elin Prysor, Corporate Lead Officer - Legal & Governance / Monitoring Officer

Final Summary Report and Action Plan

- Governance and Audit Committee

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CEREDIGION COUNTY COUNCIL

Report to:	Governance and Audit Committee
Date of meeting:	27 September 2022
Title:	CMIA Response to External Quality Assessment Improvement Action Plan.
Purpose of the report:	To provide Members with a response to recommendations made in Internal Audit's External Quality Assessment.

The PSIAS and CIPFA's Local Government Application Note supersede the 2006 Code for Internal Audit and came into force from April 2013.

The PSIAS and Application Note must be complied with in order to ensure proper internal audit practices are applied. The Application Note contains a checklist which has been developed to satisfy the requirements set out in PSIAS 1311 and 1312 for periodic self-assessments as part of the Quality Assurance and Improvement Program.

It incorporates the requirements of the PSIAS as well as the Application Note in order to give comprehensive coverage of both documents.

The Isle of Anglesey's Internal Audit team undertook a peer review of Ceredigion CMIA's 2021/22 self-assessment between May – July 2022 to provide an external assessment of the service's compliance, as required by PSIAS.

Recommendation(s): To note the report and service's response to the Internal Audit Section's External Quality Assessment.

Reasons for recommendation: To ensure that the committee is satisfied that the Internal Audit service is responding accordingly to the recommendations made in the assessment.

Appendices: Corporate Manager Internal Audit's response to the Internal Audit Service's External Quality Assessment.

Corporate Lead Officer: Elin Prysor
CLO-Legal and Governance / Monitoring Officer

Reporting Officer: Alex Jenkins
Corporate Manager – Internal Audit

Date: 19 August 2022

Mae'r ddogfen hon hefyd ar gael yn Gymraeg
This document is also available in Welsh.

GWASANAETHAU
CYFREITHIOL A
LLYWODRAETHU

LEGAL & GOVERNANCE
SERVICES

GWASANAETH ARCHWILIO MEWNOL

INTERNAL AUDIT SERVICE



Cyngor Sir
CEREDIGION
County Council



Corporate Manager – Internal Audit's response to:
**INTERNAL AUDIT EXTERNAL QUALITY
ASSESSMENT**

Report Prepared by: Alex Jenkins, Corporate
Manager – Internal Audit

Date of Issue: 22 August 2022

Corporate Manager – Internal Audit's response to: **INTERNAL AUDIT EXTERNAL QUALITY ASSESSMENT**

BACKGROUND

The Public Sector Internal Audit Standards (PSIAS) became effective from 1 April 2013, and introduced a requirement for an external assessment of all internal audit services, which must be conducted at least once every five years by a qualified, independent reviewer from outside of the organisation.

A review team from the Isle of Anglesey County Council, consisting of the Head of Audit and Risk and the Principal Auditor, undertook an evaluation of Ceredigion County Council's self-assessment between May and July 2022. In accordance with the PSIAS, both reviewers were appropriately qualified and experienced internal auditors

The PSIAS encompass the mandatory elements of the Institute of Internal Auditors (IIA) International Professional Practices Framework (IPPF), namely: the Definition of Internal Auditing, the Code of Ethics, and the International Standards for the Professional Practice of Internal Auditing.

Across the mandatory elements of the PSIAS, there are 56 best practice areas or standards, which comprise 304 best practice lines.

The validation assessment conducted in July 2022 by the Isle of Anglesey County Council concluded that the internal audit service for Ceredigion County Council is currently conforming with 50 of the Public Sector Internal Audit Standards (PSIAS) and partially conforming in six areas. There are no examples of non-conformance identified.

An overall assessment of 'Generally Conforms' with the Public Sector Internal Audit Standards was therefore applicable.

OBJECTIVE

The main objective of this report is to provide a response to the recommended actions in the Improvement Plan and to inform the Governance and Audit Committee of work already undertaken and progress made to address the recommendations (Appendix I).

Mae'r ddogfen hon hefyd ar gael yn Gymraeg
This document is also available in Welsh.

Appendix I – Corporate Manager – Internal Audit Response to Isle of Anglesey's Improvement Action Plan

Ref	PSIAS Ref.	Improvement Area	Recommendation	Responsibility	Timescale
1	1000	The Internal Audit Charter does not currently outline the specific responsibilities of the Governance and Audit Committee, or the role of statutory officers (CEO / CFO / Monitoring Officer) with regards to Internal Audit.	Update and seek approval of Internal Audit Charter to include responsibilities of the Governance and Audit Committee and Statutory Officers in respect of Internal Audit. This will be incorporated into the Charter at the next annual IA Charter review.	Corporate Manager - Internal Audit	Next annual IA Charter review
2	1210	The Corporate Manager - Internal Audit (CMIA) does not hold a professional Internal Audit qualification. However, she is currently studying towards the Chartered Institute of Internal Auditors (CIIA) professional qualification. The head of internal audit occupies a critical position in the Council. CIPFA, in its Statement ¹ determines that to perform the role, the head of internal audit must be professionally qualified and suitably experienced.	The Council should significantly support the CMIA in achieving, at the earliest opportunity, the Chartered Institute of Internal Auditors professional qualification (CMIIA). Agreed – CMIA's qualification is already in progress. Aim for completion within 12 months.	Corporate Manager - Internal Audit	As soon as possible

¹ The CIPFA Statement on the role of the head of internal audit in Public Service Organisations (2019) aligns to the PSIAS (2017) and explicitly links to the Core Principles for the Professional Practice of Internal Auditing.

3	2010	<p>As a result of the COVID 19 pandemic, the Corporate Manager - Internal Audit did not carry out the usual risk assessment exercise to develop the annual audit plan in 2021/22. For 2022/23, whilst the CMIA took into account the usual risk assessment in developing the annual audit plan, the programme of work has been flexible, focusing on previously identified areas of work along with some key risks from the corporate risk register and specific requests for assurance.</p> <p>In addition, the priority of work to be undertaken is not explicitly detailed in the annual plan.</p>	<p>The new CMIA should continue to develop the risk assessment process to inform the annual plan of internal audit activity, and outline the priority of works to be undertaken in the plan.</p> <p>This is an ideal opportunity to ensure the annual audit plan is fully aligned with the Council's risk management framework and focused on the key risks to its strategic objectives.</p> <p>CMIA is in the process of developing the risk assessment process to incorporate the Council's Corporate Risk Register. This will be undertaken in the Pentana Audit Management software in future.</p> <p>Whilst the current plan states that IA's priority is given to assurance, future Audit Plans will explicitly detail the priority of work to be undertaken throughout the year.</p>	Corporate Manager - Internal Audit	Within 12 months
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Ref	PSIAS Ref.	Improvement Area	Recommendation	Responsibility	Timescale
4	2050	<p>Prior to the COVID 19 pandemic, the Internal Audit team had developed an assurance map identifying sources of assurance across the Council, however the coverage and maturity of the map was limited.</p> <p>The new CMIA and Senior Auditor are currently in the process of improving and strengthening the assurance map to include a broader coverage of assurance and use of the Chartered Institute of Internal Auditor's 'Three Lines Model'.</p>	<p>Continue to develop the process of mapping and categorising sources of assurance for the Council, using the 'Three Lines' model.</p> <p>Once complete, integrate the assurance map into the annual audit planning process in respect of PSIAS standard '2050 Coordination'.</p> <p>Assurance Mapping is discussed at each team meeting. The Assurance Map has now been improved to use the 'Three Lines Model' and includes a broad coverage of assurances from other sources and records assurances obtained for both risks on the Corporate Risk Register and also other risks IA are aware of that could still pose a risk to the Council's priorities.</p>	Corporate Manager - Internal Audit	Within 12 months

Mae'r ddogfen hon hefyd ar gael yn Gymraeg
 This document is also available in Welsh.

Ref	PSIAS Ref.	Improvement Area	Recommendation	Responsibility	Timescale
5	2220	<p>Auditors do not issue a formal document outlining the scope and objectives of each audit prior to it commencing, nor do they seek 'agreement' of the scope with the relevant Head of Service / Manager. Notification of audit work is usually done informally through email etc. in advance of the audit.</p> <p>Formally engaging with the relevant service prior to the audit and agreeing on the scope of the work in advance helps to generate buy-in and ownership for the audit and any resultant recommendations identified.</p>	<p>Introduce a process of documenting, issuing and agreeing formal audit scopes with management in advance of the audit work commencing.</p> <p>The IA team are in the process of implementing a new internal audit software system (Pentana MKI), which has audit scoping functionality and can therefore be utilised for this purpose.</p> <p>A Scoping Document has been created that will be issued to auditees as a formal engagement prior to the audit commencing to outline the scope and objectives of each audit.</p> <p>This will be undertaken in Pentana in future.</p>	Corporate Manager - Internal Audit	Within 12 months

Mae'r ddogfen hon hefyd ar gael yn Gymraeg
 This document is also available in Welsh.

Ref	PSIAS Ref.	Improvement Area	Recommendation	Responsibility	Timescale
6	2421	While in practice, if an audit report contains a significant error or omission and requires amendment, the CMIA or relevant auditor will ensure that an updated version is issued to all recipients on the original distribution list. However, this process is not included in the Audit Manual.	Update the Internal Audit Manual accordingly. This will be updated in the Audit Manual.	Corporate Manager - Internal Audit	Within 3 months
7	2450	The CMIA's Annual Report 2021/22, which includes the overall audit opinion for the period does not include any limitations of scope. Limitations of scope exist in all internal audit work. Internal audit, especially a small team, cannot be relied upon to identify all strengths and weaknesses that may exist within the Council's operations. It is important to note that the responsibility for a sound system of internal controls ultimately rests with management and the work of internal audit should not be taken as a substitute for management's responsibilities for the application of sound internal control practices.	Include a section within the Annual Report to include any limitations of scope for the work undertaken by Internal Audit for the relevant year. Limitations in scope have previously been reported by exception. A section will be included in the next Annual Report (2022/23) to include any limitations of scope for the year.	Corporate Manager - Internal Audit	Next Annual Report (2022/23)

Ref	PSIAS Ref.	Improvement Area	Recommendation	Responsibility	Timescale
8	2500	<p>Since the onset of the COVID 19 pandemic, the internal audit team have not followed up agreed management actions to ensure that services have implemented them effectively, or that senior management have accepted the risk of not taking action.</p>	<p>Re-instate the follow up process.</p> <p>The Pentana (MKI) system has action tracking functionality, so once implemented, can be utilised for this purpose.</p> <p>The follow-up process of recommended actions has been reinstated for 2022/23.</p> <p>Work is due to be undertaken to assess whether past recommendations that were not followed up due to the Covid-19 pandemic would still be worthwhile revisiting.</p> <p>The process will be incorporated into the Pentana Audit Management system in future, where monitoring reports can be generated and will be reported to GAC.</p>	Corporate Manager - Internal Audit	Within 6 months

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Cyngor Sir CEREDIGION County Council

REPORT TO:	Governance and Audit Committee
DATE:	27 September 2022
LOCATION:	Remotely by Video Conference
TITLE:	Regulator & Inspectorate Reports & Updates
PURPOSE OF REPORT:	To provide the Governance and Audit Committee with updates on the progress with studies Audit Wales have undertaken or are undertaking
For:	Decision

Introduction

This Report sets out Regulator and Inspectorate Reports and updates and has 3 parts:

- a) Audit Wales quarterly update to Governance and Audit Committee*
- b) Any local risk work issued/published since the last Governance and Audit Committee meeting*
- c) Audit Wales National Reports*

Current Position

a) Audit Wales quarterly update to Governance and Audit Committee

- Audit Wales – Ceredigion Audit Wales Q1 Work Programme Update
(**Appendix 1**)

b) Any local risk work issued/published since the last Governance and Audit Committee meeting

- Audit Wales – Assurance and Risk Assessment Progress Update
(**Appendix 2**)
- Audit Wales - Ceredigion County Council Springing Forward Strategic Asset Management Report
(**Appendix 3**)
- Audit Wales Ceredigion Springing Forward Workforce Management Report
(**Appendix 4**)

c) Audit Wales National Reports

- Audit Wales - The New Curriculum for Wales
(**Appendix 5**)
- Audit Wales – WCCIS Letter to MS Chair PAPAC
(**Appendix 6**)

- Public Sector Readiness for Net Zero Carbon by 2030
(**Appendix 7**)
- Audit Wales – Unscheduled Care Project Brief
(**Appendix 8**)
- Audit Wales – Consultation on Fee Scales 2023-24
(**Appendix 9**)
- Audit Wales – AC324 - Letter to Mid and West Wales CJC
(**Appendix 10**)
- Audit Wales – Corporate Joint Committee Project Brief
(**Appendix 11**)
- Audit Wales – Ceredigion Planning Service Follow-up
review Project Brief (**Appendix 12**)

RECOMMENDATIONS: To consider the Regulator and Inspectorate reports and updates

-

Reasons for Recommendation To keep the Governance and Audit Committee informed of reports, proposals and work being undertaken

Appendices:

- Appendix 1** - Audit Wales Ceredigion Audit Wales Q1 Work Programme Update
- Appendix 2** – Audit Wales Assurance and Risk Assessment Progress Update
- Appendix 3** – Audit Wales - Ceredigion County Council Springing Forward Strategic Asset Management Report
- Appendix 4** – Audit Wales Ceredigion Springing Forward Workforce Management Report
- Appendix 5** – Audit Wales – The New Curriculum for Wales
- Appendix 6** - Audit Wales – WCCIS Letter to MS Chair PAPAC
- Appendix 7** – Audit Wales – Public Sector Readiness for Net Zero Carbon by 2030
- Appendix 8** – Audit Wales – Unscheduled Care Project Brief
- Appendix 9** – Audit Wales – Consultation on Fee Scales 2023-24
- Appendix 10** – Audit Wales – AC324 – Letter to Mid and West Wales CJC
- Appendix 11** – Audit Wales – Corporate Joint Committee Project Brief
- Appendix 12** – Audit Wales – Ceredigion Planning Service Follow-up review Project Brief

Contact Name: Elin Prysor
Designation: Corporate Lead Officer: Legal & Governance & Monitoring
Officer
Date of Report 26/08/2022

Audit Wales Work Programme and Timetable – Ceredigion Council

Quarterly Update: 30 June 2022

Annual Audit Summary

Description	Timetable	Status
A report summarising completed audit work since the last Annual Audit Summary, which was issued in February 2022	February 2022	Published February 2022: Ceredigion County Council 2021 - Annual Audit Summary

Financial Audit work

Description	Scope	Timetable	Status
Audit of the Council's 2020-21 Grants and Returns	Audit of claims as required by the terms and conditions of the grants.	In line with the individual deadlines for each grant claim.	Audit work complete – finalised April 2022.
Audit of the Council's 2021-22 statement of accounts	To confirm whether the statement of accounts provides a true and fair view.	Audit Opinion by 30 November 2022	Audit work to be performed February to November 2022.
Audit of the 2021-22 Return for Ceredigion Harbour	To confirm that the returns have been completed correctly.	Audit Opinion by 30 November 2022	Audit work to be performed February to November 2022.
Audit of the Council's 2021-22 Grants and Returns	Audit of claims as required by the terms and conditions of the grants.	In line with the individual deadlines for each grant claim.	Audit work to be performed November 2022 to February 2023

Performance Audit work

2021-22 Performance audit work	Scope	Timetable	Status
Well-being of Future Generations Act (Wales) 2015 (WFG Act) examinations	We will seek to integrate the delivery of our WFG examinations of steps to deliver wellbeing objectives with our other audit work. We will discuss this with the Council as we scope and deliver the audit projects listed in this plan	Ongoing	Ongoing
Improvement reporting audit	Audit of discharge of duty to publish an assessment of performance.	November 2021	Complete
Assurance and Risk Assessment	<p>Project to identify the level of audit assurance and/or where further audit work may be required in future years in relation to risks to the Council putting in place proper arrangements to secure value for money in the use of resources.</p> <p>At Ceredigion Council the project is likely to focus on:</p> <ul style="list-style-type: none"> • Financial position • Self-assessment arrangements • Recovery planning • Implications of the Local Government and Elections (Wales) Act • Carbon reduction plans • Performance Management 	Ongoing	<p>Implications of the Local Government and Elections (Wales) Act, Self-assessment arrangements, Performance Management and Recovery Planning work already published in this Letter (May 2022)</p> <p>Carbon Reduction and Financial position work to be completed</p>

2021-22 Performance audit work	Scope	Timetable	Status
Springing Forward – Examining the building blocks for a sustainable future	As the world moves forward, learning from the global pandemic, this review looks at how effectively councils are strengthening their ability to transform, adapt and maintain the delivery of services, including those delivered in partnership with key stakeholders and communities.	Completed	Reports completed and published (July 2022): <u>Strategic Asset Management</u> <u>Strategic Workforce Management</u>

2022-23 Performance audit work	Scope	Timetable	Status
Assurance and Risk Assessment	<p>Project to identify the level of audit assurance and/or where further audit work may be required in future years in relation to risks to the Council putting in place proper arrangements to secure value for money in the use of resources and acting in accordance with the sustainable development principle.</p> <p>The project is likely to focus in particular on:</p> <ul style="list-style-type: none"> • Financial position • Capital programme management • Governance • Use of performance information – with a focus on service user feedback and outcomes • Setting of well-being objectives 	Ongoing	Ongoing
Thematic Review – Unscheduled Care	<p>A cross-sector review focusing on the flow of patients out of hospital. This review will consider how the Council is working with its partners to address the risks associated with the provision of social care to support hospital discharge, as well as prevent hospital admission. The work will also consider what steps are being taken to provide medium to longer-term solutions.</p>	July – December 2022	Scoping

2022-23 Performance audit work	Scope	Timetable	Status
Thematic review – Digital	This project will be scoped over the summer with further details of the specific focus of the review to be confirmed.	To be confirmed.	Scoping
Local risk work: Planning review follow up	To follow up the Council's progress in relation to addressing the recommendations in our Planning review published in November 2021. Ceredigion County Council - Review of the Planning Service (audit.wales)	Autumn 2022	Scoping

Local government national studies planned/in progress

Study	Scope	Timetable	Status	Fieldwork planned at Ceredigion Council
Poverty	Understanding how local authorities ensure they deliver their services to minimise or reduce poverty.	Autumn 2021 – Autumn 2022	Drawing Conclusions	Completed
Social Enterprises	Review of how local authorities are supporting and utilising social enterprises to deliver services	Autumn 2021 – Autumn 2022	Drawing conclusions	Completed
Building Social Resilience and Self reliance	Review of how local authorities can build greater resilience in communities	Autumn 2021 – Autumn 2022	Drawing conclusions	Completed

Estyn

Estyn planned work 2022-23	Scope	Timetable	Status
Local Government Education Services Inspections	Estyn inspected Anglesey and Swansea local government education services during the summer term. The reports will be published in August and early September. The <u>Torfaen</u> report was published on 18 May. Estyn will be reviewing the inspection guidance to reflect a greater emphasis on socio-economic disadvantage and inequity and to make minor tweaks in response to feedback from inspections in 2021-22	Inspection guidance review – July. Published on website 1 September.	N/A
Curriculum Reform thematic review	The Welsh Government have also asked Estyn to review the school improvement services in south-west Wales.	Evidence collecting in June/July – published in September.	N/A

Care Inspectorate Wales (CIW)

CIW planned work 2022-23	Scope	Timetable	Status
Programme 2022-23	CIW will continue to run its pilot cyclic programme of assurance checks, improvement checks and performance evaluation inspections.	April 2022 – March 2023	In progress
Development	<p>CIW will continue to develop its approach to inspection and review of local authorities.</p> <p>CIW will consult further regarding its approach.</p>	September 2022 – December 2022	In progress
Deprivation of Liberty Safeguards Annual Monitoring Report for Health and Social Care 2021-22	Following the publication of the 2020-21 report, planning is underway for the next report publication date to be confirmed.	Publication to be confirmed	Data collecting
Annual meeting with Statutory Directors of Social Services	CIW will meet with all Directors of Social Services	December 2022 and January 2023	Planning

CIW planned work 2022-23	Scope	Timetable	Status
National review of Care Planning for children and young people subject to the Public Law Outline pre-proceedings	<p>Purpose of the review</p> <p>To provide external scrutiny, assurance and to promote improvement regarding the quality of practice in relation to the care planning for children and young people subject to the public law outline pre-proceedings.</p> <p>To consider the extent to which practice has progressed since the publication of both the CIW 'National Review of care planning for children and young people subject to public law outline pre proceedings' and the publication of the PLO working group report 2021 including best practice guidance.</p>	September 2022	Planning
Joint Inspection Child Protection Arrangements	<p>Cross-inspectorate approach. Area to be determined. We will complete a further four multi agency joint inspections.</p> <p>We will publish a national report in late 2023.</p>	Autumn 2022-Spring 2023	Planning
Cafcass Assurance Check	<p>CIW will continue to develop its approach to inspection and review of Cafcass Cymru. We will evaluate our approach and will consult on our revised approach in late 2022.</p> <p>Assurance check completed. Drafting letter. Due to be published August 2022</p>	<p>September – December 2022</p> <p>August 2022</p>	<p>Review</p> <p>Drafting</p>

Audit Wales national reports and other outputs published since January 2022

Report title	Publication date and link to report
Tackling the Planned Care Backlog in Wales – and waiting times data tool	May 2022
The new Curriculum for Wales	May 2022
Unscheduled care – data tool and commentary	April 2022
Direct Payments for Adult Social Care	April 2022
Local Government Financial Sustainability data tool	February 2022
Joint Working Between Emergency Services (including data tool)	January 2022

Audit Wales national reports and other outputs (work in progress/planned)¹

Title	Anticipated publication date
NHS finances data tool update	July 2022
Welsh Community Care Information System (Update for the Public Accounts and Public Administration Committee)	July 2022
COVID response and recovery/Welsh Government grants management – third sector support (Briefing for the Public Accounts and Public Administration Committee)	July 2022
Climate change – baseline review ²	July/August 2022
Sustainable Tourism in Wales’ National Parks ³	July 2022
Welsh Government setting of well-being objectives	July 2022
Collaborative arrangements for managing local public health resources	July 2022

¹ We will continue to keep our plans under constant review, taking account of the evolving external environment, our audit priorities, the context of our own resourcing and the capacity of audited bodies to engage with us. This includes maintaining some flexibility so that we can respond to developments in Welsh Government policy and areas of possible interest for the Public Accounts and Public Administration Committee.

² An initial overview report followed by a more detailed evidence paper.

³ Summary based on local audit work.

Title	Anticipated publication date
Welsh Government workforce	August 2022
Orthopaedic services	August/September 2022
Equality impact assessment	August/September 2022
Quality governance in the NHS	September 2022
Flood risk management	September 2022
Cyber resilience	October 2022
Digital inclusion/Broadband infrastructure	October 2022
National Fraud Initiative (summary report)	October 2022
Welsh Government accounts commentary	To be confirmed – plans for this work have been under review
COVID-19 response and recovery – business support	To be confirmed
Affordable housing	To be confirmed

Good Practice Exchange resources

Title	Link to resource
<p>Direct Payments Provision – A webinar discussing our report on Direct Payments Provision and how they can be a key part in implementing the principles of the Social Service and Well-Being (Wales) Act 2014</p>	<p>Direct Payments Provision webinar recording</p>
<p>Responding to the Climate Emergency in Wales A webinar discussing emerging findings from our baseline review of public bodies' arrangements to respond to the Welsh Government's carbon reduction targets for 2030.</p>	<p>Responding to the Climate Emergency in Wales recording</p>
<p>Covid Perspectives: A series of recorded conversations learning how organisations have adapted to the extended period of uncertainty following the initial covid emergency.</p>	<p>Good Practice Audit Wales</p>

Recent Audit Wales Blogs

Title	Publication date
<u>Direct Payments in Wales</u>	15 June 2022
<u>Unscheduled Care in Wales – a system under real pressure</u>	21 April 2022
<u>Skills Competition Wales</u>	18 February 2022
<u>Cyber resilience – one year on</u>	9 February 2022
<u>Helping to tell the story through numbers</u> (Local government financial sustainability data tool)	3 February 2022
<u>Call for clearer information on climate change spending</u>	2 February 2022
<u>Actions speak louder than words</u> (Building social resilience and self-reliance in citizens and communities)	14 January 2022

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Reference: 2997A2022

Date issued: May 2022

Annwyl Eifion

Assurance and Risk Assessment progress update

Following on from our meeting with the Leadership Group earlier this year we said that we would more formally feedback on some specific aspects of our assurance and risk assessment work that we have undertaken. This letter provides a progress update on the Council's arrangements for:

1. recovering from the pandemic; and
2. performance management and responding to the requirements of the Local Government and Elections (Wales) Act 2021.

This work was undertaken as part of our 2021-22 Assurance and Risk Assessment (ARA) project to help discharge the Auditor General's duties¹.

We recognise that the Council's recovery from the pandemic and its response to the Local Government and Elections (Wales) Act 2021 are ongoing. This feedback

¹ These duties include under section 17 of the Public Audit (Wales) Act 2004 (the 2004 Act). It may also inform a study for improving value for money under section 41 of the 2004 Act, and/or an examination undertaken by the Auditor General under section 15 of the Well-being of Future Generations (Wales) Act 2015.

provides a point in time assurance and risk progress update on the Council's arrangements in these areas.

1. Recovering from the pandemic

What we did

Throughout the COVID-19 pandemic Audit Wales has continued to meet with the Council's key contacts on a regular basis to undertake assurance work on the Council's response to the pandemic and provide real-time feedback to the Council.

What we found

The Council has continued to provide vital information, services and additional support to its communities during the pandemic. By establishing a critical incident command, it was able to take important decisions quickly. The Council's response to the pandemic is being managed over three phases these being, Phase 1 – Preparedness – Closing down of all non-essential services, Phase 2 – Implementation – Delivering services under lockdown conditions and the current Phase 3 – Adjustment and long-term resilience – establishing medium to long-term strategies that identify new working practices while ensuring that the Council's core vision and values are promoted.

In response to the pandemic's legal requirements to work from home, significant numbers of the Council's workforce and elected members quickly moved to agile working.

The pandemic has also accelerated the Council's plans for Agile working, with the Council introducing Hybrid working for staff, where appropriate. This way of working will facilitate a commitment for many services to continue to be delivered remotely for the long term. The pandemic has also promoted several positive operational and cultural changes such as, colleagues working together to deliver a joined-up response for citizens and strengthened relationships with partners and stakeholders.

2. Performance management and arrangements for responding to the Local Government and Elections (Wales) Act 2021

What we did

We undertook our assessment of the Council's progress in responding to key requirements in the Local Government and Elections (Wales) Act 2021 between January and April 2022. The evidence was gathered through interviews and document reviews and drew on relevant findings from our other ongoing and recent work at the Council. Our work looked at the new performance management arrangements the Council is putting in place as well as arrangements it is putting in place to respond to the Local Government and Elections (Wales) Act 2021 (the 2021 Act). The work was not an assessment of the effectiveness of these arrangements.

What we found

- **Arrangements for Performance Management**

The Council has refreshed its approach to Performance Management with a new business, planning and performance process launched during 2021-22. and has plans to develop them further going forward. The main areas of focus for its refreshed performance management arrangements are: ensuring that it supports the evidence gathering for the self-assessment requirements of the 2021 Act, a clearer focus on defining and distinguishing objectives, tasks and measures, integrating risk management into the arrangements, and developing robust and more granular reporting to support its decision making.

- **Arrangements for Self-Assessment and Panel Assessments**

The Council has an outline approach for undertaking its self-assessment required by the 2021 Act, which is based around key lines of enquiry. At the time of our work, the overall approach had generally been accepted by the Council's senior leadership, and was being worked up in more detail to be agreed by the Council's wider Leadership Group and Cabinet. The approach as outlined has several positive attributes including:

- engagement of both Members and Senior Officers to provide overview and challenge at key self-assessment milestones;
- integration with the existing performance management framework and related software to support annual business planning and performance reporting at the Council's Quarterly Performance Boards; and

- integrating the self-assessment output with the review and reporting of progress on delivering its Well-being Objectives.

The Council intends to produce a self-assessment output, with the first of these being published in January 2023. However, for subsequent years it plans to move the publication date to November each year.

The decisions for the arrangements and timing for the statutory Panel Assessment as required by the 2021 Act will be taken by the new administration after the May 2022 elections, however, the Council indicated that the panel assessment will likely take place in 2024.

- **Arrangement for the Consultation Duty and Participation Strategy**

Whilst the Council recognises the need to engage and consult on its self-assessment, it told us that its approach for this first year will be to use evidence from existing engagements and not to undertake a specific consultation on the self-assessment report. In taking this approach the Council should assure itself that it has fully discharged its consultation duty around self-assessments.

The Council is currently amending its Engagement Policy, which it stated will encompass both the approach to consultation on the self-assessment and its participation strategy. This work will be supported by the Council's newly established engagement team. Whilst at the time of our review the policy was at too early a stage of development to share, the Council intends to finalise this policy after the new administration is formed.

- **Arrangements for the changes to Governance and Audit Committees**

The Council's new Governance and Audit Committees (G&AC) composition has been approved by the Council and its Audit Committee and involves six Councillors and three Lay Members. Despite some early challenges with attracting suitable candidates, by the time of our review all three new Lay Members had been recruited and appointed. The Council was also intending to undertake training for the new Lay members prior to the May elections. The Council has told us that it is in the process of making all the required changes to its Constitution prompted by the new 2021 Act, and that further changes may be made in line with the WLGA model constitution.

- **Arrangements for establishing Corporate Joint Committees (CJCs)**

The Mid Wales CJC was established on 25 January 2022 in conjunction with the other statutory partners, Powys County Council, and the Brecon Beacons National Park Authority. Key statutory decisions were taken at this meeting, such as appointment to the governance structure and approval of the Budget.

The Mid Wales CJC has been organised around a sub-committee structure, with two of the three areas of responsibility, Regional Transport and Regional Development being discharged through the existing regional groups of Mid Wales Transportation (TraCC) and The Mid Wales Growth Board. The third area of responsibility 'Regional Planning' will require the establishing of a new sub-group to manage these responsibilities. The Council highlighted that this third area of responsibility as one that presents the most challenge, due in part to the different stages of development of the individual partners' Local Development Plans.

Resources to deliver the CJC responsibilities will be met from existing partner resources, other than for the appointment of a full-time project manager until April 2023.

The Council also expressed some concern over the current lack of clarity around the agreed legal status of the CJCs across Wales. With this posing a risk that monies that may potentially flow through the CJC could be subject to VAT and Corporation Tax. The Council is working with the WLGA to seek a solution to this.

- **Use of the General Power of Competence**

The Council told us that it has no immediate plans to use this power. However, this position will be reassessed once further guidance on the power has been received from the Welsh Government.

This letter forms part of the feedback on our Assurance and Risk Assessment work. We will also be reporting in due course on two further subject areas: carbon reduction and an update on financial sustainability. It is intended that the work on these two areas will be reported in Summer 2022.

I would like to take this opportunity to thank you and your officers for the ongoing support you provide to enable us to carry out our work. We look forward to continuing to work positively with you going forward.

Diolch yn fawr.

Yn gywir,

Non Jenkins
Audit Manager

Springing Forward – Strategic Asset Management – Ceredigion County Council

Audit year: 2021-22

Date issued: May 2022

Document reference: 2970A2022

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Summary report

The Council's strategic approach to managing its assets is improving and the pandemic has accelerated plans for how it will use its key assets to deliver its priorities. The Council recognises there are areas where its approach could be strengthened.

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The Council's strategic approach to managing its assets is improving and the pandemic has accelerated plans for how it will use its key assets to deliver its priorities. The Council recognises there are areas where its approach could be strengthened 7

The Council has several initiatives that are shaping the use of its current and future assets, which have in part been accelerated by the pandemic 7

The Council has arrangements for asset planning, monitoring and governance that take account of long-term need, and supply, and recognise that there are areas where this could be strengthened 9

The Council's financial stability and ability to regularly attract funding will continue to support its ambitions for its assets, and it is aware that the costs of maintaining its assets and projected budget deficits remain key risks 11

There are several examples of where the Council has or is planning to work with partners to make better use of its asset portfolio to support the delivery of its corporate priorities and well-being objectives 12

The Council has made use of available workforce benchmarking and learning to support specific asset decisions and recognises it needs to further strengthen these areas 13

Summary report

Summary

What we reviewed and why

- 1 As the world moves forward, learning from the global pandemic, this review has looked at how the Council is strengthening its ability to transform, adapt and maintain the delivery of services, including those delivered in partnership with key stakeholders and communities.
- 2 We reviewed the Council's arrangements for managing its Assets. For Assets, our focus has been on the challenges and opportunities that have been exacerbated and accelerated by the pandemic.
- 3 We looked at how the Council strategically plans to use its Assets, how it monitors their use and how it reviews and evaluates the effectiveness of its arrangements.
- 4 When we began our audit work under the Well-being of Future Generations (Wales) Act 2015 we recognised that it would take time for public bodies to embed the sustainable development principle, but we also set out our expectation that over the medium term we would expect public bodies to be able to demonstrate how the Act is shaping what they do. It is now approaching seven years since the Well-being of Future Generations Act was passed and we are now into the second reporting period for the Act. Therefore, we would now expect public bodies to be able to demonstrate that the Act is integral to their thinking and genuinely shaping what they do.
- 5 This project had three main aims:
 - to gain assurance that the Council is putting in place arrangements to transform, adapt and maintain the delivery of services;
 - to explain the actions that the Council is taking both individually and in partnership to strengthen its arrangements as well as further embed the sustainable development principle; and
 - to inspire the Council and other organisations to further strengthen their arrangements through capturing and sharing notable practice examples and learning and making appropriate recommendations.
- 6 As of October 2020 (excluding land assets), Ceredigion County Council had the following asset portfolio.

Exhibit 1: asset portfolio

Vacant Properties	19
General Properties	95

Schools	45
Leasehold Property	40
Miscellaneous	4
Total	203

- 7 The Council has a current conditions survey (2019) which covers approximately 30% of its asset portfolio.
- 8 We undertook the review during the period January 2022 to March 2022.

What we found

- 9 Our review sought to answer the question: Is the Council’s strategic approach to its assets strengthening its ability to transform, adapt and maintain the delivery of its services in the short and longer term?
- 10 We have concluded that the Council’s strategic approach to managing its assets is improving and the pandemic has accelerated plans for how it will use its key assets to deliver its priorities. The Council recognises there are areas where its approach could be strengthened.
- 11 We reached this conclusion because:
 - the Council has several initiatives that are shaping the use of its current and future assets, which have in part been accelerated by the pandemic;
 - the Council has arrangements for asset planning, monitoring and governance that take account of long-term need, and supply, and recognise that there are areas where this could be strengthened;
 - the Council’s financial stability and ability to regularly attract funding will continue to support its ambitions for its assets, and it is aware that the costs of maintaining its assets and projected budget deficits remain key risks;
 - there are several examples of where the Council has or is planning to work with partners to make better use of its asset portfolio to support the delivery of its corporate priorities and well-being objectives; and
 - the Council has made use of available workforce benchmarking and learning to support specific asset decisions and recognises it needs to further strengthen these areas.

Recommendations

Exhibit 2: recommendations

The table below sets out the recommendations that we have identified following this review.

Recommendations	
R1	Early engagement on key changes to asset use The Council should ensure that it undertakes early engagement with Council Members, the wider Leadership Group, citizens and other stakeholders on the impact that key changes within its Hybrid Working Strategy will have on some of the Council's key assets, such as the offices at Penmorfa and the future plans for how citizens will access services.
R2	Workforce vision and planning The Council's processes around its asset planning, monitoring and governance could be strengthened by: <ul style="list-style-type: none">• refreshing its 2018 Service and Corporate Asset Management Plans, ensuring that these reflect the current strategic long-term vision for assets and that they are integrated into business planning;• developing robust plans to manage the risks identified by the 2019 condition survey; and• clearly articulating how it is using the Sustainable Development principle to shape future asset-focused strategies and plans.
R3	Benchmarking The Council should develop and use further benchmarking data to: <ul style="list-style-type: none">• more routinely support the development of its Corporate and Service Asset Management plan; and• strengthen its business planning and self-assessment arrangements.

Detailed report

The Council's strategic approach to managing its assets is improving and the pandemic has accelerated plans for how it will use its key assets to deliver its priorities. The Council recognises there are areas where its approach could be strengthened

The Council has several initiatives that are shaping the use of its current and future assets, which have in part been accelerated by the pandemic

- 12 To coordinate its response to the pandemic, the Council established a Critical Incident Command structure. This structure facilitated how the Council's assets and those of some of its partners, such as Registered Social Landlords and private care homes, could help to respond to the pandemic, such as: repurposing leisure centres into field hospitals, setting up temporary morgue facilities and testing/vaccination centres.
- 13 Also, in response to the pandemic's legal requirements to work from home, significant numbers of the Council's workforce moved to agile working, with many key services being available within 48 hours of this decision. Whilst agile working was an existing objective within the Council's Workforce Plan, the pandemic accelerated this change.
- 14 As a result, and to manage the significant changes to how the Council makes use of its assets and workforce – both now and in the future – it established a Way we Work Project – now called the New Ways of Working project. Through extensive consultation with staff, the New Ways of Working project has developed a Hybrid Working Strategy. The Council is developing the way it will deliver the ambitions for hybrid working through projects that include:
 - the future footprint of the workspace with the immediate focus of this being on the modifications planned for the main Council building in Aberaeron;
 - designing Hub working environments for staff and Members;
 - the right digital platforms to support these changes;
 - work to support a better customer experience and how customers/citizens can continue to access the services they need, such as the proposals for digitally enabled virtual meeting spaces in the Council's main libraries;
 - changes to Human Resources policies and procedures to reflect the new hybrid landscape; and
 - virtual learning and improved electronic Human Resources software to support staff and managers in the new agile environment.

- 15 Whilst key deliverables within the Council's Hybrid Working Strategy are still being developed, it will be important for the Council to engage early with Members, the wider Leadership Group, citizens and other stakeholders on the impact that the related changes will have on some of the Council's key assets such as the offices at Penmorfa, and how citizens will access services in the future.
- 16 The Council told us that using assets for different purposes during the pandemic has resulted in a shift in attitudes to how assets might be utilised in the future to support the delivery of its priorities. There are several examples of how the Council plans to use its assets to deliver its priorities and whilst some of these have been accelerated by the pandemic others were already being planned, including:
- the use of surplus space, due to increased agile working, in the Council offices at Penmorfa for an assisted living training and demonstration venue.
 - repurposing leisure centres into Well-Being Centres, which will offer multidisciplinary through age services, with the first of these being in Lampeter.
 - the investment in low carbon solutions and renewable technology assets as part of its Carbon Management and Net Zero 2030 Plans.
 - the new Community Housing scheme – using a shared equity scheme and offering Council-owned land to support the development of community housing and self-build projects for local younger people. This is aimed at redressing the migration of younger people out of Ceredigion over the longer term.
 - supporting the regeneration of town centres such as Lampeter, through acquiring key properties and repurposing them for commercial and residential use.
 - current discussions with the Welsh Government and the Health Board around options for a shared use of their assets in the Aberystwyth area.
- 17 The Council is aware of several risks that may impact on its ability to deliver its future ambition around the use of its assets including:
- the cost of maintaining the Council's current property portfolio. The Council's most recent 2019 condition survey, which covered 30% of its total asset portfolio, identified over £45 million of maintenance costs over the next ten years. The Council is currently developing a plan to respond to this.
 - the impact that the pandemic has had on the Council's ability to raise rents from its commercial portfolio, given many businesses have been struggling to pay rent during the pandemic and are now looking for significant rent reductions. This has been exacerbated by the significant increase in people shopping online. To address this, the Council has been investing in measures to encourage visitors to start to return to towns such as Aberystwyth.
 - climate change represents a significant risk for the Council's Asset portfolio. The Council's recent declaration of a climate emergency, and that Climate

Change is included in its Corporate Risk Register, highlights its commitment to addressing its long-term decarbonisation challenges.

The Council has arrangements for asset planning, monitoring and governance that take account of long-term need, and supply, and recognise that there are areas where this could be strengthened

- 18 The Council has clearly articulated its approach to how it is using the Sustainable Development Principle to support the delivery of its own and its partners' priorities. There are also several examples of where decisions around its assets support this approach and more recent plans, such as the Community Housing Scheme, more clearly demonstrate how it is using the sustainable development principle to deliver better outcomes around community housing. However, ensuring that it is using the sustainable development principle to support the delivery of future asset-focused strategies and plans would strengthen its asset management arrangements going forward.
- 19 As a result of a review of the Council's approach to assets by its Corporate Resources and Overview and Scrutiny committee in 2020, the Council made changes to the way it monitors and manages its asset disposal and acquisitions. In March 2020, it approved a Draft Corporate Asset Development Policy. This policy outlines an updated governance framework for assets which includes a Development Group comprised of senior Members and Officers and its sub working group, the Asset Development Panel.
- 20 This Development Group and related panel have responsibility for challenging and assessing changes to the Council's assets, including, development, disposal, leasing, reuse and acquisitions. The Development Group makes recommendations for acquisition or disposal to the Cabinet and Council for final decisions. Whilst the Development Group has responsibility for developing a strategic view on assets, the Council recognises that this element of its responsibilities is not fully optimised and work on this aspect continues to develop.
- 21 The initial stage of the Council's asset development process invites expressions of interest from Officers and Members for alternative use of assets that are surplus to requirement. This approach provides a framework that should continue to ensure assets are considered by the Council in a strategic and integrated way.
- 22 Whilst the Development Group and Asset Development Panel are the primary ways in which the Council manages its assets, it also has several other forums and groups that support its planning, monitoring and governance of asset management, such as its:
 - Capital Monitoring Group – focused on agreeing and monitoring the finances around the Council's capital programme.

- Cross Party Transformation and Efficiency Consultative Group, which facilitates early dialogue on emerging plans for transformation projects, including assets and receives feedback on their progress.
 - Climate Change Group – for developing and implementing actions for Carbon Management and Net Zero 2030 ambitions.
 - the Corporate Project Management Group. A cross service group focused on delivering successful large scale development projects and which provides an initial assessment for proposed decisions on key projects.
 - and others, including: the Quarterly Performance Boards, Cabinet and its Overview and Scrutiny committees.
- 23 The Council has a Corporate Property Asset Management Plan 2018 which articulates its strategic approach to asset management. In 2018-19 the Council also used Service Asset Management Plans to support the development of the Corporate Asset Management Plan. Whilst the pandemic has impacted on the Council's intention to update these plans, refreshing both its Service and Corporate Asset Management Plans will enable asset planning to better reflect the current landscape, future strategic asset vision and for these to be integrated into its annual business planning.
- 24 The coordination and management of assets and estates are the responsibility of the Council's Economy and Regeneration Service. However, whilst planning for assets is set within a strategic framework, it is initiated by individual services identifying how current assets might be disposed of or acquired to support the delivery of services and ultimately corporate priorities.
- 25 In planning for its assets there are several positive examples of where the Council is using its analysis of need, and condition of its assets to help shape its decisions on their use. Such as:
- using its understanding of the condition of its leisure centres to support the business case to repurpose them into Well-being Centres.
 - undertaking a detailed needs assessment to determine the location of the first wellbeing centre in Lampeter.
 - commissioning the 2019 property condition survey, which covered approximately 30% of the corporate assets. The Council is currently developing a ten-year strategy to consider how the results of the condition survey undertaken by Faithful & Gould can be effectively managed and how this may impact the asset portfolio over the longer term.
 - undertaking detailed needs analysis work as part of the Through Age Well-being Model, resulting in greater consideration of delivering services locally through community assets.
- 26 To support the Council's decision making it has developed an Integrated Impact Assessment. This assessment requires all key decisions and policies to be considered in the light of their impact on the Council's key statutory obligations such as: the Well-being of Future Generations Act; the Socio-Economic Duty and Equality Duty.

- 27 Whilst much of the Council's planning is aligned to local government election cycles or external funding commitments, many of the initiatives contained within these plans are focused on delivering change over a much longer time horizon. However, there are also several examples of where the Council is considering long-term risks and planning for opportunities in its use of assets to support its priorities. Some examples of this include:
- the risk analysis and asset-based initiatives underpinning Boosting Ceredigion's Economy A Strategy for Action 2020-2035;
 - the various renewable, carbon reducing projects outlined in its 2018-2029 Carbon Management Plan and Net Zero by 2030 Plan; and
 - the development of leisure centres into Well-being Centres to focus resources at early intervention and prevention to improve wellbeing over the longer term.

The Council's financial stability and ability to regularly attract funding will continue to support its ambitions for its assets, and it is aware that the costs of maintaining its assets and projected budget deficits remain key risks

- 28 As previously mentioned, the Council's 2019 conditions survey, undertaken across approximately 30% of the Council's asset portfolio, has identified nearly £45 million of maintenance costs over a ten-year period. This significant cost requirement and the unknown condition of the remaining portfolio represent an ongoing financial risk. To manage this risk, the Council is developing a ten-year action plan which will identify options for the future asset portfolio.
- 29 Our Audit Wales recent Financial Sustainability report¹ (June 2021) highlights that overall – 'The Council remains financially stable and is focussed on future challenges and [that] the Council has a good track record of meeting its overall annual budget although there continues to be significant overspends in Social Care. The Council has a good track record of meeting savings targets, however, delivering the required savings will be more challenging going forward specifically in relation the savings in social care.'
- 30 The Council's latest Medium Term Financial Plan 2021-2025 highlights that the Council is required to save at least £15 million by March 2025 although it also notes there are no savings required for 2022-23.
- 31 The Council's Capital Strategy for 2021-2025 highlights several asset-focused projects including several significant projects such as: the 21st Century schools (band B) programme; and coastal erosion project. However, the Council has told us that both the capital investment in its coastal defences and the requirement to

¹ Audit Wales, [Ceredigion County Council – Financial Sustainability Assessment](#), June 2021

maintain its seven care homes continue to represent specific risks to its future capital programme.

- 32 The Council has also prioritised its investment in several decarbonisation schemes including: installing photovoltaics on Council assets; replacing original lighting with light-emitting diodes; and the roll out of electric vehicle charging.
- 33 The Council has a good track record of attracting regional and national funding, which has supported its priorities around the use of its assets including: funding from the Welsh Government to transform Lampeter Leisure Centre into its first Wellbeing Centre; and successful bids from the UK Government's Community Renewal Fund and Levelling Up Fund. In addition to these are the potential projects that will germinate as part of the Growing Mid Wales Agreement.

There are several examples of where the Council has or is planning to work with partners to make better use of its asset portfolio to support the delivery of its corporate priorities and well-being objectives

- 34 The Council participates in several strategic partnerships to support its approach to managing its assets. such as:
- the work with Powys Council on the ambition for the Growing Mid Wales Board around the economy, skills/learning and energy.
 - Ceredigion Public Service Board. On projects such as the decarbonisation of the Aberystwyth area.
 - the recently established Mid-Wales Corporate Joint Committee which has regional responsibilities for transport, development planning, and economic development.
 - proposed discussions with partners such as the Welsh Government, Health Board, other Council services, housing associations and the University, to understand their asset needs and to look at repurposing assets across the public sector family.
- 35 In addition to these strategic partnerships, the Council is engaged in several other collaborations and partnering activities to support its asset decisions, ranging from Membership of asset-related best practice and data sharing groups to specific initiatives such as working with the Police and third sector in the development of the Well-being Centre in Lampeter. As the Council continues to develop its approach to collaboration around its assets, it will have further opportunities to use the Sustainable Development Principle to maximise these opportunities and the benefits it could derive from them.

The Council has made use of available workforce benchmarking and learning to support specific asset decisions and recognises it needs to further strengthen these areas

- 36 The Council's Annual Report 2020-21 (Annual Review of Performance and Well-being Objectives) references that due to the COVID-19 pandemic, the reporting of the Performance Accountability Measures (PAMs) was suspended, for all councils, for the 2020-21 year. Also, there are very few asset-related PAMs that have been reported in prior years.
- 37 However, there are examples of Council benchmarking which had been undertaken to support particular strategies and projects. For example, the rationale for the proposed actions within the Council's Community Housing Plan initiative, was based on a mix of national and local benchmarking data such as – Housing affordability and average earnings, amongst other metrics.
- 38 The Council no longer captures performance data within its Asset Manager software as this is no longer requested by the Consortium of Local Authorities in Wales (CLAW). However, more routine use of benchmarking data to support the development of its Corporate and Service Asset Management plan would help to strengthen its business planning and self-assessment arrangements.
- 39 Some of the examples where the Council has used evaluation and learning to help shape its approach to how it uses its assets include:
- the development of its Draft Hybrid Working Strategy, which will have a significant impact on the future use of the Council's offices, was extensively consulted on with staff and this learning is shaping the development of the evolving approach.
 - Boosting Ceredigion's Economy – A Strategy for Action 2020-2035 has been developed through detailed consultation, where the results of this learning have been used to identify priorities and shape the strategy.
 - the consultation on its COVID Safe Zones in several key towns and the Use of Space assessment for the Aberystwyth promenade. The Council has told us that both are now helping to shape the future use of space in its town centres.
 - the work undertaken by the Council's Corporate Resources Overview and Scrutiny Committee to consider how assets were acquired and disposed of across the Council resulted in an updated approach to asset management and the establishment of the Council's Asset Development Panel.



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Springing Forward – Strategic Workforce Management – Ceredigion County Council

Audit year: 2021-22

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The Council has a clear understanding of how the workforce will need to evolve to deliver its priorities, accelerated in part by the pandemic, and it is aware of where it needs to strengthen its arrangements and is taking steps to manage the associated risks.

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The Council has a clear understanding of how the workforce will need to evolve to deliver its priorities, accelerated in part by the pandemic, and it is aware of where it needs to strengthen its arrangements and is taking steps to manage the associated risks 7

The pandemic has accelerated the move to new ways of working and promoted positive operational and cultural changes within the Council. Continuing to embed these will help it to manage its known workforce risks and support the delivery of its priorities 7

The Council has well developed plans, monitoring, review and improvement arrangements for its workforce 9

Whilst the Council is financially stable, it is aware that projected future efficiency savings represent an ongoing challenge to investing in and continuing to deliver its transformation ambitions at pace 10

The workforce arrangements put in place by the Council to deal with the pandemic have helped to strengthen existing partnerships and promoted further improvements in joint working across key service areas 11

The Council has made use of available workforce benchmarking and learning to support specific workforce decisions and recognises it needs to further strengthen these areas 11

Summary report

Summary

What we reviewed and why

- 1 As the world moves forward, learning from the global pandemic, this review has looked at how the Council is strengthening its ability to transform, adapt and maintain the delivery of services, including those delivered in partnership with key stakeholders and communities.
- 2 We reviewed the Council's strategic arrangements for managing its workforce. For the workforce, our focus has been on the challenges and opportunities that have been exacerbated and accelerated by the pandemic.
- 3 We looked at how the Council strategically plans to use its workforce, how it monitors their use and how it reviews and evaluates the effectiveness of its arrangements.
- 4 When we began our audit work under the Well-being of Future Generations (Wales) Act 2015, we recognised that it would take time for public bodies to embed the sustainable development principle, but we also set out our expectation that over the medium term we would expect public bodies to be able to demonstrate how the Act is shaping what they do. It is now approaching seven years since the Well-being of Future Generations Act was passed and we are now into the second reporting period for the Act. Therefore, we would now expect public bodies to be able to demonstrate that the Act is integral to their thinking and genuinely shaping what they do.
- 5 This project had three main aims:
 - to gain assurance that the Council is putting in place arrangements to transform, adapt and maintain the delivery of services;
 - to explain the actions that the Council is taking both individually and in partnership to strengthen its arrangements as well as further embed the sustainable development principle; and
 - to inspire the Council and other organisations to further strengthen their arrangements through capturing and sharing notable practice examples and learning and making appropriate recommendations.
- 6 This is important because Ceredigion County Council has the following workforce profile:
 - 66% of the workforce are female and 34% male.
 - 57% of the workforce are over the age of 44. The largest single group within this percentage is in the 45-54 years-old category, which represents 28% of the workforce.
 - nearly 18% of its leavers are in the 16-24 years-old category.
 - 2.2% declare that they have a disability whilst 31.1% preferred not to say.

- 76.9% chose 'White' as their ethnicity, followed by 'Other ethnic group' (0.4%), 'Black/African/Caribbean' (0.2%), 'Mixed ethnicity' (0.2%), and 'Asian' (0.2%). 22% of the workforce chose 'prefer not to say'.

7 We undertook the review during the period January 2022 to March 2022.

What we found

8 Our review sought to answer the question: Is the Council's strategic approach to workforce strengthening its ability to transform, adapt and maintain the delivery of its services in the short and longer term?

9 We have concluded that the Council has a clear understanding of how the workforce will need to evolve to deliver its priorities, accelerated in part by the pandemic, and it is aware of where it needs to strengthen its arrangements and is taking steps to manage the associated risks.

10 We reached this conclusion because:

- the pandemic has accelerated the move to new ways of working and promoted positive operational and cultural changes within the Council. Continuing to embed these will help it to manage its known workforce risks and support the delivery of its priorities.
- the Council has well developed plans, monitoring, review and improvement arrangements for its workforce.
- whilst the Council is financially stable, it is aware that projected future efficiency savings represent an ongoing challenge to investing in and continuing to deliver its transformation ambitions at pace.
- the workforce arrangements put in place by the Council to deal with the pandemic have helped to strengthen existing partnerships and promoted further improvements in joint working across key service areas.
- the Council has made use of available workforce benchmarking and learning to support specific workforce decisions and recognises it needs to further strengthen these areas.

Recommendations

Exhibit 1: recommendations

The table below sets out the recommendations that we have identified following this review.

Recommendations	
R1	Workforce vision and planning The Council's workforce vision, planning and monitoring could be strengthened by: <ul style="list-style-type: none">• refreshing its corporate workforce vision;• having a clearer integration with its tier one annual Business Planning process;• an annual review of its strategic workforce plans;• developing a more comprehensive picture of workforce skills and competencies;• more clearly demonstrating how it consistently uses the sustainable development principle to support the delivery of its workforce planning; and• developing specific targets and timescales for its Hybrid Working Strategy success measures.
R2	Benchmarking The Council should undertake more routine workforce benchmarking to strengthen its business planning and self-assessment arrangements.

Detailed report

The Council has a clear understanding of how the workforce will need to evolve to deliver its priorities, accelerated in part by the pandemic, and it is aware of where it needs to strengthen its arrangements and is taking steps to manage the associated risks

The pandemic has accelerated the move to new ways of working and promoted positive operational and cultural changes within the Council. Continuing to embed these will help it to manage its known workforce risks and support the delivery of its priorities

- 11 During 2020-21, the Council established a critical incident command structure, this structure facilitated how the Council made the best use of its workforce and assets to respond to the pandemic and to keep people safe.
- 12 Also, in response to the pandemic's legal requirements to work from home, significant numbers of the Council workforce moved to agile working, with many key services being available within 48 hours of this decision. Whilst agile working was an existing objective within the Council's Workforce Plan, the pandemic accelerated this change.
- 13 As a result, and to manage the significant changes to how the Council makes use of its assets and workforce – both now and in the future – it established a Way we Work Project – now called the New Ways of Working Project. Through extensive consultation with staff, the New Ways of Working project has developed a Hybrid Working Strategy. The Council is developing the way it will deliver the ambitions for hybrid working including projects to consider:
 - the future footprint of the workspace with the immediate focus of this being on the modifications planned for the main Council building in Aberaeron;
 - designing Hub working environments for staff and Council Members;
 - the right digital platforms to support these changes;
 - work to support a better customer experience and how customers/citizens can continue to access the services they need, such as the proposals for digitally enabled virtual meeting spaces in the Council's main libraries;
 - changes to Human Resources policies and procedures to reflect the new hybrid landscape; and
 - virtual learning and improved electronic Human Resources software to support staff and managers in the new agile environment.

- 14 The way in which the Council has and is planning to use its workforce has become more integrated between and within services. This has been helped by the changes to job descriptions to allow greater flexibility for staff to move between roles. This flexibility is an important principle for the transformation being undertaken across adult and children services in the new Through Age Wellbeing Model.
- 15 The Council has told us that the pandemic has also seen a change in the culture of volunteering and flexible working, with very positive responses to recent volunteering campaigns and staff supportive of being redeployed to support other services if needed.
- 16 Other workforce changes brought about by the pandemic have included:
- the acceleration of IT skills across all levels of staff;
 - a legacy of skilled staff from the Ceredigion Track, Trace and Protect team;
 - the appointment of a health professional as a Health and Wellbeing Manager; and
 - mapping community services and continuing to support community groups that were established during the pandemic.
- 17 The Council's single biggest impact on its current and future workforce will be the embedding of its Through Age Wellbeing Model. This transformation programme around social care (adults and children) has and will continue to look at new ways of working, rebalancing its services to shift need from the high-cost intensive services to lower-cost early intervention preventative investment. In doing so, it is expected that this will have a significant positive impact on service users' personal resilience and wellbeing, as well as ensuring that these services are financially sustainable for the future. The pandemic has been a catalyst for an increased speed of change to this new model.
- 18 The Council is aware of several key workforce risks and is managing these to ensure that it can deliver on its priorities, these include:
- the changed needs of citizens as a result of the pandemic and how this changed landscape might impact the workforce planning for the Through Age Wellbeing Model;
 - capacity to concurrently support major corporate changes;
 - sickness absence increases because of COVID-19 and longer-term conditions due to 'long COVID';
 - the ability to recruit and retain staff within the social care sector. The Council told us that some Through Age Wellbeing teams have a vacancy rate of 30%, and that it is already taking steps to try and mitigate this risk. For example: through working with Aberystwyth University to develop training for social care, developing their own staff by increasing the number of social care apprenticeships and by staff working co-operatively and flexibly across the Through Age Wellbeing Model.

The Council has well developed plans, monitoring, review and improvement arrangements for its workforce

- 19 The Council has well developed planning, monitoring and governance arrangements for its workforce which have been supported by:
- undertaking a detailed workforce assessment in 2017, based on current and future requirements, using a Strategic Workforce Development Toolkit;
 - having a Strategic Workforce Plan 2017-2020 which is aligned to the corporate priorities and includes a detailed action plan;
 - ensuring that workforce planning is a primary business planning objective within the key transformative services;
 - workforce planning progress updates presented to the Corporate Resources Committee in October 2019;
 - key workforce objectives and metrics regularly monitored and challenged at the Council's Quarterly Performance Boards;
 - the Council's 2017-2022 Corporate Strategy identifying Workforce Planning as one of the key strategies for delivering the Council's priorities;
 - specific work undertaken as part of the Through Age Wellbeing Model to align citizen need and future workforce models;
 - using data to help shape workforce changes such as in the development of a centralised customer contact service; and
 - developing a Health and Wellbeing Strategy 2021-2027 as a direct response to its staff Health and Wellbeing Survey undertaken in November 2020.
- 20 To support the Council's decision making it has developed an Integrated Impact Assessment. This assessment requires all key decisions and policies to be considered in the light of their impact on the Council's key statutory obligations such as: the Well-being of Future Generations Act, the Socio-Economic Duty and Equality Duty.
- 21 The Council is working to further improve its workforce planning by ensuring that the next iteration of its Strategic Workforce Development tool and the resultant Strategic Workforce Plan:
- reflects the changed environment since it was last completed in 2017;
 - has a clearer integration with the tier one annual Business Planning process;
 - is reviewed at least on an annual basis;
 - builds a more comprehensive picture of skills and competencies;
 - more clearly demonstrates how it consistently uses the sustainable development principle to support the delivery of these future strategies; and
 - reflects any changes to the vision for its workforce since 2017.

- 22 The Council's Draft Hybrid Working strategy has identified several high-level metrics that will be used to measure its success. It will be important for these to have specific targets and be monitored as part of the Council's current performance planning process.
- 23 The timeframes for the Council's strategic review of its workforce planning align with local election cycles. However, many of the transformative changes within the workforce related plans are focused on addressing systemic issues over a much longer time horizon. For example: the Through Age Wellbeing Model which is transforming the Council's workforce in this area, to deal with longer-term need.

Whilst the Council is financially stable, it is aware that projected future efficiency savings represent an ongoing challenge to investing in and continuing to deliver its transformation ambitions at pace

- 24 Our Financial Sustainability report (June 2021)¹ highlights that overall – ‘The Council remains financially stable and is focussed on future challenges and [that] the Council has a good track record of meeting its overall annual budget although there continues to be significant overspends in Social Care. The Council has a good track record of meeting savings targets, however, delivering the required savings will be more challenging going forward specifically in relation the savings in social care.’
- 25 The Council's latest Medium Term Financial Plan 2021-22 to 2024-25 highlights that:
- the Council is required to save at least £15 million by March 2025; and
 - there are some financial risks related to the cost of the Council's workforce, such as pension cost pressures, that are likely to continue due to people living longer, mitigated in some part by new regulations requiring higher pension contributions from employees.
- 26 Whilst there is clear member support for delivering the Through Age Wellbeing Model ambitions, the Council recognises the scale and pace of the significant cost savings required to fund this new approach and other challenges such as:
- the changing needs of the population due to the pandemic – the impact of this is still being evaluated;
 - the requirement to continue to fund care for existing citizens under the old approach whilst still having to reallocate monies to early intervention and prevention during the transition period of the model;
 - factors outside of the Council's control such as the trend for an aging population relocating to Ceredigion; and

¹ Audit Wales, [Ceredigion County Council – Financial Sustainability Assessment](#), June 2021

- recruiting skilled social care staff to service the new approach.

The workforce arrangements put in place by the Council to deal with the pandemic have helped to strengthen existing partnerships and promoted further improvements in joint working across key service areas

- 27 The Council told us that the collaborative public sector response to the pandemic has strengthened some existing relationships, such as those with the Health Board, Registered Social Landlords and Private Care homes.
- 28 At the heart of the Council's Through Age Wellbeing Model is the use of collaborative and co-productive principles, whilst working collaboratively across the internal teams, Health Sector, Third Sector and with other external partners. These include the planned collaboration with other bodies and groups around the development of the Lampeter well-being centre. It is also working with local micro businesses to support the delivery of specific support and thereby promoting a wider positive economic impact.
- 29 There are also several other examples of where the Council is engaged in partnerships and collaborations which impact its workforce planning including:
- its leadership of the Joint Learning and Training Working Group under the West Wales Care Partnership;
 - engagement with Aberystwyth University to develop modules for social care and the relationship with the Business School to offer third-year business-degree students work placements;
 - establishing the Mid-Wales Education Partnership with Powys Council to replace the Education in Regional Working (ERW) consortia, focusing on shared resource around school improvement;
 - working with Powys Council and other partners on the Mid Wales Growth Deal and establishing the Mid Wales Growth Board; and
 - the recently established Mid Wales Corporate Joint Committee with Powys Council and the Brecon Beacons National Park. This Committee will need to make use of a collaborative workforce to deliver its regional transport, development, economic and energy plans.

The Council has made use of available workforce benchmarking and learning to support specific workforce decisions and recognises it needs to further strengthen these areas

- 30 The Council's Annual Report 2020-2021 – Annual Review of Performance and Well-being Objectives – referenced, in its 'Benchmarking Our Performance' section, that due to the COVID-19 pandemic, the reporting of the Performance

Accountability Measures (PAMs) was suspended, for all councils, for the 2020-21 year. Therefore, only a small number of PAMs were collected by the Council during the year. One of these included a Human Resources metric around sickness absence:

- 31 Where the Council had examples of recent benchmarking these tended to be for specific exercises such as salary benchmarking for Social Workers and the Chief Executive.
- 32 The Council's report to the Corporate Resources Oversight and Scrutiny Committee in January 2022 included benchmarking of specific Human Resources metrics between services and several other Human Resources metrics.
- 33 There is currently limited routine workforce benchmarking undertaken by the Council's People and Organisation Service. One of the reasons cited for this was that previous attempts to benchmark had proven difficult due to differences in workforce structures between organisations. Whilst there are always challenges with comparability, having a more routine approach to benchmarking would strengthen its business planning and self-assessment arrangements.
- 34 The evaluation of the Council's workforce Health & Well-Being surveys for 2020 resulted in the development of the new Health & Well-Being Strategy 2021-2026. The Council also plans to evaluate the progress being made against this Strategy and its respective performance measures at the end of 2022-2023.
- 35 There has been significant engagement activity with staff around the Hybrid Working Strategy, with over 74% of staff working from home having engaged in one of the engagement activities. This engagement and learning have helped the Council to shape its Hybrid working approach.
- 36 The Council's Quarterly Performance Boards are also an opportunity for it to learn lessons. Corporate Lead Officers and Members have the opportunity to challenge and suggest changes to address any issues with progress against key objectives and measures.
- 37 The Council has also told us that it uses its appraisal process as a key tool for learning. This process is used to provide evidence of what is and is not working across its services, with this information then being used to support improvement.



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Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg a Saesneg.

The new Curriculum for Wales

Report of the Auditor General for Wales

May 2022



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Key messages

Context

- 1 The Welsh Government has been undertaking a programme of major education reform over the past decade or so. The reform programme features prominently in the current Programme for Government. One of the Welsh Government's wellbeing objectives is to 'Continue our long-term programme of education reform, and ensure educational inequalities narrow and standards rise'¹.
- 2 These changes have led to a new Curriculum for Wales (the curriculum) that will be implemented in phases from September 2022. The curriculum will be a significant departure from the previous one by allowing each school flexibility to develop its own curriculum according to local needs, although within certain parameters. The new curriculum is for 3-16 year olds. It replaces the Foundation Phase (3-7 year olds) and the Curriculum for Wales for key stages 2-4 introduced in 2008. Unlike the previous curriculum, it extends to special schools and pupil referral units. In this report, we generally include these other settings within our use of the term 'schools'.
- 3 This report looks at the Welsh Government's management of the planning and implementation of the new curriculum. The new curriculum has been in development since 2015 and action plans and the timetable have changed since then. Our aim was to provide assurance that implementation is on track in the context of the revised plans announced in July 2021. Following earlier changes to the timetable in 2017, the Welsh Government announced in July 2021 that implementation of the curriculum will still start in all years of primary schools from September 2022. However, it will now be optional for year 7 in secondary schools, special schools and pupil referral units before becoming mandatory for years 7 and 8 and other settings from September 2023.
- 4 **Appendix 1** sets out our audit approach and methods. **Appendix 2** shows a timeline of key events relating to curriculum reform.

1 Welsh Government, Programme for Government – Update, December 2021

Overall conclusion

- 5 The Welsh Government worked well with the education profession to co-design the new curriculum. While the Welsh Government had a challenging programme of legislation and other work leading up to September 2022, much of this is completed. However, the pandemic has affected the timetable and schools' ability to prepare.
- 6 The Welsh Government did not assess the likely costs when it started the journey of curriculum reform. Estimates provided to support more recent legislative scrutiny were limited, preventing a full assessment of value for money. We recognise it is difficult to accurately quantify the cost of curriculum reform. However, current budgets suggest that direct expenditure may be at the high end of, or more than, the Welsh Government's 2021 estimates. There will be significant opportunity costs to schools until at least March 2026.
- 7 The Welsh Government is alert to some key risks and will need to continue to manage these to ensure the new curriculum realises its anticipated benefits.

Key findings

- 8 The Welsh Government did not assess the direct or opportunity costs when it began to develop the new curriculum. It later estimated its sunk costs, and those of schools and others involved in developing the curriculum, in the regulatory impact assessment published alongside the Curriculum and Assessment (Wales) Bill in July 2020 and later updated. Its best estimate was that developing the new curriculum cost £159 million between 2015-16 and 2020-21, although it recognised this total does not include some costs.
- 9 The Welsh Government anticipated future direct costs of £198.5 million (ranging from £184 million to £213 million) between 2021-22 and 2030-31. Schools also face substantial opportunity costs, estimated at around nine times their direct costs. Recent Welsh Government budget papers suggest that spending related to curriculum reform is likely to be at the high end of, or more than, the Welsh Government's April 2021 estimates.
- 10 The Welsh Government and regional education consortia worked well with schools to co-design the new curriculum and identify the skills and knowledge required to realise it. The Welsh Government has also funded a programme of professional learning and support to schools to help them develop and implement the new curriculum although its effectiveness is unclear.

- 11 The COVID-19 pandemic has affected schools' ability to plan for the new curriculum. This prompted the Welsh Government to offer secondary providers flexibility to delay starting to teach the new curriculum until September 2023. Nearly half of secondary, middle and special schools plan to introduce the new curriculum in September 2022.
- 12 Despite the disruption, the pandemic has led to some changes that have benefitted the developing curriculum. For example, suspending the curriculum in 2020 allowed schools to be more experimental, it resulted in schools giving priority to pupils' health and wellbeing, and teachers' and pupils' digital skills have also improved.
- 13 Once the primary legislation was in place in April 2021, the Welsh Government had a significant role supporting schools and others to prepare. This included finalising guidance to schools, ensuring that the secondary legislative framework was in place and that support was available to schools. Much of this work is now complete.
- 14 Although two terms later than planned, the Welsh Government's national network for curriculum implementation started work in Autumn 2021. In February 2022, the Welsh Government announced long-term support for schools on progression and assessment as well as support for developing bilingual resources and a national entitlement to professional learning for all school staff from September 2022. In October 2021, Qualifications Wales announced high-level details of GCSEs aligned with the new curriculum. Work is underway to co-design detailed qualifications.
- 15 Looking beyond September 2022, the key risks that the Welsh Government will need to continue to manage include:
 - financial and workforce pressures that could affect schools' ability to realise a high-quality new curriculum;
 - ensuring the new curriculum supports the Welsh Government's aim of reducing inequalities in education;
 - ensuring that new qualifications are aligned with the new curriculum and support progression to the full range of post-16 options;
 - ensuring greater engagement with parents, carers and learners; and
 - clarifying what information will be available to support a new approach to self-evaluation, improvement, accountability and transparency.



The new Curriculum for Wales represents a considerable change for learners, parents, carers and the education profession and, while the pandemic has understandably affected the timetable and schools’ preparations, September 2022 will mark a major milestone. The spirit in which the curriculum has been developed is good to see, but future policy development on this scale needs to give more attention to the likely costs of implementation to provide for an earlier and fuller assessment of value for money.

Some significant work is still needed in key areas to deliver the full benefits of curriculum reform and the Welsh Government will need to keep track of the substantial ongoing costs of the reform programme to support wider scrutiny.

Adrian Crompton
Auditor General for Wales



Key facts



Settings

- 550** funded non-maintained early years settings
- 1,219** primary schools
- 182** secondary schools
- 23** all-age schools (3-16 or 3-19)
- 35** special schools
- 10** pupil referral units



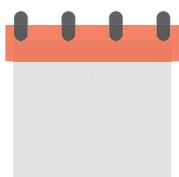
Costs

- £159 million** estimated direct costs 2015-16 to 2020-21
- £198.5 million** estimated direct costs 2021-22 to 2030-31 (ranging £184 million - £213 million)
- £263 million** estimated opportunity costs for schools, 2021-22 to 2025-26 (ranging £131 million - £394 million)



Staffing

- 23,941** qualified teachers (full-time equivalent)
- 23,779** support staff (full-time equivalent)



Key milestones

- September 2022** first teaching of the new curriculum in primary schools and optional for year 7
- September 2023** mandatory for years 7 and 8 in secondaries and other settings
- 2026/27** first qualifications awarded

Recommendations

Recommendations

To better understand and to support scrutiny of the cost of curriculum reform

R1 It has not been easy for the Welsh Government or us to identify expenditure on curriculum reform to date. In part this is because of difficulties in calculating expenditure specific to curriculum reform as opposed to other elements of the education reform programme, or the Renew and Reform programme, some of which may benefit curriculum reform. However, understanding the cost of curriculum reform is vital to support scrutiny and inform any consideration of value for money.

We recommend that the Welsh Government monitors and reports annually on the costs of its curriculum reform programme including costs to partners and schools. In developing and reporting on its best estimate, the Welsh Government will need to consider the impact of any additional data collection on schools in particular.

To evaluate the effectiveness of the professional learning programme and support to schools

R2 The Welsh Government has funded professional learning aligned to the new curriculum alongside its wider investment in teachers' professional learning. It has also funded the regional education consortia and partnerships to provide bespoke support for schools. It recently announced a national entitlement to professional learning for all teachers and teaching assistants.

We recommend that the Welsh Government ensures that the effectiveness and value for money of its investment in professional learning for teachers and other school staff is evaluated.

Recommendations

To design and implement new qualifications that support the Welsh Government's ambitions for the new curriculum

R3 The Welsh Government and Qualifications Wales know that qualifications need to change to align with the new curriculum. Qualifications Wales is working with schools, further and higher education and others to co-design the new GCSEs and, subsequently, other qualifications. The detail of the qualifications and forms of assessment is not yet decided.

We recommend that the Welsh Government works with Qualifications Wales to:

- a monitor teachers' and learners' participation in developing the new qualifications;
- b plan an effective national professional learning programme that will support teachers to deliver the new qualifications; and
- c assess the resources needed for professional learning for the new qualifications and any changes to the assessment process, including any greater role for teacher assessment and/or digital technology.

To evaluate the effectiveness of schools' engagement with parents, carers and learners

R4 A positive impact of the pandemic has been to strengthen engagement between schools and families in many cases. Schools will be required to engage with parents and carers about the curricula. Parents, carers and learners should be able to participate in schools' evaluation and improvement. This is underway in some schools.

We recommend that the Welsh Government supports schools to engage effectively with parents, carers and learners and evaluates how well schools are doing this to support improvement.

Recommendations

To establish the information needed for a rounded understanding of schools' activities and outcomes

R5 Work to support a national approach to self-evaluation is due to be completed by the end of the 2021/22 academic year. There is less clarity about the process for democratic accountability and transparency, including what information will be available to governors, local or diocesan authorities, parents, carers and the public.

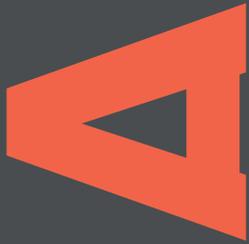
We recommend that the Welsh Government:

- a establishes what information those charged with holding schools to account, require as part of a new approach to accountability; and
- b sets out details on how it will ensure transparency for parents, learners and the public.

To ensure the new curriculum remains fit for purpose

R6 The Curriculum and Assessment (Wales) Act 2021 introduces a requirement for Ministers to keep the new curriculum under review. It does not set out the mechanism for cyclical review.

We recommend that, once the milestone of first teaching of the new curriculum is achieved, the Welsh Government sets out how it intends to keep the curriculum under review to ensure that it can become embedded and yet remain fit for purpose.



**Initial planning:
The curriculum is
central to the Welsh
Government's
long-term programme
of education reform
but was initially
developed without
assessing its direct
or opportunity costs**

- 1.1 Curriculum reform is central to a wider, long-term programme of educational reform in Wales (**Exhibit 1**). This part of the report looks at the background to the new curriculum and what is known about its actual and estimated costs.

Exhibit 1: the four enabling objectives of education reform in Wales



Developing a high-quality education profession.



Inspirational leaders working collaboratively to raise standards.



Strong and inclusive schools committed to excellence, equity and well-being.



Robust assessment, evaluation and accountability arrangements supporting a self-improving system.

Source: Welsh Government, Education in Wales: Our national mission, Action plan 2017-21, September 2017

Curriculum reform is central to a wider education reform programme that the Welsh Government has been undertaking over the past decade or so

- 1.2 In December 2010, disappointing PISA test results² sparked national debate about education in Wales. Results in mathematics and reading were below the average of 65 participating countries. Mean scores in mathematics, reading and science in Wales were significantly lower than other UK nations.

2 The Programme for International Student Assessment (PISA) is a study of educational achievement organised by the Organisation for Economic Co-operation and Development (OECD). PISA provides governments with a benchmark for education policy and performance, to make evidence-based decisions and to learn from one another. It supports transparency.

- 1.3 The programme of education reform began in February 2012 when the Welsh Government announced changes including national literacy and numeracy frameworks and national testing. **Appendix 2** provides a timeline of key activities in developing and implementing the curriculum.
- 1.4 The Welsh Government announced a review of curriculum and assessment in October 2012. At that time, learners in Wales followed a national curriculum first established by the Education Reform Act 1988. Successive governments amended and added to it, notably in 2008 when the Welsh Government introduced the Foundation Phase (3-7 year olds) and the Curriculum for Wales for key stages 2-4 (7-16 year olds)³.
- 1.5 In March 2014, the Welsh Government announced a comprehensive review of curriculum and assessment arrangements⁴. It was to be led by Professor Graham Donaldson, formerly Chief Education Advisor to the Scottish Government, who had influenced the curriculum reform programme in Scotland. His February 2015 report⁵ set out an approach to education for 3-16 year olds in Wales. The Welsh Government accepted his recommendations. **Exhibit 2** sets out the main elements of the new Curriculum for Wales.

3 The Education (National Curriculum) (Attainment Targets and Programmes of Study) (Wales) Order 2008

4 Welsh Government, Written Statement – Review of Assessment and the Curriculum, March 2014

5 Donaldson, G., Successful Futures: Independent Review of Curriculum and Assessment Arrangements in Wales, February 2015

Exhibit 2: about the new Curriculum for Wales

- A curriculum is all the learning experiences and assessment activities planned to achieve agreed education aims.
- The new Curriculum for Wales is an integrated curriculum for 3-16 year olds. It applies to all settings (including special schools and pupil referral units which are not required to follow the current curriculum).
- The Curriculum and Assessment (Wales) Act 2021 and regulations provide the legal basis.
- A new curriculum framework has been co-designed, with teachers and schools taking a key role. It is built on four purposes, to develop learners who are:
 - ambitious and capable;
 - enterprising and creative;
 - ethical and informed; and
 - healthy and confident citizens.
- Teachers have more flexibility to develop a curriculum in their school that meets their learners' needs. They are doing this using a common framework with six Areas of Learning and Experience (Areas): Mathematics and Numeracy; Science and Technology; Humanities; Languages, Literacy and Communications; Health and Well-being; and Expressive Arts.
- The broad requirements are set out in 27 statements of 'What Matters' in the Areas. Curriculum design breaks down traditional subject-to-subject boundaries to help learners consider different concepts and issues in the broadest possible way.
- Literacy, numeracy and digital skills cross all the Areas.
- The Areas support cross-curricular planning, so learners can apply learning to different academic or real-life situations.
- Qualifications Wales, the independent regulator of qualifications (other than degrees) for Wales, is developing qualifications to reflect the Curriculum for Wales through a co-construction approach.

Source: Audit Wales

- 1.6 In October 2015, the Welsh Government set out its ambition that the new curriculum could be available to schools as early as September 2018 with every school teaching it by September 2021⁶. With hindsight, the ambition that the new curriculum would be available for 2018 was unlikely; experience from other countries suggests that curriculum changes take a long time⁷.

⁶ Welsh Government, Qualified for life: A curriculum for Wales - a curriculum for life, October 2015

⁷ Mills, B., How leading education nations develop and reform their curriculums, Education Policy Institute, January 2021⁸

- 1.7 In September 2017, the Welsh Government published a revised implementation plan, delaying the date for starting to teach the new curriculum to September 2022 in primary schools and year 7. Alongside curriculum development, the Welsh Government gave timelines for other reforms vital to the successful implementation of the curriculum, including new professional standards for teaching in 2017 and on-going learning and qualification reform.

The Welsh Government did not assess the direct or opportunity costs when it began to develop the new curriculum

- 1.8 We have not seen evidence that any assessment of direct or opportunity costs associated with curriculum reform was undertaken before the introduction of draft legislation. The Welsh Government had to estimate the sunk costs incurred by itself, some partner organisations and schools, to inform the regulatory impact assessment (RIA) for the Curriculum and Assessment Bill 2020 (the Bill) in July 2020. It collected this information retrospectively and some partners did not provide information. The Welsh Government also included in the RIA estimates of the future direct and opportunity costs for the new curriculum. It revised its estimates on sunk and future costs several times during scrutiny, with updates to the RIA in September 2020, and then February and April 2021.
- 1.9 We recognise that it is difficult to reliably identify expenditure. Partly, this is because the curriculum had been in development since 2015 and because expenditure was intertwined with other 'expenditure' when the RIA was prepared. This was particularly true for costs to schools where they incurred additional and opportunity costs not directly met by Welsh Government funding.
- 1.10 The RIA compared the cost of curriculum reform with maintaining the current arrangements but did not consider any alternative options for achieving the Welsh Government's ambitions other than total reform of the existing curriculum. This failure to document other options led the Senedd Finance Committee to state that 'RIAs often seem to be a "by-product" of the decision-making process, rather than driving it'. Following requests for better financial information from the Senedd Finance and Children, Young People and Education committees, the Welsh Government provided revised estimates in February and April 2021. Its estimate of sunk costs increased from £114 million to £159 million, driven by a 51% increase in its estimate of its own expenditure (**Exhibit 3**).

Exhibit 3: Welsh Government estimates of the direct sunk costs of curriculum reform, 2015-16 to 2020-21^{1, 2, 3}

	RIA estimate, July 2020 (£ millions)	Revised RIA estimate, April 2021 (£ millions)	% change between estimates
Welsh Government	89.1	134.1	51%
Qualifications Wales	1.7 ⁴	1.4	-18%
Estyn	4.4	4.4	0
Regional education consortia	15.5	15.5	0
National Academy for Educational Leadership	3.3	3.3	0
Total	114.1	158.7	39%

Notes:

- 1 Excludes costs to the Catholic Education Service, Church in Wales and Wales Association of Standing Advisory Councils for Religious Education associated with the consultation on religion, ethics and values.
- 2 Excludes costs of education reforms not directly associated with the new curriculum but that will have contributed to it, including initial teacher education reforms, establishing the National Academy of Educational Leadership, learner assessment and early years and foundation phase support.
- 3 Excludes costs associated with Welsh language changes which are attributed to achieving the goals of Cymraeg 2050. Costs to parents from additional inset days are attributed to the Education (School Day and School Year) (Wales) (Amendment) Regulations 2019.
- 4 Figure is incorrectly recorded as £3,459,000 in Table 5 of the Explanatory Memorandum. We have adjusted the total figure and removed £1.7 million of costs incurred in 2015-16 and 2016-17 attributable to the previous GCSE reform.

Sources: Audit Wales analysis of Welsh Government, Curriculum and Assessment (Wales) Bill, Explanatory Memorandum incorporating the Regulatory Impact Assessment and Explanatory Notes, July 2020 and Welsh Government, Curriculum and Assessment (Wales) Bill, Explanatory Memorandum incorporating the Regulatory Impact Assessment and Explanatory Notes (revised), April 2021

- 1.11 The Welsh Government's estimates of future direct costs to schools in its RIA are subject to broad ranges. They also omit costs to some partners and settings including special schools, pupil referral units and early years settings. Again, the Welsh Government provided revised figures in February 2021 and April 2021.
- 1.12 An evaluation in 2017 highlighted that pioneer schools (see **paragraph 2.2**) varied in how, and if, they monitored the time and resources used in curriculum related work. Some were not asked to collect any information on resources used. Better monitoring of time and resources required at that point by pioneer schools would have informed national roll-out⁸. Instead, this information is based on estimates from a small number of pioneer schools, collected retrospectively in late 2019. As a result, the Welsh Government estimated the future direct costs of curriculum reform as £198.5 million between 2021-22 to 2030-31, but this estimate varied from £184 million to £213 million (**Exhibit 4**). Three-quarters of this expenditure falls between 2021-22 and 2025-26.

8 Arad Research (2017). Formative Evaluation of the Pioneer Schools Model: Paper on Strand 1 and early Strand 2 activity. Cardiff: Welsh Government, GSR report number 72/2017

Exhibit 4: Welsh Government estimates of future direct expenditure on curriculum reform, 2021-22 to 2030-31¹

		RIA estimate, July 2020 (£ millions)	Revised RIA estimate, April 2021 (£ millions)	% change between estimates
Welsh Government		175.4	162.6	-7.3%
Qualifications Wales ²		6.5	6.8	4.6%
Schools	Low	14.5	14.5	0.0%
	Central	29.1	29.1	0.0%
	High	43.6	43.6	0.0%
Total	Low	196.4	184.0	-6.3%
	Central	211.0	198.5	-5.9%
	High	225.5	213.0	-5.5%

Notes:

- 1 Excludes costs falling to local authorities, diocesan authorities, some education settings and non-maintained early years settings. Also excludes costs associated with curriculum but not directly related such as digital infrastructure.
- 2 The revised estimate from Qualifications Wales represents slippage of £300,000 from 2020-21 to 2021-22. **Exhibit 3** shows a corresponding reduction.

Sources: Audit Wales analysis of Welsh Government, Curriculum and Assessment (Wales) Bill, Explanatory Memorandum incorporating the Regulatory Impact Assessment and Explanatory Notes, July 2020 and Welsh Government, Curriculum and Assessment (Wales) Bill, Explanatory Memorandum incorporating the Regulatory Impact Assessment and Explanatory Notes (revised), April 2021

Direct costs look likely to be at the high end of, or more than, the Welsh Government's April 2021 estimates and opportunity costs are substantial

- 1.13 During plenary debate in March 2021, the Welsh Government agreed to provide the Senedd with updated and more complete information on future costs. This was included in a briefing to the Senedd Children, Young People and Education Committee in January 2022⁹ and within commentary on the Welsh Government's 2022-23 draft budget¹⁰.
- 1.14 As acknowledged in **paragraph 1.9**, it is difficult to isolate expenditure on curriculum reform from other, closely aligned expenditure in the wider 'Our National Mission' programme and the current Renew and Reform programme. For example, the Welsh Government includes £15 million of its £74 million total spend on teachers' professional learning to curriculum reform but all improvements to professional learning will benefit the new curriculum at least indirectly.
- 1.15 We also accept that it is difficult to separate spending on elements such as progression and assessment associated with the pandemic response from that required by the new curriculum. However, simply comparing future budgets against revised RIA estimates suggests that spending is likely to be at the higher end of estimates, and in some years above estimates (**Exhibit 5**). This echoes our 2020 finding in other areas that RIAs tend to underestimate the cost of legislation¹¹.

9 Welsh Government, Evidence paper on Draft Budget 2022-23 – Education and Welsh Language Main Expenditure Group to the Senedd Children, Young People and Education Committee, January 2022

10 Welsh Government, Draft Budget 2022-23: A Budget to build a stronger, fairer and greener Wales, December 2021

11 Auditor General for Wales, Better law making: the implementation challenge, September 2020

Exhibit 5: Welsh Government budgeted expenditure on curriculum reform, 2021-22 to 2024-25

	2021-22 (£ millions)	2022-23 (£ millions)	2023-24 (£ millions)	2024-25 (£ millions)
Revised RIA estimate, April 2021	23.8 - 36.6	23.6 - 33.8	20.1 - 23.3	19.1 - 20.7
Welsh Government budgeted expenditure	34.9	35.0	34.5	30.9

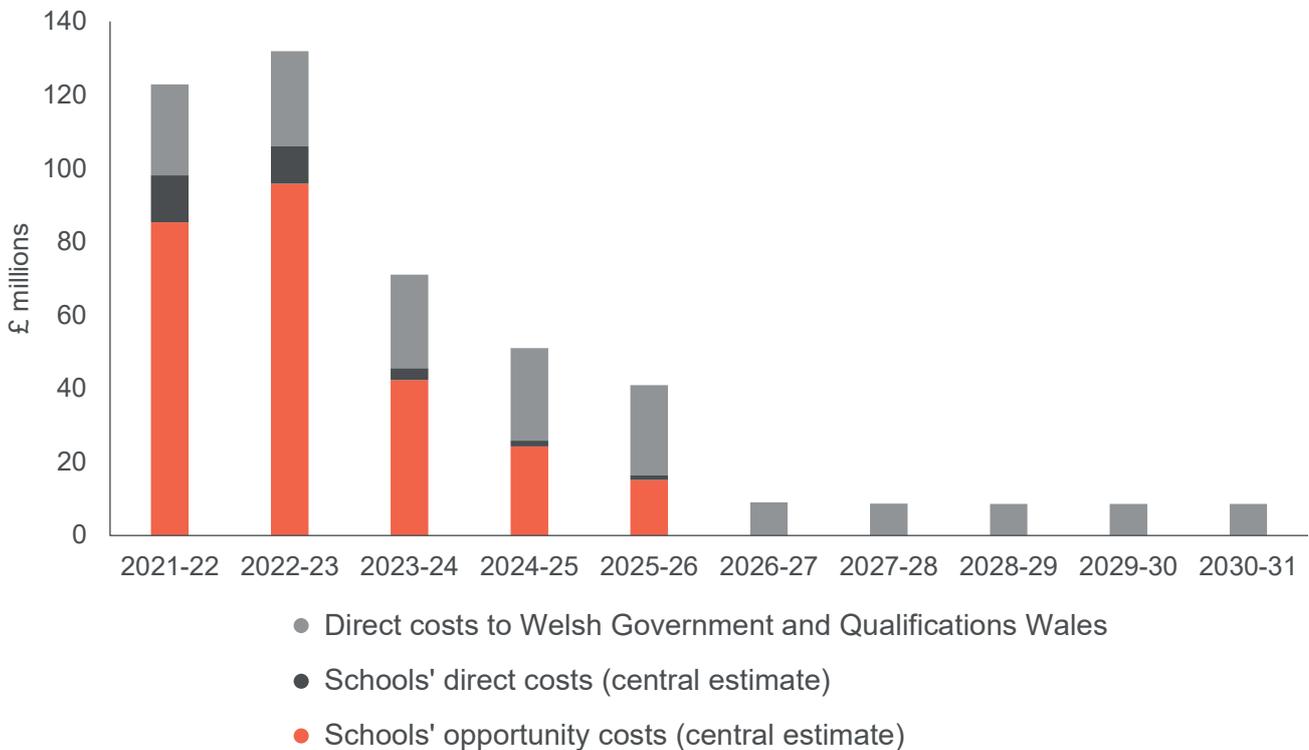
Note: These figures were compiled by the Welsh Government. The figures include professional learning directly related to the new curriculum, new materials and resources, costs to Qualifications Wales, Welsh Government administration costs and schools' direct costs including cover for staff absence.

Sources: Welsh Government, Ministers' written evidence to Senedd scrutiny committees on allocations within each MEG, Children, Young People and Education Committee, December 2021; Welsh Government, Draft Budget 2022-23: A Budget to build a stronger, fairer and greener Wales, December 2021 Annex G; Welsh Government, Curriculum and Assessment (Wales) Bill, Explanatory Memorandum incorporating the Regulatory Impact Assessment and Explanatory Notes (revised) April 2021

- 1.16 In 2022-23, the Welsh Government's budget includes £35.05 million for curriculum reform. This is higher than the estimated expenditure in the RIA for 2022-23 (between £23.6 million and £33.8 million). Budgeted expenditure in 2023-24 and 2024-25 is also higher than RIA estimates.
- 1.17 The 2022-23 budget includes £5.3 million for progression and pupil wellbeing, taking forward work in 2021-22 funded through its Renew and Reform allocation. The RIA estimate did not include additional funding for new progression and assessment arrangements compared to the existing arrangements. However, schools have expressed a need for more support on progression and assessment and the Welsh Government told us that there have been additional demands to assess pupils' progression due to the pandemic. The total does not include the cost of any software that schools might choose to buy to support their new assessment procedures and/or to replace existing software aligned to the current curriculum, which would be met from delegated school budgets.
- 1.18 The budget does not include additional funding for supporting schools to implement the new qualifications. This will need to be reviewed in 2023 and onwards when Qualifications Wales considers the implications of changes to wider qualifications for learners aged 14-16 and A levels and announces further details about the content and form of assessment for new GCSEs. It will also need to consider any increased costs for awarding bodies or consequential increases in entry fees.

1.19 On top of the direct costs of curriculum reform, schools face substantial opportunity costs. These represent the time staff are not available for other work because they are doing activities related to the new curriculum and which is not covered by Welsh Government grants for supply teachers to replace them. The Welsh Government estimates that the opportunity costs associated with curriculum reform are £263 million between April 2021 and March 2026 (ranging from £131.4 million to £394.4 million) (**Exhibit 6**). Opportunity costs are estimated to be nine times the direct costs to schools in this period.

Exhibit 6: Welsh Government estimates of the cost of the new curriculum including opportunity costs to schools, 2021-22 to 2030-31



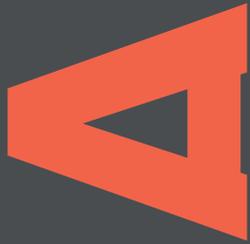
Note: Figures take account of inset days and the additional inset day for curriculum reform in 2021/22.

Source: Audit Wales analysis of Welsh Government, Curriculum and Assessment (Wales) Bill, Explanatory Memorandum incorporating the Regulatory Impact Assessment and Explanatory Notes (revised) April 2021

- 1.20 We estimate the opportunity costs to be equivalent to 1.4 million days between April 2021 and March 2026¹². The RIA shows most of the opportunity costs falling in 2021-22 and 2022-23. However, there is a risk that some opportunity costs slip to later in the period as secondary providers take advantage of the flexibility to delay adopting the new curriculum for year 7.
- 1.21 Previously we questioned if schools could absorb this time without impacting on the progress of current learners and/or staff wellbeing. We also expressed doubt about whether sufficient cover staff would be available, given higher demand for cover for COVID-19 absences and due to the recruitment of around 1,800 staff for recovery support¹³. The Welsh Government expected opportunity costs to be absorbed in various ways, including through innovative practice and collaboration. We understand that research on schools' readiness, due to be published soon, will reflect in part on how schools have managed workload pressures associated with the new curriculum.

12 Figures are calculated assuming a cost of £180 a day for supply teachers hired through the Welsh Government's framework contract in 2020-21. Subsequent years assume a 2.5% annual pay rise.

13 Auditor General for Wales, Response to the Senedd Children, Young People and Education Committee's consultation on the Curriculum and Assessment (Wales) Bill, September 2020. The figures used in this report are amended to include an allowance for the 2020-21 pay award.



Preparing for implementation: The Welsh Government worked well with the education profession to co-design the curriculum although the pandemic has affected the timetable and schools' ability to prepare

- 2.1 This part of the report looks at the development of the new curriculum and how the Welsh Government has supported schools preparing to implement it ahead of teaching from September 2022.

The Welsh Government and regional education consortia worked with schools to co-design the new curriculum and identify the skills and knowledge required to realise it

- 2.2 In October 2015, the Welsh Government set out its plans for networks of pioneer schools. The first network consisted of 68 curriculum pioneer schools focused on designing the new curriculum, supported by regional education consortia. This approach enabled schools to lead curriculum development, although a subsequent Welsh Government-commissioned evaluation found not all pioneer schools understood this expectation at the outset.
- 2.3 It took time to get a balance between practitioner ownership and strategic support and direction. Initially progress was slow, and, over time, the Welsh Government became increasingly involved in co-ordinating and supporting schools, consortia and other partners. It was easier for primary schools to develop and test a whole school approach to the new curriculum, partly because there were similarities between it and the existing foundation phase and because they were not constrained by examinations¹⁴.
- 2.4 A second network of 60 professional learning pioneer schools focused on identifying the skills and knowledge teachers need to realise the new curriculum and developing new professional standards for teachers. Both pioneer school networks formally ended in 2019 although a subset of 16 'innovation schools' continued to consider the draft curriculum into 2020. A report from Estyn in March 2022 showed that the majority of schools not in the pioneer schools network said they were not kept informed of national developments regularly enough¹⁵.
- 2.5 The Welsh Government provided £7.4 million to support pioneer and innovation schools in 2018-19 and 2019-20. Funding allowed schools to release one member of staff for two days a week in the early stages. The Welsh Government-commissioned evaluation found that, while initially adequate, schools later reported that they were spending more than two days a week and many practitioners did some curriculum work in their own time.

14 Arad Research in association with ICF Consulting Limited, Formative Evaluation of the Pioneer School Model: Final Report, July 2018

15 Estyn, The Curriculum for Wales – How are regional consortia and local authorities supporting schools? March 2022

- 2.6 The Welsh Government recognises that co-designing the new curriculum took a long time. The approach was a new way of working for all involved. The 2018 evaluation found that it took time to find the appropriate balance between practitioner ownership and strategic support and direction. Over time, strategic leadership improved, with more shared responsibility for co-constructing the new curriculum arrangements between partners at all levels.

The Welsh Government has funded a programme of professional learning and support to schools linked to the new curriculum although its effectiveness is not clear

- 2.7 The OECD has emphasised the centrality of improving teaching to reforming education in Wales¹⁶. In December 2020, Estyn found that, while there were some strengths, teaching and learning experiences required improvement in around a quarter of primary schools and just under half of secondary schools inspected¹⁷. The Welsh Government's wider reform programme includes several initiatives aiming to improve teaching standards aligned with the new curriculum, including changes to initial teacher education and the 2017 new professional standards for teachers¹⁸. In 2021, the OECD recognised that there has been a high level of commitment to teachers' professional learning within the Welsh Government's Education Directorate¹⁹.
- 2.8 The Welsh Government has supported a professional learning programme specifically to equip teachers with the knowledge and skills they need to understand the new curriculum, take on the new role of curriculum designers and realise the new curriculum. It provided just over £24 million to consortia in 2020-21 and 2021-22 (**Exhibit 7**). This included core funding for the consortia's work on curriculum reform, for support to individual schools and professional learning related to the new curriculum. The Welsh Government also provided £12 million to the consortia and local authorities to allow schools to release staff for professional learning activities, some of which will be related to the new curriculum.

16 OECD, Improving schools in Wales: an OECD perspective, April 2014; OECD, The Welsh Educational Reform Journey: A rapid policy assessment, 2017; National Foundation for Educational Research and ARAD Research, A Rapid Evidence Assessment on the Impact of Curriculum and Assessment Arrangements within High Performing Countries, Welsh Government Social Research 65/2013

17 Estyn, The Annual Report of Her Majesty's Chief Inspector of Education and Training in Wales 2019-20, December 2020

18 Arad Research, Evaluation of the professional standards for teaching, leadership and assistant teaching: Year 1 report, November 2021

19 OECD, Teachers' professional learning study: Diagnostic report for Wales, July 2021

Exhibit 7: Welsh Government funding to regional education consortia and partnerships for work directly related to the new curriculum^{1,2,3}

	2020-21 (£ millions)	2021-22 (£ millions)
Curriculum and assessment support to schools	3.9	9.8
Core support to consortia on design and development of the new curriculum	1.8	1.2
Professional learning directly related to the new curriculum	2.3	5.2
Total	8.0	16.2

Notes:

- 1 This funding was distributed to the three regional education consortia and local authorities formerly in the Education through Regional Working consortium mostly based on an agreed formula.
- 2 Total excludes funding for general professional learning and activities related to the Renew and Reform programme that are not directly related to the new curriculum but are likely to support the development of it.
- 3 Going forward, the regional consortia have adjusted their activities and structures to support curriculum reform and do not expect further costs.

Source: Audit Wales analysis of data provided by the Welsh Government, January 2022

2.9 The professional learning work was paused in the early stage of the pandemic but has since increased in scale and pace. Much has been delivered online. Consortia and local authorities had freedom to develop support that meets their local priorities. This focus on supporting schools marks a change from the original focus of the consortia on providing challenge to schools. In 2021, the OECD found that this shift in approach was not always clear at school level (see **footnote 19**). They cautioned that ‘creating a system based on trust will be harder if consortia are still associated with the old model of top-down accountability’.

- 2.10 The Welsh Government asked Estyn to review consortia and local authorities' support for schools on the new curriculum. In work undertaken in Autumn term 2021 and reported in March 2022, Estyn found schools had been supported to develop their vision for teaching and the new curriculum (see **footnote 15**). Estyn also found schools would welcome more practical professional learning opportunities to help them understand how they can design and realise the new curriculum. Estyn recommended that the Welsh Government considers approaches to enable the regional consortia and local authorities to better evaluate the impact and outcomes of their work supporting curriculum and teaching and be held to account for it. The Welsh Government plans to establish a working group to consider this issue as part of a review of the National Approach to Professional Learning.
- 2.11 School improvement services in South-West Wales have changed in recent years. Until it was formally disbanded in August 2021, the Education through Regional Working (ERW) consortium included Neath Port Talbot, Swansea, Carmarthenshire, Pembrokeshire, Ceredigion and Powys councils. Neath Port Talbot Council gave notice to leave the consortium in March 2019. The other councils subsequently left.
- 2.12 Pembrokeshire, Swansea, and Carmarthenshire councils have formed the Partneriaeth consortium in which curriculum and innovation forms a key area of work. Ceredigion and Powys councils have formed the Mid-Wales Education Partnership, underpinned by a memorandum of understanding. Neath Port Talbot is not in a consortium or partnership. After leaving ERW, Ceredigion, Powys and Neath Port Talbot no longer have access to any new materials produced by consortia. In February 2022, the Welsh Government announced that, from September 2022, materials published by any consortia will be available to all through the Hwb, the Welsh Government's digital learning platform. In March 2022, Estyn commented that, while Partneriaeth, the Mid-Wales Education Partnership and Neath Port Talbot Council are developing suitable structures to support their schools, their work was in the early stages of development, and it was too soon to measure its impact.
- 2.13 Professional learning is available to teaching assistants or supply teachers although they face more difficulties in accessing resources. In February 2022, the Welsh Government announced a 'national entitlement' for teachers and teaching assistants to high-quality support and resources accessed through the Hwb and regional consortia and partnerships. It said that detail of this entitlement will be available by the beginning of the 2022/23 academic year.

The COVID-19 pandemic has affected schools' ability to plan for the new curriculum, prompting the Welsh Government to offer some flexibility to secondary providers to delay implementation

The COVID-19 pandemic initially reduced schools' ability to respond to the draft new curriculum published in January 2020

2.14 The Welsh Government published draft guidance on key areas of the new curriculum in January 2019 and a draft new curriculum framework in April 2019. After detailed consultation, it published updated versions in January 2020. This should have kick-started intensive work by schools to develop their own curricula. However, schools were not able to make progress as concerns about the COVID-19 pandemic grew, with schools closing to pupils in March 2020 (**Exhibit 8**). Schools and teachers prioritised supporting pupils' wellbeing and adjusting to remote learning and, in secondary schools, to delivering centre-assessed grades when 2020 exams were cancelled.

Exhibit 8: national school closures in Wales, March 2020 to April 2021



Note: Some schools and local authorities had additional periods of closure.

Source: Welsh Government, Timeline of school closures during the coronavirus (COVID-19) pandemic, March 2020 to April 2021

2.15 The Welsh Government diverted many civil servants to work related to the pandemic but continued to treat the new curriculum as a priority. It updated its 'Education in Wales: Our national mission, Action Plan' in October 2020 with revised milestones for the whole educational reform programme. It also published 'Curriculum for Wales: the journey to 2022' outlining key activities for schools in each term to September 2022.

The Welsh Government responded to concerns about the readiness of some schools by offering secondary providers flexibility to delay their implementation of the new curriculum

2.16 The plans outlined in 'Journey to 2022' did not allow for any further impact from the COVID-19 pandemic. However, most schools experienced significant disruption in the autumn term 2020, all moving to remote learning in January 2021. Secondary schools delivered centre-determined grades again in 2021. In July 2021, Estyn reported that secondary schools²⁰, special schools and pupil referral units²¹ varied widely in their preparations for the new curriculum. Primary school leaders sought reassurance that schools would not be expected to have their curriculum finalised by September 2022 but would be able to refine their curricula over time²².

2.17 An internal review of its own readiness for implementing the new curriculum concluded that the Welsh Government's work programme was mostly on-track but expressed concerns about some partners' and schools' readiness. The unpublished review highlighted the importance of being clear about the timetable. It also highlighted the urgent need for clarity about assessment and qualification decisions, seen as a major obstacle to secondary schools engaging fully with curriculum development.

2.18 In July 2021, the Welsh Government confirmed that roll-out of the new curriculum in primary schools would start as planned in September 2022²³. However, it will be optional for secondary, 3-16 schools, special schools and pupil referral units until September 2023 when it becomes compulsory for years 7 and 8 and other settings. The Welsh Government also announced additional funding of £7.2 million and measures to reduce teachers' workload to create space for work related to the new curriculum²⁴. Most stakeholders welcomed this flexibility, although some told us that there should not be any further delays so learners can benefit from the new curriculum which has been a long time in the making.

20 Estyn, Engagement work: Secondary sector update, Summer term 2021, July 2021

21 Estyn, Engagement work: Maintained special school and pupil referral unit (PRU) update, Summer term 2021, July 2021

22 Estyn, Engagement work: Primary sector update, Summer term 2021, July 2021

23 Welsh Government, Oral statement: Curriculum reform – Next Steps, July 2021

24 These measures included further suspending assessments in primary schools which had been paused in 2020, delaying the restarting of Estyn inspections and making some changes to the first year of planned additional learning needs reforms.

2.19 In June 2021, the Welsh Government published its Renew and Reform programme²⁵ for supporting wellbeing and progression during the pandemic. In September 2021, the Welsh Government published its revised 'Curriculum for Wales: the journey to curriculum roll-out'. This superseded 'Journey to 2022', recognising the impact of ongoing disruption since October 2020 and more clearly integrating work on the new curriculum with work to recover from the impact of the pandemic. It sets out at a high level what schools need to do before starting to teach the new curriculum, making clear that this is the start of a cyclical process for schools of reviewing and refining their curricula. Nearly half of secondary, middle and special schools plan to introduce the new curriculum in September 2022.

Additional work caused by the COVID-19 pandemic is reducing schools' ability to prepare for the new curriculum, but the pandemic has led to some beneficial changes

2.20 Teachers and school leaders strongly support the new curriculum. In summer term 2021, 98% of senior leaders and 78% of practitioners agreed they were committed to the aspirations of the Curriculum for Wales. However, fewer felt that their schools were well-placed to design their own curriculum or to change their professional practice ahead of September 2022²⁶. Two-thirds (67%) of school leaders and practitioners wanted additional support and/or resources ahead of roll-out. They wanted additional time to develop resources, access tailored professional learning opportunities, engage in reflection and preparatory work to refine teaching strategies and collaborate with other schools. They asked for more guidance and support relating to expectations around assessment and progression. A report submitted to the Welsh Government in November 2021 and published recently also identified concerns about support for leaders around the new curriculum²⁷.

25 Welsh Government, Renew and reform: supporting learners' wellbeing and progression, Our education COVID-19 recovery plan, June 2021

26 Arad Research, Practitioner Survey on preparations for the roll-out of the Curriculum for Wales: final report, January 2022. 81% of leaders and 53% of practitioners felt they were well placed to design their own curriculum for September 2022. 86% of senior leaders and 53% of practitioners considered that their school was well-placed to make changes to their professional practice ready for September 2022.

27 Harris, A., Hutt, M., Jones, M. and Longville, J, Independent review of leadership: Final report, Welsh Government, May 2022

- 2.21 In July 2021, Estyn reported that primary school leaders believed their schools needed a prolonged, uninterrupted period to develop their curricular approaches (see **footnote 22**). A survey in June and July 2021 found that 54% of senior leaders and 62% of practitioners said there had not been time in the school timetable for curriculum work²⁸. The flexibility for secondary schools to delay implementation, and the measures to create space in the school timetable were widely welcomed, but schools have continued to experience significant disruption in the 2021/22 academic year. Many schools have experienced high absence levels and continue to do so. In the week 4-8 April 2022, an average of 86.8% of all pupils were in attendance, falling to 81% of year 12 and to 72% of year 13 pupils. Schools have also struggled with high levels of staff absence, and some have had difficulty finding cover, causing some to temporarily close.
- 2.22 In December 2021, the Chief Inspector of Education and Training commented on the unprecedented level of pressure that school staff have faced during the 2020/21 academic year. While many persevered with the curriculum reform journey and other elements of the reform programme, she emphasised that no-one should underestimate the toll on staff.
- 2.23 Nobody knows how the pandemic will affect schools in the rest of 2022 and beyond. Estyn has emphasised that it is important for schools to continue to prioritise pupils' welfare²⁹. The Welsh Government asked Estyn to engage with schools to review progress on the new curriculum in this challenging environment and requested information from consortia about their work with schools. Together this information can inform the Welsh Government's thinking about the future amid concerns about their ability to prepare for the new curriculum given the continuing pressures from the pandemic.
- 2.24 In July 2021, Estyn found that in most schools visited leaders were working effectively with stakeholders and spending considerable time developing a vision for their school and its pupils (see **footnotes 20-22**). Unsurprisingly, Estyn found that schools that had been pioneer schools were further ahead in their thinking and preparations than others, but they identified common barriers to progress (**Exhibit 9**).

28 Arad Research, Practitioner Survey on preparations for curriculum and assessment reforms in 2022: interim findings primary and secondary senior leaders, September 2021

29 Estyn, The Annual Report of Her Majesty's Chief Inspector of Education and Training in Wales 2020-21, December 2021

Exhibit 9: common barriers to progressing the new curriculum in schools

- **Creating time for curriculum development and professional learning** – given the pressures of the pandemic on top of normal workload.
- **Not all teachers have taken part in the professional learning needed to understand the approach** – this had led some schools to design a curriculum without fully understanding the principles of the approach.
- **Uncertainty about future qualifications** – research commissioned by Qualifications Wales found that uncertainty about future qualifications and the balance between individual subjects or integrated Areas of Learning and Experience meant that some secondary schools were reluctant to progress³⁰. Following public consultation, Qualifications Wales announced high-level decisions about qualifications in October 2021, bringing more clarity³¹. It said it would work with teachers and other stakeholders including learners to co-design qualifications that reflect the new curriculum.
- **Ways of working related to the pandemic** – school leaders said they found it more difficult to inspire change through remote meetings. It was more difficult to gauge the impact of new approaches to teaching and learning as schools have delivered a reduced curriculum in restricted circumstances since returning to in-person teaching.

Source: Audit Wales, analysis of work by Estyn (see footnotes 20-22) and Qualifications Wales (see footnote 29)

2.25 While the pandemic has caused difficulties for implementing the curriculum, it has also led to some beneficial changes. Suspending the national curriculum in March 2020 and the requirements for end-of-stage testing allowed schools to experiment and develop their curricula. Schools and teachers have prioritised the wellbeing of pupils, kickstarting work on the health and wellbeing Area of Learning and Experience for the new curriculum (see **Exhibit 2**).

30 Arad Research and the National Foundation for Educational Research, Qualified for the future, Summary of findings, June 2020

31 Qualifications Wales, Qualifications for the Future: Reimagining qualifications in Wales, October 2021

2.26 Teachers' digital skills improved rapidly as they had to adapt to remote learning, which is in line with the ambitions of the new curriculum. Similarly, many teachers recognised the need to develop pupils' digital and independent learning skills in readiness for the challenges of a more dynamic and experiential approach to learning. The Chief Inspector of Education and Training has suggested that the experience of responding to the pandemic has increased schools' and teachers' resilience and their appetite to do things differently (see **footnote 29**).

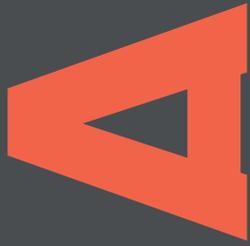
The Welsh Government had a challenging programme of work to complete before the September 2022 milestone, but this work is mainly complete

2.27 The Welsh Government recognised it had a significant role supporting schools and others to prepare for the new curriculum once the primary legislation was in place in April 2021. Its work programme included finalising guidance to schools, ensuring that the secondary legislative framework was in place and making support available to schools. Much of this work is complete.

2.28 The Curriculum and Assessment (Wales) Act 2021 established the framework for the new curriculum and set out the requirements on headteachers and school governors. The Welsh Government published draft guidance for consultation on some key outstanding issues in May 2021, in part because the guidance needed to reflect debate and issues raised during scrutiny of the Bill. Topics included careers and work-related experience, early years settings (enabling pathways), the curriculum in non-maintained nurseries and cross-curricula skills (literacy, numeracy and digital skills).

2.29 The Welsh Government also published revised guidance on the controversial topics of religion, values and ethics (RVE) and relationships and sexuality education (RSE) in May 2021. During Autumn 2021 it laid final versions of the sub-ordinate legislation to enable the Curriculum and Assessment (Wales) Act 2021 before the Senedd and updated associated curriculum guidance. This provided greater certainty on these vital areas for schools as they were developing their curriculum.

- 2.30 The Welsh Government announced details of its national network for curriculum implementation in September 2021, two terms later than planned³². The national network is a major element of its support for schools, intended to facilitate collaboration and a national conversation for schools. The Welsh Government supports participation through its professional learning grant to schools. We were told that high levels of absence were reducing participation in initial conversations during early Autumn 2021. However, the Welsh Government told us that rates of participation subsequently increased.
- 2.31 The Senedd approved the Progression Code in December 2021, setting out what it means for learners to make progress under the new curriculum as they develop and improve skills and knowledge. In February 2022, the Welsh Government announced new national support for developing progression and assessment in the new curriculum and a three-year project to understand and develop progression and assessment (Camau I'r Dyfodol).



Future risks: The Welsh Government is alert to some key risks and will need to continue to manage these to ensure the new curriculum realises its anticipated benefits

- 3.1 Introducing the new curriculum is not a ‘big bang’ event but an incremental process with a key milestone in September 2022. The Welsh Government will depend on other partners to realise the new curriculum, while it adopts a supporting role. Overshadowing all is the pandemic which continues to impact schools. This section of the report looks at the future key risks (**Exhibit 10**) and how the Welsh Government is responding to them. The Welsh Government recognises these risks, but we have made recommendations that highlight the importance of continuing to manage them.

Exhibit 10: key risks that must be managed for the new curriculum to achieve its intended benefits



Financial and workforce pressures

these could affect schools’ ability to realise a high-quality new curriculum.



Inequalities

ensuring the new curriculum supports the Welsh Government’s aim of reducing inequalities in education.



New qualifications

these will need to support the aims of the new curriculum and support progression to the full range of options available to post-16 learners.



Engagement

ensuring schools effectively engage with parents, carers and learners.



Accountability, evaluation, improvement and transparency

developing an approach that supports improvement as well as democratic accountability and transparency.

Financial and workforce pressures could affect schools' ability to realise a high-quality new curriculum

Financial pressures may reduce schools' ability to realise a high-quality curriculum

- 3.2 The Welsh Government's assessment of future costs in 2020 suggested the new curriculum will not require additional resources to the current curriculum other than for development work (see **Exhibit 4**). We think it would have been reasonable to assume there may be additional costs, at least from new requirements relating to modern foreign languages and careers education in primary schools which do not feature in the RIA cost estimate. But, putting this aside, in October 2021 we highlighted that school funding had fallen over the previous decade and many schools were struggling financially prior to the pandemic³³. Together with the likelihood of tight public funding in future and competing pressures on council budgets, there is a risk that schools' ambitions for the new curriculum will be limited by tight or negative budgets.
- 3.3 Schools receive the majority of their funding from local authorities which, in turn, receive an un-hypothecated grant from the Welsh Government. A review of school funding in 2020 found that councils' delegated funding to schools varies across Wales after allowing for differences in learner and school characteristics³⁴. The Welsh Government has not yet responded to the review.
- 3.4 In its report on the Welsh Government's 2022-23 budget³⁵, the Senedd Children, Young People and Education Committee highlighted the concern of its predecessor committee about whether the local government settlement enabled local authorities to give adequate provision for school budgets. It recommended that the Welsh Government should clarify how Ministers work together with local authorities to ensure that schools receive sufficient funding to deliver on the Welsh Government's policy commitments, including the new curriculum.

33 Auditor General for Wales, A Picture of Schools, October 2021

34 Sibieta, L., Review of School Spending in Wales, Welsh Government, October 2020

35 Senedd Children, Young People and Education Committee, The 2022-23 Welsh Government Draft Budget, February 2022

A shortage of teachers with Welsh language skills may hamper the Welsh Government’s ambition to reform Welsh language teaching

- 3.5 Extending Welsh language in schools and growing Welsh-medium education are key to the Welsh Government’s ambitions to increase the number of Welsh speakers³⁶. The Welsh Government has an ambition for an overarching approach to Welsh language; removing any distinction between first and second language speakers to create a single continuum from those with little or no exposure to Welsh to those working towards proficiency³⁷. It had raised the possibility of one overarching qualification but that has proved difficult because learners have varying exposure to the Welsh language. In February 2022, Qualifications Wales announced three new Welsh language qualifications: combining Welsh language and literature for Welsh medium and bilingual schools; Welsh for English medium schools; and an additional qualification for learners in English medium schools who want more advanced Welsh.
- 3.6 However, the Welsh Government’s ambitions are threatened by a longstanding lack of teachers who can teach Welsh and teach other subjects through the medium of Welsh. A July 2020 report on the teacher labour market found shortages in Welsh along with other subjects³⁸. Estyn has previously found that Welsh medium schools face greater recruitment difficulties and have difficulty locating Welsh-speaking supply staff³⁹.
- 3.7 Recent initiatives to attract people with Welsh-language skills do not appear to have led to a significant increase. The numbers of people starting initial teacher education either to teach in Welsh or who are fluent in Welsh increased in 2019/20 compared to the previous year but was still less than in 2014/15 (**Exhibit 11**). Education workforce statistics also show that the number of registered teachers able to speak Welsh (33.5% in 2021) or work through the medium of Welsh (27% in 2021) has remained fairly static over recent years⁴⁰. The Welsh Government published a ten-year plan to tackle these issues in May 2022⁴¹.

36 Welsh Government, *Cymraeg 2050 - A million Welsh speakers*, July 2017

37 Welsh language is a compulsory element of the current curriculum for key stage 2, 3 and 4. Currently, qualifications have different routes depending on whether Welsh is a first or second language.

38 National Foundation for Educational Research, *Teacher labour market in Wales annual report 2020*, July 2020

39 Estyn, *Effective management of school workforce attendance in primary schools*, January 2017

40 Education Workforce Council for Wales, *Annual education workforce statistics for Wales*, September 2021

41 Welsh Government, *Welsh in education workforce plan*, May 2022

Exhibit 11: self-reported Welsh speaking ability and ability to teach in Welsh, students starting Initial Teacher Education

	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Training to teach in Welsh	255	245	235	210	175	235
Fluent Welsh speaker	350	330	350	305	265	300

Source: Statistics for Wales, Initial Teacher Education in Wales, May 2021

There is a risk that the new curriculum will not contribute to the Welsh Government's aim of reducing inequalities in education

- 3.8 The Welsh Government has stated that reducing the attainment gap – the difference in educational achievements between one group of learners and others – is a goal of the new curriculum⁴². On one important measure– the difference between GCSE results between those eligible for free school meals and others – the attainment gap widened between 2016 and 2021 at grades A*-A for pupils eligible for free school meals and others. The gap at grades A*-C also increased between 2016 and 2019 although it has reduced since. Other attainment gaps are observed between males and females, between ethnic groups and pupils with additional learning needs and others at GCSE.
- 3.9 Evidence presented to the Senedd Children, Young People and Education Committee in November 2019 has suggested that changing the curriculum was unlikely of itself to reduce the gap⁴³. Research in pioneer schools⁴⁴ found that few teachers identified children from disadvantaged backgrounds as potentially benefitting from the new curriculum. Recognising there is a limit to the extent that any curriculum can tackle the multiple causes of unequal pupil attainment and that the Welsh Government plans to announce new measures to tackle the link between disadvantage and educational attainment, we think there is a risk that the new curriculum may fail to meet its equality goals. There is more work to do to understand how the new curriculum can contribute to reducing the gap.

42 Welsh Government, Curriculum and Assessment (Wales) Bill 2020 – Explanatory Memorandum, July 2020; Minister for Education, Plenary Debate - Curriculum and Assessment (Wales) Bill 2020, December 2020

43 Newton N., Evidence to the Senedd Children, Young People and Education Committee, November 2019

44 Newton N., Power, S and Taylor, C., Successful futures for all: Explorations of curriculum reform, Cardiff University, July 2019

- 3.10 There is also a risk that differences in schools' curricula will lead to inequalities. One of the arguments for introducing a national curriculum in the 1980s was to introduce more consistency in the curriculum offered by schools. However, over time amendments and additions were made, and the national curriculum came to be regarded more as a straitjacket, limiting professional autonomy. This balance between national consistency and local flexibility has been at the heart of debate about the new curriculum.
- 3.11 The previous Senedd Children, Young People and Education Committee recommended that the Welsh Government needs to be clearer about what checks and balances it will put in place to monitor whether learners receive a consistent, although not uniform, curriculum⁴⁵. Collaboration within clusters, peer-to-peer support, the national network (see **paragraph 2.30**) as well as consortia and partnership oversight and inspection all have a role in ensuring consistency between schools, but we see this as an inherent risk that will continue to require oversight.

The Welsh Government needs to continue to work with Qualifications Wales to ensure that new qualifications are aligned with the curriculum and allow progression to the full range of post-16 options

- 3.12 The Welsh Government and Qualifications Wales recognised early on that qualifications would need to change to fit with ambitions for the new curriculum. The Welsh Government postponed this discussion until after the main features of the curriculum were decided to avoid the risk that qualifications would drive curriculum development. In recognising the need to change, the Welsh Government is managing the risk that qualifications become a barrier to successful implementation that has been observed in Scotland⁴⁶.

45 Senedd, Children, Young People and Education Committee, Stage 1 Scrutiny Report on the Curriculum and Assessment (Wales) Bill, December 2020

46 OECD, Scotland's Curriculum for Excellence - Into the future, June 2021

- 3.13 However, there is evidence from work by Estyn that some secondary schools slowed progress on developing their curricula because they were unclear about future qualifications (see **footnote 20**). Qualifications Wales consulted on the form of qualifications between November 2019 and February 2020. It told us that stakeholders expressed widespread support for learners aged 14-16 to continue to take formal qualifications, although there has been a call for significant changes to GCSEs⁴⁷. In June 2020, Qualifications Wales announced that qualifications called GCSEs would continue but with reformed content and assessment to support the new curriculum. In October 2021 it announced high-level decisions on the new range of GCSEs that will be created. These include new qualifications (such as engineering, and film and digital media), merging existing qualifications (mathematics and numeracy and English language and literature) and a new double science qualification to replace all current science options.
- 3.14 Some stakeholders expressed concerns to us about the pace and volume of work that is required to co-create the qualifications in time for pupils to choose their GCSE options in 2024/25. ColegauCymru expressed concern about how the new qualifications would support A levels, students who cross the border to study⁴⁸ and those studying vocational qualifications which are mostly not Wales-specific. Qualifications Wales and the Welsh Government recognise that this work is urgent. Workstreams are underway; initially schools were struggling to release staff but after more communication and a recruitment drive, Qualifications Wales told us it secured enough teachers and lecturers to fully populate all 24 working groups established to support the co-construction of new GCSEs and related qualifications. They told us that there has also been a positive response from schools and colleges for its learners' engagement work in Spring 2021. It will be important to monitor progress of this work so that new qualifications are co-designed with stakeholders.

47 Jones C. in collaboration with the Future Generations Commissioner for Wales, Fit for the Future Education in Wales, October 2019

48 The number of 16-19 year olds that cross the border to study in schools or colleges in England or Wales is thought to be relatively small in total but can be significant for institutions close to the border.

3.15 Over time the degree to which teacher assessment has featured in qualifications has changed in Wales. In December 2021, Qualifications Wales published research on the involvement of teachers in assessment in 12 other jurisdictions⁴⁹ and on teachers and learners' experiences of non-examined assessment⁵⁰ to inform the design of new qualifications. Teachers and learners will require support to move to these qualifications including:

- **Ensuring reliability and validity of assessment led by teachers** – in 2020 there was concern about the influence of bias on teacher assessment⁵¹. In 2021, Qualifications Wales and the WJEC introduced a quality assurance process and appeals system to ensure learners received results that fairly reflected their achievements in qualifications designed to be assessed primarily through external examinations. There will need to be a national programme of support and professional learning and frameworks to ensure a common approach and maintain public confidence in outcomes.
- **Understanding the workload implications for teachers** – delivering centre assessed grades during the pandemic resulted in additional work for teachers and diverted them from other work. As circumstances become more normalised, the workload implications of any changes in assessment will need to be considered, including evidence from other jurisdictions.
- **Understanding the impact of assessment on learners** – generally, learners feel positively about non-examined assessment methods, but some find the volume of work difficult to manage. There are contrasting views about the accessibility of non-examined assessment for learners, particularly those with lower ability levels.

Greater engagement with parents, carers and learners is needed to ensure successful implementation of the curriculum

3.16 The new curriculum framework requires schools to consult and inform parents and carers about the curricula. Schools are developing ways of doing this such as parents committees and events, building on case studies and good practice. Schools' engagement with parents and carers has generally benefitted from new ways of working during the COVID-19 pandemic.

49 Alpha Plus, International educational assessment systems and their involvement of teachers in the assessment cycles, Qualifications Wales, August 2021

50 Qualifications Wales, Teacher and learner perceptions and experiences of non-examination assessment (NEA) in approved GCSEs in Wales, December 2021

51 OFQUAL, Equality impact assessment: literature review, April 2020

- 3.17 Engagement will be particularly important in relation to aspects of the new curriculum that have proved controversial, such as the changes to religion, values and ethics, relationships and sexuality education and Welsh language. For example, in November 2020 the Senedd Children, Young People and Education Committee urged the Welsh Government to conduct a ‘myth busting’ exercise to inform parents about the relationships and sexuality education that will form part of future learning. The Welsh Government accepted this recommendation, and the Senedd approved the Relationships and Sexuality Education Code in December 2021. The Welsh Government has a communications campaign on relationships and sexuality education underway and has updated information on its digital platform, Hwb.
- 3.18 Schools must engage with parents about their curricula and enable parents and learners to participate in schools’ evaluation and improvement. It is not clear if the Welsh Government plans to measure the level of engagement with parents, as has been the approach in Scotland⁵².

It is not clear yet what information will be available to support a new approach to self-evaluation, improvement, accountability and transparency

- 3.19 The success of education systems tends to be judged, at least in part, by exam and test results. Over time, successive Welsh Governments have varied their approach to these high-stakes measures⁵³ with self-evaluation featuring increasingly as a feature of the Welsh Government’s approach to school improvement and accountability. Many stakeholders see this as a strength, breaking the link between assessment and accountability measures. However, an OECD review in 2018⁵⁴ found that there was no common understanding of what a good self-evaluation looked like.

52 Scottish Government, Learning together: national action plan for parental involvement, engagement, family learning and learning at home 2018-21, December 2018

53 In 2012, the Welsh Government introduced changes relating to collecting, publishing and sharing information about schools and pupils to ensure robust self-evaluation and effective challenge and help drive up standards. A national banding system for schools (the National School Categorisation System) was introduced to identify schools in need of improvement. Numeracy and literacy tests were introduced for pupils between 7 and 14 years of age in 2013.

54 OECD, Developing schools as learning organisations in Wales, October 2018

- 3.20 Work on accountability and improvement has been subject to delay. In February 2019, the Welsh Government published initial draft guidance on evaluation and improvement for the new curriculum⁵⁵. This proposed a system based on four principles: fair, coherent, proportionate and transparent. This was superseded by a more detailed draft in January 2021⁵⁶. In October 2020, the Welsh Government said that guidance and support for schools' self-evaluation would be available ahead of the 2021/22 academic year⁵⁷. The Welsh Government published the National Resource: Self-evaluation and Improvement for schools in October 2021 with guidance and practical examples to support a self-improving school system on Hwb, its digital platform for learning and teaching. Pilots began in November 2021 and the Welsh Government currently anticipates it will be completed by the end of the academic year with the majority of resources published by April 2022.
- 3.21 Welsh Government regulations prescribe the information schools must include in their annual report to governors and school prospectus⁵⁸. Since 2018, schools have not had to include comparative information from national reading and numeracy assessment. In 2020, the requirement to report exam results and authorised and unauthorised absence was removed because of the uneven impact of the pandemic. This continued in 2021/22⁵⁹. As yet, it is unclear what information will be reported publicly or to those charged with scrutiny and accountability⁶⁰. There is an opportunity to include data relevant to all curriculum areas – for example health and wellbeing – and not just examination or test results.
- 3.22 The Welsh Government has commissioned research on the information needed for self-evaluation, improvement, accountability and transparency across all tiers of schools to report in September 2022, a year later than suggested in its October 2020 updated action plan. It will be important to include robust data that allows parents and governors to have a full picture of the schools' performance and enable scrutiny by governors and local authorities. Otherwise, there is a risk that external exercises such as PISA tests and exam results remain high-stakes tests for the education system and the Welsh Government.

55 Welsh Government, Draft evaluation and improvement (accountability) arrangements for Wales, February 2019

56 Welsh Government, School improvement guidance: framework for evaluation, improvement and accountability: Draft guidance, January 2021

57 Estyn, Welsh Government and the Regional Education Consortia, The National Evaluation and Improvement Resource (NEIR) update and guidance v1.3, October 2020

58 The School Governors' Annual Reports (Wales) Regulations 2011

59 The relaxation of school reporting arrangements (Wales) (coronavirus) regulations 2022, February 2022

60 Governing bodies are the accountable bodies for their schools. Where schools are causing concern, local authorities can intervene, advised and supported by regional consortia. Democratic accountability in local authorities (Councils and Scrutiny Committees) and in regional consortia (Joint Committees and Company Board) supports schools through monitoring, challenging and supporting improvement.

- 3.23 The Curriculum and Assessment (Wales) Act 2021 requires ministers to keep the 27 'What Matters' Codes and the Progression Code under review. Headteachers and governors are also required to keep schools' curricula under review. However, the Act does not state how or how often it should be undertaken. There are a number of routes for review including the national networks. Welsh Government Ministers have offered to report annually to the Senedd on progress, providing an opportunity for scrutiny.
- 3.24 Research has shown that countries with respected education systems tend to undergo curriculum reform on a planned cyclical basis (see **footnote 7**). In the review of the Curriculum for Excellence commissioned by the Scottish Government in 2020, the OECD commented that the Scottish Government did not plan for a formal review of the Curriculum for Excellence framework, 'although such a review cycle is common practice in curriculum policy in other education systems' (see **footnote 46**). Since devolution in 1999, the Welsh Government has commissioned several curriculum reviews (in 2008, 2012 and 2014) but there has been no mechanism for cyclical review.



Appendices

- 1 Audit approach and methods
- 2 Timeline of key events relating to curriculum reform, 2008-2027

1 Audit approach and methods

Audit approach

We focused on the Welsh Government's management of the curriculum reform implementation programme. Our aim was to support the implementation process and support scrutiny. Therefore, we provided a detailed response to the Senedd consultation on the Curriculum and Assessment (Wales) Bill in September 2020. We have met with Welsh Government officials regularly during this audit.

At the outset of our work in early 2021, we were focused on whether the implementation was on track, in particular in the light of early conversations with colleagues in Estyn and elsewhere of the impact of the COVID-19 pandemic on secondary schools' ability to develop their curricula and professional learning ahead of the planned implementation of the new curriculum in September 2022.

Our aim was to provide assurance that implementation was on track in the context of revised plans announced in July 2021. Our audit work focused on whether:

- the Welsh Government had a clear purpose for curriculum reform;
- the implementation of curriculum reform was progressing as planned;
- there were significant risks/barriers to successful implementation of the new curriculum; and
- the Welsh Government was effectively managing the main risks.

In recent years, there have been several reviews by the OECD and others as well as research associated with curriculum reform. Estyn has conducted several thematic reviews as well as engagement work in 2020 and 2021. We have referenced its work rather than duplicate it. The Welsh Government asked Estyn to review consortia and local authorities' support for schools on the new curriculum in 2021. We were in regular communication with Estyn about its work.

Audit methods

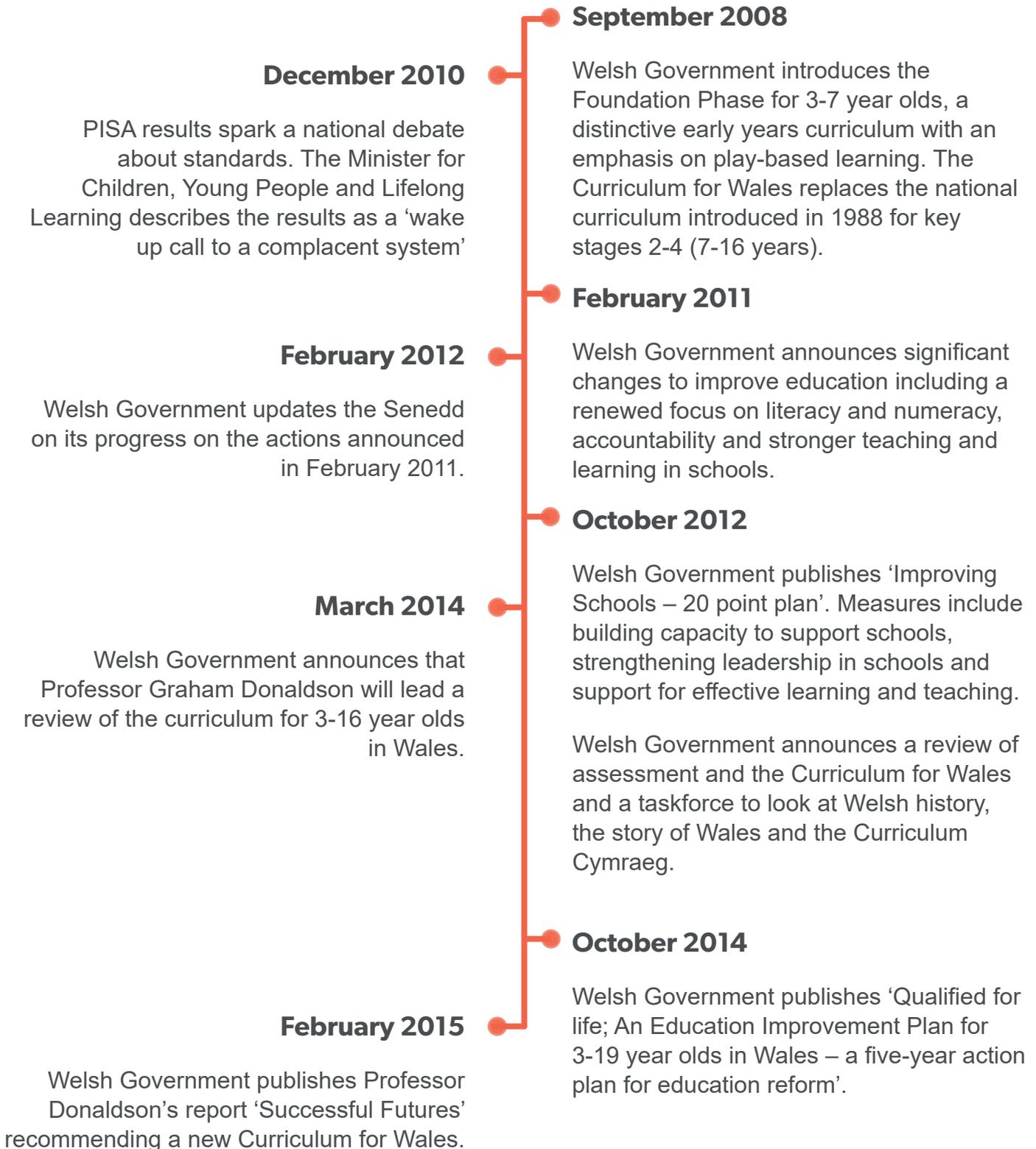
- **Document review:** we reviewed a large amount of documentation and research regarding curriculum reform, in a deliberate effort to not duplicate evidence gathered by others. We touched on some of the challenges around curriculum reform in our A Picture of Schools report in October 2021.
- **Semi-structured interviews:** we interviewed Welsh Government officials and staff from other key stakeholder organisations such as Estyn, Welsh Local Government Association, the Office of the Future Generations Commissioner, Qualifications Wales and the Office of the Children's Commissioner.
- **Data analysis:** we reviewed financial data on how much money had been spent on curriculum reform.
- **Call for evidence:** we invited interested parties to provide their views on progress with curriculum reform. We targeted organisations and individuals who had previously responded to the Senedd consultation on the 2020 Curriculum and Education (Wales) Bill which closed in September 2020.

We received feedback from 9 education organisations, including ColegauCymru who also asked to meet with us along with representatives from the further education sector.

We also received responses from 5 headteachers, 12 teachers, 7 parents and 4 members of the public. While these could not be considered representative, we considered them alongside other survey evidence (see **footnotes 26 and 28**) and the Education Workforce Survey 2021.

- **Workshop:** we held a workshop with Welsh Government officials to explore the background to, and status of, the curriculum reform programme.

2 Timeline of key events relating to curriculum reform, 2008-2027







Source: Audit Wales



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Mr Mark Isherwood MS
Committee Chair
Public Accounts and Public Administration

Sent via email to:
SeneddPAPA@senedd.wales

Reference: AC/309/caf
Date issued: 1 July 2022

Dear Mark

The Welsh Community Care Information System

I published my [report](#) on the Welsh Community Care Information System (WCCIS) in October 2020. WCCIS has been developed as a single system and a shared electronic record for use across a wide range of adult and children's services. The intention being that all 22 local authorities and seven health boards would implement it.

My report found that implementation and roll-out of WCCIS was taking much longer and proving more costly than expected. Despite efforts to accelerate the process, the prospects for full take-up and benefits realisation remained uncertain. Some important issues around the functionality of the system, data standards and benefits reporting were still to be fully resolved.

At the time of my report, 19 organisations were using WCCIS or had signed deployment orders, with four in active negotiation and six yet to commit. Of the 19 organisations, 13 local authorities and two health boards had gone live. However, 'live' meant different things. Differences in how organisations were choosing to deploy WCCIS limited opportunities for integrated working and raised other value for money issues.

I noted in my report that the potential benefits of a shared electronic record across health and social care were clear to see; even more so given some of the challenges presented by the COVID-19 pandemic. However, the Welsh Government's ambitious vision for WCCIS was still a long way from being realised. I emphasised that the

Welsh Government needed to work with the various organisations involved to take stock of expectations for the remainder of the contract term and resources and wider commitment to support progress.

The previous Public Accounts Committee (PAC) did not have time to undertake any detailed inquiry work on WCCIS. However, the Welsh Government provided a response to my recommendations, all of which were accepted as part of correspondence with the PAC in February 2021. The PAC had requested a wider update on matters arising from its November 2018 report on Informatics Systems in NHS Wales and my predecessor's January 2018 report on the same topic.

Since my report, the functions previously undertaken by the NHS Wales Informatics Service (NWIS) have moved from its previous structure, as part of Velindre University NHS Trust, to the new 'Special Health Authority' – Digital Health and Care Wales (DHCW). DHCW plays a key role in national programme management for WCCIS, although since my report staff turnover has seen two changes in previous temporary appointments to the role of WCCIS programme director. From early 2022, the role of WCCIS programme director has become a permanent position.

The WCCIS programme is now at a critical juncture. The Welsh Government has taken several actions in response to my recommendations, most notably an independent 'Strategic Review' which reported in February 2022. The review found that while support for the vision of an integrated health and social care system remained, there was also widespread frustration.

Many of the issues highlighted by my report were mirrored in the Strategic Review findings. The Strategic Review has recommended a series of actions to 'reset' and 'course correct' the programme. The Welsh Government has also recently announced further funding for national programme management to take this work forward. It will also provide further financial support to health boards and local authorities to support implementation.

The Annex to this letter provides a more detailed update on the main actions so far in response to my recommendations and on progress generally against key issues raised by my report. By way of summary:

- Relevant to my specific recommendations, the Welsh Government commissioned research to gather views from users and others about the performance and functionality of the system. The survey findings in June 2021 highlighted the system was having a more negative than positive impact on most users' ability to do their work. Preceding the Strategic Review mentioned above, there was also a programme assurance review which concluded in November 2021 and a further one scheduled for November 2022. DHCW also completed an exercise to learn lessons from the contracting approach for WCCIS.

- Ongoing rollout has seen two more local authorities 'go live' with the system since my report while one further health board has now signed a 'deployment order'. However, it remains the case that patchwork approaches to implementation mean that even where the system is live, it is not being used to its full potential or on a consistent basis. We have updated our interactive [data tool](#) which provides further detail on the overall roll-out position across the 29 organisations.
- Central support costs for the period to 31 March 2022 – excluding local costs to individual organisations and other opportunity costs – remain at around the £30 million expected at the time of my report, although the profile of those costs has changed. The Welsh Government has now committed a further £8.31 million for national programme support and support for health board and local authorities in accelerating implementation for 2022-23 to 2024-25. The Welsh Government has agreed that this figure may increase to up to £12 million if required. The overall business case for WCCIS has not yet been updated, something that I recommended should happen in advance of committing more funding. The Strategic Review has also now recommended that the business case be updated.
- Key aspects of functionality continue to be delayed. Areas where work continues to be needed include Welsh-language requirements, mobile functionality and interfaces with other NHS Wales systems. As of June 2022, all these areas of functionality remain outstanding although mobile functionality is due to be piloted later this calendar year and most of the interfaces are also now expected by the end of 2022. When I reported previously, it had been estimated that the remaining updates would be delivered through to the end of 2021.
- System performance issues became particularly acute during Autumn 2021 but overall system performance has since stabilised. Several organisations have identified specific risks to service delivery around the stability of the system at different points. Significant performance issues during a planned upgrade to the underlying platform for the system resulted in the system being unavailable altogether for certain periods during October and November 2021. These issues continued to some extent into early 2022 before being resolved in February 2022. Since this time, both the system suppliers and the National Programme Team have reported the system performance and stability has been good.
- National data standards work has continued but is still not complete. Development of these standards is key to realising some of the benefits of WCCIS.

- The overall arrangements for reporting the benefits from WCCIS implementation, which have been the subject of discussion and review from the outset, have still not been resolved. Work is still ongoing to develop a suitable reporting framework. Annual reporting on the progress of the WCCIS programme has also not been completed as expected to date, although the Welsh Government has been receiving quarterly updates from the National Programme Team. The National Programme Team produced a benefits realisation report in November 2021, although its key findings largely mirrored my own, that the 'patchwork' nature of implementation has resulted in difficulties realising some of the key information sharing and integrated benefits that the system was expected to support.

Following considerable diagnosis of the difficulties that have affected the WCCIS programme, strong leadership is now required to ensure value for money from the £30 million investment to date and future spending and to determine the overall future of the programme in partnership with those organisations currently using the system and those who are not. As part of this, a decision will be needed on the future contracting strategy and whether to retain the commitment to a single system solution or allow for different 'interoperable' systems using the same standards and ensure the development of those standards moves at a quicker pace than it has to date.

Time is now of the essence, with the strategic review identifying that at least two local authorities that had signed deployment orders have been reviewing whether to stay with the current system and some key contractual milestones not far ahead. There is added complexity from the fact that those organisations currently using the system have moved to it at different times, meaning their deployment orders will also expire at different times. My report set out details about the contractual framework. This included a Master Services Agreement (MSA), which expires in March 2023, but can be extended on a 1+1+1+1 basis until March 2027. Local deployment orders may run beyond March 2027 but must end by March 2030. Again, these deployment orders include opportunity for extension on a 1+1+1+1 basis but the first deployment order, signed by Bridgend County Borough Council, comes to the end of its initial 8-year period at the same as the MSA in March 2023.

The National Programme Team has pointed to various factors that have impacted on overall progress of the WCCIS programme since my report. These have included the ongoing impact of the pandemic, the transition from NWIS to DHCW and the significant attention that needed to be given to addressing performance issues that emerged in Autumn 2021. However, they have also emphasised their view that with stability to the system and clearer direction following the Strategic Review, the programme is in a better place to progress other key actions.

The Committee has signalled interest in returning to consider wider issues around digital health and care in the autumn. Any such scrutiny would provide an opportunity to explore matters arising from this letter and my previous report in more detail.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Adrian Crompton', with a long horizontal stroke underneath.

ADRIAN CROMPTON
Auditor General for Wales

Annex:

My previous recommendations and action taken in response

- 1 In my October 2020 report I recommended that:
 - Before committing any further central funding, the Welsh Government works with the WCCIS National Programme Team, health boards, local authorities and the supplier to:
 - produce an updated business case that takes account of local, regional and national costs and sets out expectations for further roll-out of the system, its use over the remainder of the contract term, the development of national data standards and planning for any successor arrangements;
 - ensure the organisations involved have the necessary capacity to support implementation and are giving enough priority to the programme against a clearly agreed plan; and
 - pull together a clear national picture on feedback from front-line users about the performance and general functionality of the system.
 - The Welsh Government works with the National Programme Team to consider:
 - how the WCCIS contract might have been strengthened to support and incentivise delivery and manage risk; and
 - how relevant lessons can be applied to any successor contracting arrangements and wider public procurement.
- 2 The Welsh Government accepted the recommendations. Progress towards addressing them has included a programme assurance review which concluded in November 2021. There has also been a 'Strategic Review' carried out by external independent consultants. The consultants began their work in November 2021 and produced their final report in February 2022. The Strategic Review raised

several recommendations, all of which have been accepted by the Senior Responsible Officers (SROs) for the programme¹.

- 3 The Welsh Government also commissioned independent researchers to carry out surveys and workshops with users and non-users of the system in June 2021. The purpose was to gather genuine and independently assessed views of the performance and functionality of the system.
- 4 Meanwhile, DHCW completed an internal Lessons Learned review in October 2021 that considered how the WCCIS contracting framework could have been strengthened.
- 5 An updated business case for WCCIS has not yet been produced but the Welsh Government has nevertheless committed some further central funding. The Strategic Review has also now recommended that the business case be updated. The National Programme Team has noted that further work is now needed following the Strategic Review to set out the technical and commercial strategy and associated costs and benefits to inform a revision of the business case.
- 6 The remainder of this update provides further detail about the actions set out above.

General update on progress since my report

Strategy and contracting

DHCW Lessons Learned review – the WCCIS contracting framework

- 7 The key lessons learned identified by DHCW's review were:
 - a phased approach should have been built into the contract at the outset as a default aspect for health boards to allow them flexibility for them to implement at their own pace.
 - a clear plan should have set out the approach to service and contract management arrangements during the procurement

¹ The SROs are the Chief Executive of Powys Teaching Health Board and the Director of Social Services and Housing at Caerphilly County Borough Council.

along with a review process built in. This would have ensured roles and responsibilities were clearly understood across the programme.

- national standards could have been agreed at the contract specification stage.
- all organisations with contractual obligations should have had access to the contractual agreement and documentation.
- an overview of the contract and training should have been provided to all key stakeholders so that the key terms, obligations and relationships set out in the contract were understood.
- all parties should have had read access to contractual documentation in a central location. There should have been a flow of information between the National Programme Team and local organisations to ensure consistency and transparency to support management of contract delivery and supplier relationships.
- although a financial discount had been achieved on the large-scale purchase of licences to use the system, delays in implementing the system mean that the full benefit of that discount has not been achieved to date. This reflects some of my own observations about value for money risks in the contractual framework, which I noted had also needed to evolve over time for various reasons.

The programme assurance review

- 8 The programme assurance review found that while the overall objective of the original March 2015 business case for WCCIS remained valid – to achieve a shared electronic record across health and social care – it was unclear how the objective would be realised. The review recognised that much of the challenge facing successful delivery of the programme’s overall objective was drawn out by my own report in October 2020. The review recommended that the SROs should consider a formal review and ‘reset’ for the programme.

The Strategic Review

- 9 The Strategic Review's recommendations, which the programme SROs have accepted and that reflect many of the challenges set out in my report, concerned:
- stabilising the system so that performance and user experience is improved.
 - 'descoping' some areas of the current programme such as the work on national data standards and considering transferring responsibility for its delivery to other programmes within Digital Health and Care Wales.
 - simplifying the programme by transitioning the operational service management of the system away from the National Programme Team to other DHCW functions.
 - 'course correcting' the programme to enable it to focus on its key aim. This will include reviewing contractual and commercial arrangements and updating the business case.
 - resetting the programme so that all documentation, ways of working and governance are reviewed and refreshed.
 - creating a 'technology road map' that supports standards based inter-operability between WCCIS and other systems within health and social care.
 - standardising the approach to the roadmap by signing up to an agreed set out governing design principles so all work has a common objective and design correlates with relevant national digital architectures and standards.
 - improving collaboration between stakeholders.
- 10 A programme of work is now underway to deliver on the recommendations. The programme SROs have also initiated a further programme review process scheduled for November 2022.

Roll out

- 11 I reported previously that estimated dates from the March 2015 business case, which were also reflected in the original contractual documents, suggested all 22 local authorities and 7 health boards would be using the system by December 2018. At the time of my report, 19 organisations were using WCCIS or had signed deployment orders, with four in active negotiation and six yet to commit. Of the 19 organisations, 13 local authorities and two health boards had gone live.
- 12 Deployment orders for individual organisations include common elements but can be tailored and with organisations having been able to commission additional functionality beyond that provided for in the original contract. However, even within the common elements, it remains the case that 'live' can mean different things as organisations can choose which elements of the available functionality they use and how widely they deploy the system. My report emphasised that the different approaches to implementation mean that it is difficult to realise some of the information sharing and integrated working benefits that the system was expected to support.
- 13 As of 31 May 2022, a further two local authorities that had signed deployment orders at the time of my report have gone live – Swansea Council and Conwy County Borough Council. We have updated our [interactive data tool](#) which provides further detail on the roll-out position across all 29 organisations. However, the Strategic Review highlighted that there are also at least two local authorities that are actively seeking to end their WCCIS contracts.
- 14 No further health boards have gone live since my report, although Cwm Taf Morgannwg University Health Board signed a deployment order in November 2021. The estimated go-live date now that the deployment order has been signed is yet to be agreed. While not yet live, some health board staff are accessing the system via local authority user licenses. As at the time of my report, the Health Board intends to implement the system in mental health services first.

- 15 At the time of my report, two health boards had signed deployment orders but were still working towards go live dates.
- Aneurin Bevan University Health Board signed a deployment order in March 2018. The first phase of implementation in mental health services was scheduled for June 2019 but this date was not met. A revised date for mental health services, along with the addition of learning disabilities, was scheduled for November 2021. This date was not met due to ongoing stability issues with the system. A further revised date for mental health services and learning disabilities, which was also expected to include mobile functionality, was scheduled for the end of March 2022. However, this date was also not met. The current target for first phase implementation is August 2022, but this will not include mobile functionality at that point.
 - After signing a deployment order in March 2016, Betsi Cadwaladr University Health Board had an initial go-live date of April 2017 for a phased implementation starting with mental health services. The date was not met, and the health board then discussed with the supplier an initial small-scale prototype implementation in its community nursing and therapies teams with a planned start date in November 2021, but this has now been delayed until September 2022.

Costs

The overall picture

- 16 My report provided an overview of the £30.16 million in central support costs spent or committed through to March 2022. This figure comprised of:
- £8.41 million – capital costs for software development, licenses, hardware and network infrastructure.
 - £8.62 million – national programme management support.
 - £13.13 million – support for health boards and local authorities for implementation and roll-out and related service transformation.

- 17 The final outturn figure to March 2022 has remained at around £30 million, but with some changes in the profile of these costs and some of the software development costs rolling forward beyond March 2022. The Welsh Government has also now committed at least a further £8.31 million in total for national programme support (£7.15 million) and support for health board and local authorities (£1.16 million) to accelerate implementation for 2022-23 to 2024-25. The Welsh Government has agreed that this figure may increase to up to £12 million if required.
- 18 The central support costs figure excluded local implementation costs and service charges met from organisations' own budgets and wider opportunity costs associated with the overall governance arrangements for WCCIS implementation and roll-out. We had been unable to arrive at a reliable overall estimate of local implementation costs met from organisations' own budgets, although it was apparent that these ran into several millions of pounds.
- 19 To the end of June 2020, those organisations that had progressed with implementation to the point of paying service charges had paid a total of £2.56 million to the system supplier. The overall extent to which this was new expenditure compared with the cost of previous systems was not clear. However, some organisations were realising modest savings compared with the cost of previous systems. By the end of March 2022, overall service charge payments had increased to £4.82 million.

Capital costs

- 20 My report set out that the capital costs included the Welsh Government's approval, in December 2019 of additional capital grant funding from its Digital Priorities Investment Fund. The Welsh Government allocated £1.0 million for a planned central hardware refresh and £0.8 million for software development. The final cost for the central hardware refresh was £1.93 million, which the Welsh Government met from the Digital Priorities Investment Fund.
- 21 The £0.8 million approved for software development included £0.47 million to cover development costs within the original scope of the business case and contract. The remainder was for enhancements that were not within the original scope. At the time of my report, the latest estimate of those costs following commercial negotiation was £1.12 million. My report set out the expectation that deploying organisations would need to decide on the affordability and value for

money of the remaining enhancements not covered by the Welsh Government funding.

- 22 Since my report, the National Programme Team has advised that some of the software requirements from the original scope are no longer needed/or have been overtaken by other developments or cannot be delivered. Work is still ongoing to finalise what the final cost for delivery of the remaining developments costs and additional enhancements will be. The work was due to be completed by end of March 2022 but will now be incorporated into the programme of work flowing from the Strategic Review.
- 23 As of February 2022, £0.72 million of the £0.80 million previously approved for software development had been spent, mostly covering enhancements outside of the original contract scope.
- 24 Due to the additional cost associated with the central hardware refresh, the Welsh Government had committed a total of £9.34 million of capital grant funding to the end of March 2022. While this is still within the original March 2015 business case estimate of £9.89 million, the total costs have not yet been finalised. There is no further Welsh Government capital funding currently planned between 2022-23 and 2024-25.

National programme support costs

- 25 The £8.62 allocated for national programme management support to March 2022 came from a mix of direct Welsh Government funding and existing budgets for NWIS (and now Digital Health and Care Wales). This figure was around £1.7 million higher than estimated in the March 2015 business case for the same period.
- 26 Actual reported expenditure to March 2022 was £8.27 million, although as noted above the Welsh Government has committed at least a further £7.15 million for the period 2022-23 to 2024-25.

Support to health boards and local authorities

- 27 My report set out the sorts of costs organisations might incur to support local implementation including, for example: data cleansing, testing and migration; tablets/laptops to support mobile working; additional/upgraded hardware and software; local support desks and staff costs. My report noted that the March 2015 business case had estimated that these costs would total £2.58 million, compared with the £13.13 million that the Welsh Government had committed at the

time of my report² to support local implementation and roll-out and related service transformation³.

- 28 In February 2021, the Welsh Government allocated a further £2 million from its Digital Priorities Investment Fund to support local authority implementation during 2021-22. As at March 2022, a total of £12.44 million had been spent by local authorities and health boards. Despite the additional £2 million, this figure has come in below the £13.13 million commitment I reported previously because of an underspend by health boards.
- 29 As noted above, the Welsh Government has also committed at least a further £1.16 million for health boards and local authorities for the period 2022-23 to 2024-25 for health boards and local authorities.

Outstanding functionality

- 30 My report highlighted that, under the contract, full system functionality was expected to have been delivered before the end of 2015 but that key aspects of the expected functionality had been significantly delayed. This included certain enhancements to the original contractual requirements. The estimate at the time of my report was that the remaining updates would be delivered on a phased basis through to the end of 2021. Areas where work was still needed included Welsh-language requirements, mobile functionality and interfaces with other NHS Wales systems.
- 31 A pilot for mobile functionality was scheduled before the end of 2020. Following the publication of my report, the Welsh Government reported to the Public Accounts Committee that the pilot had been delayed by the ongoing impact of the COVID-19 pandemic and would be available by March 2021. However, due to issues with the stability of the system, the pilot was cancelled. There was then a revised plan to rollout mobile functionality as a national product by the end of

² This included committed funding for health boards to March 2022 but for local authorities only up to March 2021.

³ My report noted that the National Programme Team had emphasised that the activity that this funding supports extends beyond the scope of the original business case, including wider service transformation work related to WCCIS. The funding has been distributed through Regional Partnership Boards.

February 2022, but this date was also not met. Testing is underway and the plan is now for a staggered release, starting with a pilot phase in Hywel Dda University Health Board and Aneurin Bevan University Health Board in October 2022 before the mobile functionality is made more widely available. The staggered release is intended to help manage the additional load on the system and prevent further performance issues. We now understand that only 11 out of 29 organisations intend to use the mobile functionality when it is available.

- 32 Some of the required interfaces with other NHS Wales systems were identified in the original scope of the contract, while others were agreed in 2019 as enhancements to the 2015 contract. In October 2020, of the 16 interfaces agreed, only two were live. It was estimated that the remaining interfaces would be delivered on a phased basis by the end of December 2021.
- 33 The latest position is that 12 of the 14 remaining national interfaces are currently being developed with Aneurin Bevan University Health Board. Some are scheduled for implementation in October 2022 and others by the end of December 2022. Once they have been successfully implemented in the Health Board, they will be available for all other organisations to use. Discussions on timescales for the remaining two interfaces have not yet begun.
- 34 Some key aspects of the functionality expected to meet Welsh-language requirements set out in the original contract that were not available when I reported also continue to remain unavailable. Currently there is no timescale for when this will be delivered, and it has not been a recent priority for the programme ahead of other issues.

System performance

- 35 My report outlined that there had been significant ongoing performance issues with the system. Concerns due to system performance issues, including risks to staff and service users, had also been raised in some local reporting by Care Inspectorate Wales and Healthcare Inspectorate Wales.
- 36 I recommended that the Welsh Government should pull together a clear national picture on feedback from front-line users about the performance and general functionality of the system. In response, the Welsh Government commissioned a user survey, a non-user survey⁴ and held a national workshop in June 2021.
- 37 Although the response rate for the user survey was not as high as the Welsh Government would have liked, it accepted that the findings were broadly representative of the WCCIS user base⁵ and recognised there were some serious performance issues that needed to be addressed.
- 38 Overall, the system was found to be having a more negative, rather than a positive, impact on most users' ability to do their work. For a large proportion of users, the system was not able to support integrated working between health and social care and realise its intended benefits.
- 39 There were further significant performance and stability problems following planned migration to a new version of the underlying platform for the system, resulting in the system being unavailable altogether for certain periods during October and November 2021. These issues continued to some extent into early 2022 before being resolved in February 2022. We understand that since this time the system has stabilised and there have not been any significant performance issues or outages. The National Programme Team plans regular user surveys as part of future programme engagement work but no dates for this have yet been set.

⁴ The Welsh Government also commissioned a separate non-user survey but received only 20 responses.

⁵ 1,252 people completed the user survey based on a total population of 13,803 potential users in May 2021.

Data standards

- 40 My report highlighted how changes to programme governance structures, including a new national Information Management Board, had been intended to accelerate progress on national data standards which are key to realising some of the benefits of WCCIS. Work on developing national data standards has continued but is still not complete. As noted above, DHCW's contracting lessons learned review, suggested that local authorities and health boards could have agreed a set of common data standards before the contracting tendering process. This may have strengthened support for the programme and incentivised adoption.
- 41 Recognising the complexity of developing national data standards, the Strategic Review recommended that the data standards work is 'descoped' from the WCCIS programme. Discussions are currently ongoing with Digital Health and Care Wales to decide where this work would best sit.

Benefits realisation and reporting

- 42 The arrangements for reporting the benefits from WCCIS roll-out have been the subject of discussion and review from the start of the WCCIS programme. At the time of my report, work was still ongoing to develop a suitable reporting framework. This remains the case.
- 43 As part of the expectations that went with some of its funding support, the Welsh Government was expecting the National Programme Team to produce a comprehensive annual report on the progress of the programme, starting with the period to the end of March 2020. The first report had been due by the end of April 2020, but at the time of writing my report completion was delayed by the impact of COVID-19. To date no annual reports have been produced, although the Welsh Government has been receiving quarterly updates from the National Programme Team. The Welsh Government has now commissioned the consultants who completed the Strategic Review to prepare broader annual reports, but for 2020-21 and 2021-22 only.
- 44 In November 2021, the National Programme Team finalised a benefits realisation report. The report recognised that to date the organisations that had commissioned WCCIS had done so largely to replace older systems that were reaching their contract end dates. It noted that while this has provided benefits of efficiency in procurement costs and timescales and laid the foundation to enable

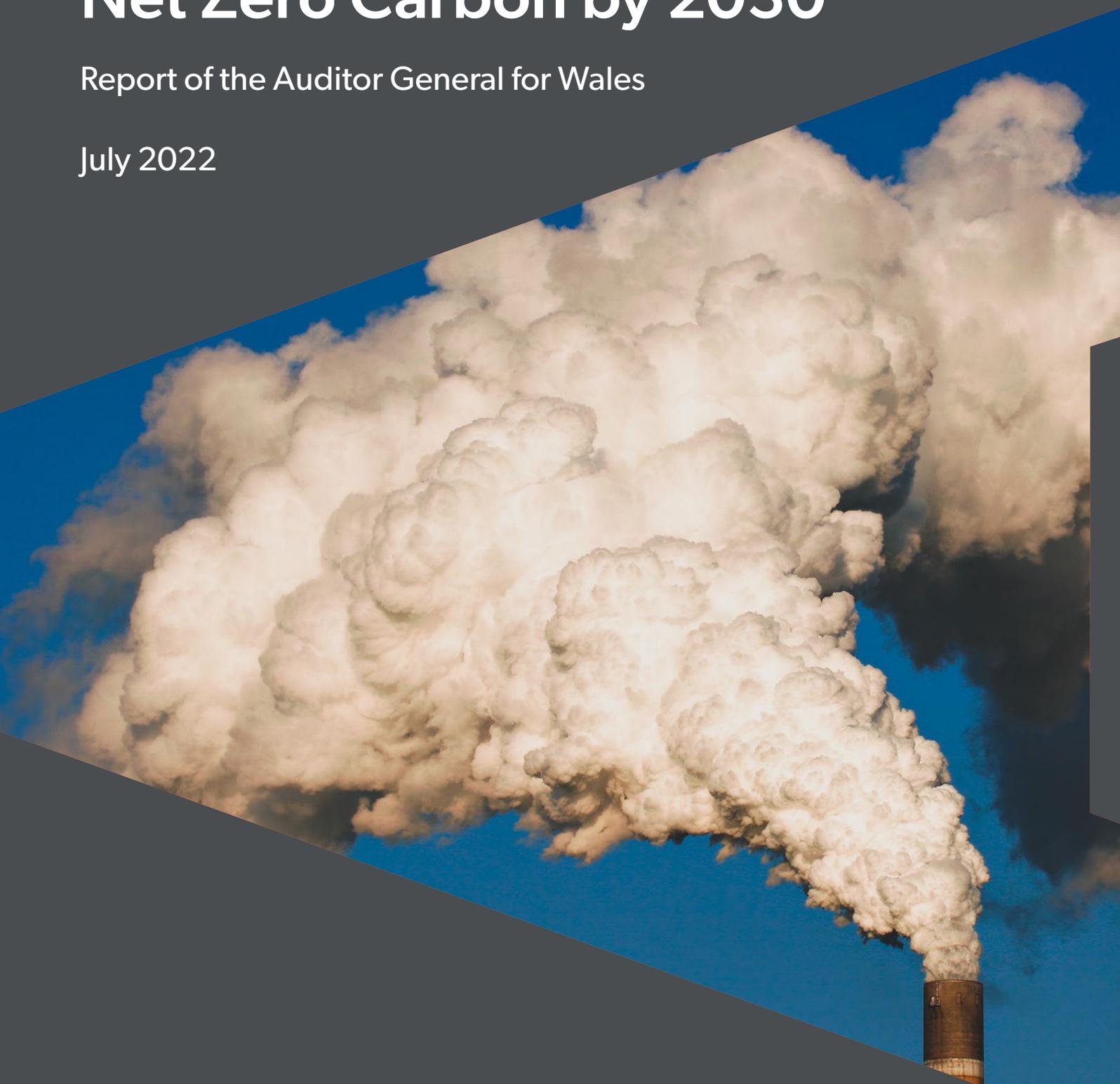
integration as other organisations deploy WCCIS, the ‘patchwork’ implementation means that realisation of benefits from integration across service and organisational boundaries has been slower than anticipated. This largely corresponds with the conclusions in my own report.

- 45 The benefits realisation report made several recommendations. In summary, they included ensuring that the benefits of the programme align with any refreshed vision or purpose for the programme following the Strategic Review. It also recommended that a review and updating of the benefits roadmap, definitions, metrics and baselines be undertaken in the context of the outcomes of the Strategic Review along with the establishment of a Benefits Management Community of Interest.

Public Sector Readiness for Net Zero Carbon by 2030

Report of the Auditor General for Wales

July 2022



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Mae'r ddogfen hon hefyd ar gael yn Gymraeg.

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Detailed report

Background

- 1 Climate change is one of the world's defining challenges and it requires immediate action from everyone. A landmark [report](#) by the United Nations in August 2021 said that human activity is changing our climate in unprecedented ways and that drastic reductions in carbon emissions are necessary.
- 2 The latest climate projections for Wales show an increased chance of milder, wetter winters and hotter, drier summers, rising sea levels and an increase in the frequency and intensity of extreme weather events. The implications are clearly stark.
- 3 A crucial way to mitigate the impacts of climate change is to reduce carbon emissions. In March 2021, following advice from the Climate Change Committee¹ in December 2020, the Welsh Government set new [targets](#) for a 63% carbon reduction by 2030, an 89% reduction by 2040, and a 100% reduction by 2050². In addition, the Welsh Government set out a more challenging collective ambition for the Welsh public sector³ to achieve net zero carbon by 2030 (the 2030 collective ambition).
- 4 In June 2021, the Welsh Government published its [Programme for Government 2021-2026](#) which puts tackling the climate and nature emergencies at the heart of the new government. The Programme for Government also makes a series of commitments to embed a response to climate change in everything the Welsh Government does.

1 The Climate Change Committee (CCC) is an independent, statutory body established under the Climate Change Act 2008. Its role is to advise the UK governments on emissions targets and to report on progress made in reducing greenhouse gas emissions and preparing for and adapting to the impacts of climate change.

2 Net zero does not mean eliminating greenhouse gas emissions but balancing the greenhouse gas emissions with the amount of gases being removed from the atmosphere.

3 The Welsh Government's definition of the 'public sector' in this case covers 65 bodies as set out in Appendix 2 of the [Welsh Government, Public sector net zero data: baseline and recommendations, June 2022](#).

- 5 The Welsh Government has also published Net zero carbon status by 2030: A route map for decarbonisation across the Welsh public sector (the public sector route map) to support the Welsh public sector in achieving the 2030 collective ambition. Alongside the public sector route map, the Welsh Government published the net zero reporting guide and associated spreadsheet to allow the public sector to capture and report emissions on a consistent basis.
- 6 The Auditor General has committed to carrying out a long-term programme of work on climate change. Our first piece of work is a baseline review that asks: '**How is the public sector preparing to achieve the Welsh Government's collective ambition for a net zero public sector by 2030?**'. To inform the baseline review, 48 public bodies, including the Welsh Government, completed a call for evidence. **Appendix 1** explains our audit approach and methods.
- 7 We are publishing two reports to share our findings:
 - **this key findings report:** this report targets senior leaders and those with scrutiny roles in public bodies, with the aim of inspiring them to increase the pace of their work on achieving the 2030 collective ambition. We have included questions at the end of each section of this report for organisations to reflect on. While these questions are not exhaustive, they provide important pointers for organisations to consider.
 - **evidence report – to follow:** a report that will provide more detailed findings and data from the call for evidence and our wider work.

Overall conclusion

- 8 There is clear uncertainty about whether the public sector will meet its 2030 collective ambition. Our work identifies significant, common barriers to progress that public bodies must collectively address to meet the ambition of a net zero public sector by 2030. And while public bodies are demonstrating commitment to carbon reduction, they must now significantly ramp up their activities, increase collaboration and place decarbonisation at the heart of their day-to-day operations and decisions. Organisations need to be bold and innovative and share experiences of their successes and failures. The Auditor General will not criticise organisations for taking well-managed risks to address this unprecedented challenge.
- 9 We have set out five calls for action for organisations to tackle the common barriers to decarbonisation in the public sector. These are:



- 1** Strengthen your leadership and demonstrate your collective responsibility through effective collaboration



- 2** Clarify your strategic direction and increase your pace of implementation



- 3** Get to grips with the finances you need



- 4** Know your skills gaps and increase your capacity



- 5** Improve data quality and monitoring to support your decision making

- 10 We are not making specific recommendations given the high-level nature of our review. However, we encourage public bodies to consider the messages in this report, and through their internal governance structures, set out publicly how they intend to respond to the calls for action.

Calls for action



Strengthen your leadership and demonstrate your collective responsibility through effective collaboration

- 11 The Welsh Government showed leadership when it declared a climate emergency in 2019. Many of the other public bodies have followed suit, for example, 18 out of 22 Welsh councils have now declared a climate emergency.
- 12 The Welsh Government also demonstrated leadership when it set the 2030 collective ambition and in May 2021 when it established a new Ministerial portfolio for climate change. A related change to the Welsh Government's organisational structure came into effect from 1 April 2022.
- 13 We have found considerable activity by public bodies, supporting the move towards decarbonisation. So, public bodies are clearly taking this agenda seriously.
- 14 Despite this, they must do more because there is considerable uncertainty (and clear doubt from some organisations) about whether the 2030 collective ambition will be met. In the NHS, we found uncertainty that even a 34% reduction in emissions would be achieved across that sector⁴. Bodies told us about significant barriers to progress in decarbonising, such as difficulties in translating strategy into action, uncertainty about finances, a lack of skills and capacity, and issues with decarbonisation data. These matters are discussed throughout this report.
- 15 Now is the time for bold leadership. Public bodies must reduce carbon emissions from their estates, from their services, and from the goods and services they procure. On top of that, they must adopt a wider leadership role in championing the decarbonisation agenda in all sectors within the communities they serve to work towards a 'just transition'⁵.
- 16 Public bodies will need to demonstrate stronger collective leadership because collaboration between organisations will be critical to achieving the 2030 collective ambition. Some respondents told us that a wholesale change of thinking is required, with a more co-ordinated and joined-up approach across the public sector.

4 The NHS Wales Decarbonisation Strategic Delivery Plan sets out 46 initiatives that are estimated to reduce carbon emissions by 34% by 2030.

5 A 'just transition' means taking action on climate change and greening the economy in a way that is as fair and inclusive as possible to everyone concerned. Policy 1 in [Net Zero Wales Carbon Budget 2 \(2021-2025\)](#) sets out the Welsh Government's views on a just transition.

- 17 Several cross-organisational panels and programme boards already exist to collaborate on climate issues including decarbonisation. And while public bodies expressed largely positive views about the way they are collaborating, there was also recognition that these efforts need to be ramped up. There is a collective responsibility on the public sector to make existing structures work. Public bodies also need to consider what additional collaboration is needed within sectors and across the public sector.
- 18 Senior leaders must do more to demonstrate they fully grasp the urgency and scale of the challenge and clearly identify this as a top priority for their organisation if they are to achieve their ambitions. Decarbonisation (and wider climate risks) must be at the core of day-to-day business decisions and operations. This agenda must be integrated into all services and operations, so that decarbonisation is delivered alongside other outcomes.
- 19 The frameworks provided by the Well-being of Future Generations (Wales) Act 2015 (including public services boards and the setting of well-being objectives) can be used to help organisations decarbonise. Application of the sustainable development principle in key areas such as procurement, workforce planning and finance will also help delivery of the decarbonisation agenda.
- 20 Those charged with governance and scrutiny roles in individual organisations need to support the direction of travel while at the same time challenging whether enough is being done.

Questions that senior leaders and those who scrutinise them may want to ask

- Are we treating the climate crisis and the need to decarbonise as a real 'emergency'?
- Can we demonstrate that decarbonisation is at the core of day-to-day business decisions and operations?
- Is the urgency and scale of the challenge well communicated by senior leaders and understood throughout our organisation?
- Do we have specific and effective scrutiny and governance arrangements for managing the journey to net zero?
- Do we understand the main barriers to progress and how well are we collaborating to overcome them?

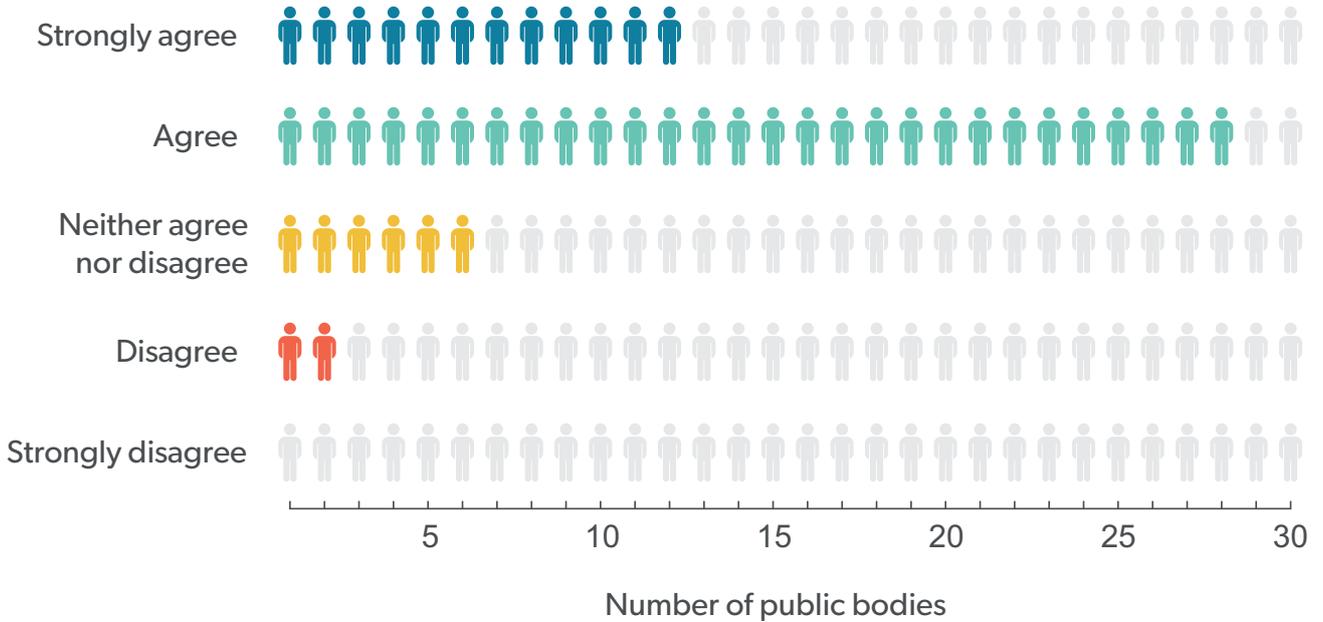




Clarify your strategic direction and increase your pace of implementation

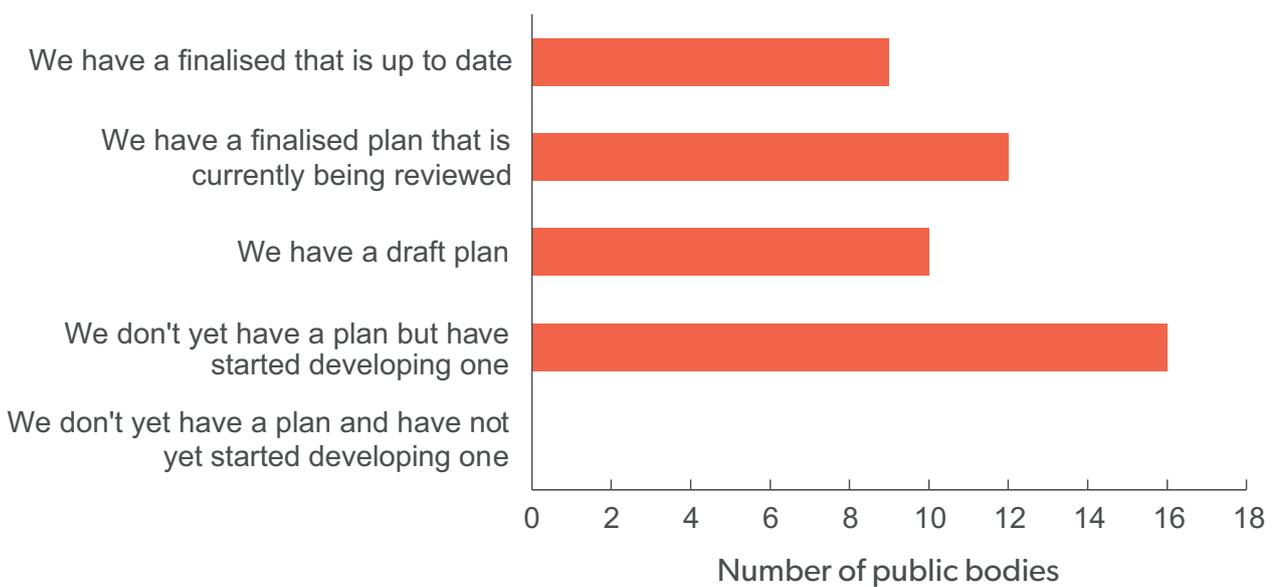
- 21 To deliver the 2030 collective ambition, it is essential that Wales has clear, joined-up, integrated strategies across the public sector. The action plans resulting from those strategies will also have to be implemented at pace.
- 22 In response to our call for evidence, public bodies were generally positive about the strategic direction set out by the Welsh Government and that it had been communicated well through the [public sector route map \(Appendix 3\)](#). In response to our question about the extent to which they were using the public sector route map, most public bodies said they were using it, to varying degrees, and only five said they were not.
- 23 Despite generally positive views about the national strategic direction, public bodies want more help to translate the strategy into action. Several organisations told us that while the public sector route map provides a high-level template, they need more clarity, support and guidance on how to decarbonise.
- 24 The Welsh Government told us that it deliberately designed the public sector route map to be a high-level framework to assist public bodies in developing local solutions based on individual circumstances, rather than a one-size-fits-all approach. The Welsh Government is providing other forms of central assistance on decarbonisation, including support through the [Welsh Government Energy Service](#), grant funding for various programmes and funding of the Welsh Local Government Association [transition and recovery support programme](#).
- 25 Some sector-specific guidance is available to support public bodies to translate the vision into action. For the NHS, the Carbon Trust and the NHS Wales Shared Services Partnership have set out more detailed actions in the [NHS Decarbonisation Strategic Delivery Plan](#). In local government, the Welsh Local Government Association is developing more tailored support and guidance for councils.
- 26 Overall, our work has shown that public bodies are at very different stages in setting out their action plans for decarbonisation. While **Exhibit 1** shows most public bodies feel they have set a clear strategic direction, **Exhibit 2** shows that just over a third of organisations did not have a decarbonisation plan at the time of our call for evidence. All organisations had at least started to develop their plan, and under Welsh Government policy they have until April 2023 to develop one.

Exhibit 1: public bodies' responses to the statement, 'Our organisation has set a clear strategic direction to support the achievement of the 2030 carbon reduction targets'



Source: Audit Wales call for evidence

Exhibit 2: status of public bodies' action plans



Note: One public body did not respond to this question.

Source: Audit Wales call for evidence

- 27 The public sector route map sets out milestones for 2021-22, during which the Welsh Government expects the public sector to be 'moving up a gear'. The Welsh Government considers there has been good progress and the public sector is picking up the pace. However, the Welsh Government recognises there is still significant work to be done and to date, the public sector has not fully achieved the 'moving up a gear' milestones.

Questions that senior leaders and those who scrutinise them may want to ask

- Have we set out a clear strategic approach and action plan for decarbonisation? If not, why not?
- Have we given due consideration to recommendations from the Future Generations Commissioner on decarbonisation, including those within the Future Generations Report 2020⁶?
- Are we involving our staff, stakeholders and citizens in the development and delivery of our strategic approach?
- Have we collaborated with others to develop our overall approach?
- How will our approach to decarbonisation help us deliver against other strategic objectives (including well-being objectives) as well as meeting the 2030 collective ambition?
- Do our other corporate strategies, policies and operations reflect the strategic approach we have set out for decarbonisation?
- Does our action plan set out clear milestones that align with the 2030 collective ambition and is it being implemented at sufficient pace?



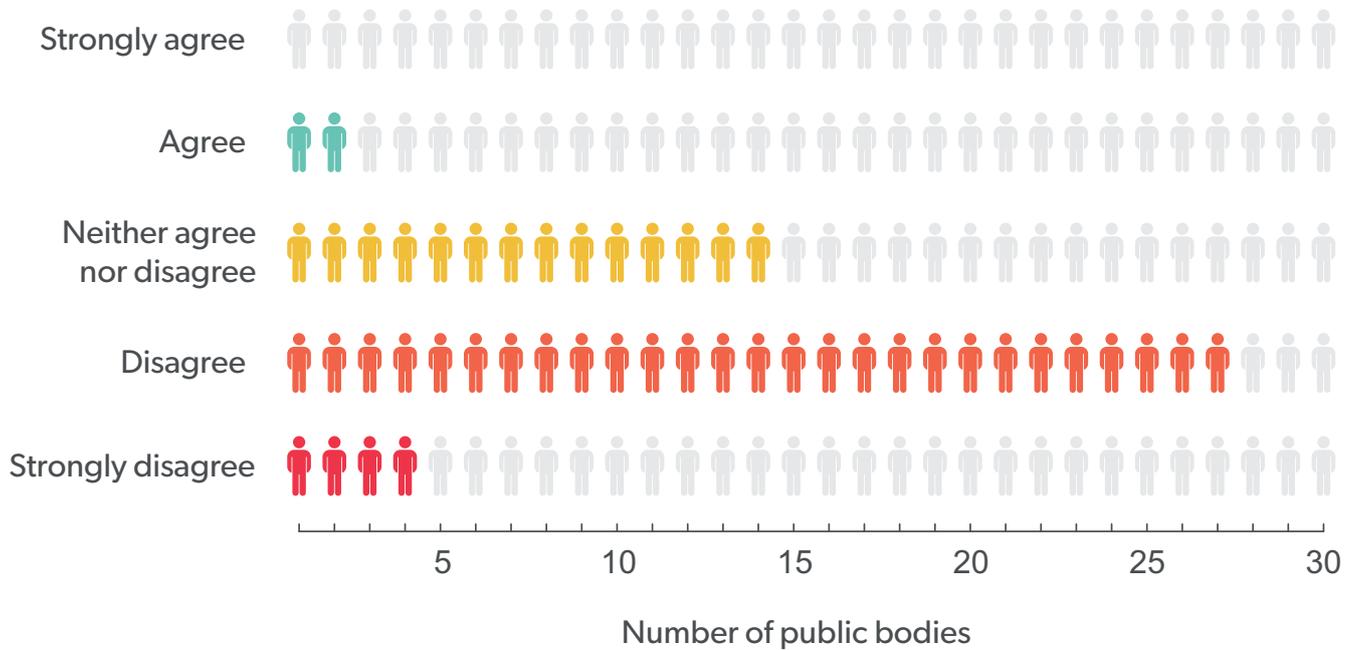
6 [The Future Generations Commissioner for Wales, Future Generations Report 2020, May 2020.](#)



Get to grips with the finances you need

- 28 Public bodies need to plan their finances in such a way that they can deliver their decarbonisation strategies and action plans. This will require long-term planning because decarbonisation will need investment for many years. It will also require immediate expenditure because if the 2030 collective ambition is to be met, urgent action is essential.
- 29 Public bodies recognised that significant investment in decarbonisation will be required, particularly for upfront infrastructure costs. But they were uncertain about where the funding for this investment would come from. The Welsh Government is providing funding to public bodies in various ways, but it has said it cannot fund everything. Public bodies will therefore need to think carefully about how they can use their existing funding in different ways, explore potential additional funding opportunities and consider how they might share costs with partner organisations.
- 30 Overall, public bodies told us that finances are a significant barrier to achieving the 2030 collective ambition. This is because of uncertainty in relation to the long-term additional funding they will have available to them, and about difficulties in getting to grips with the costs of decarbonising. **Exhibit 3** shows that most public bodies have not fully assessed the financial implications of the 2030 collective ambition. In some cases, this is because they have not yet set out a clear set of actions and activities to achieve net zero.

Exhibit 3: public bodies' responses to the statement, 'Our organisation has fully assessed the financial implications of meeting the 2030 carbon reduction targets'



Note: One public body did not respond to this question.

Source: Audit Wales call for evidence

Questions that senior leaders and those who scrutinise them may want to ask

- Do we know what we are currently spending on activities to help meet the 2030 collective ambition?
- Do we know how much we would need to spend to help achieve the 2030 collective ambition?
- How are we deciding how much to spend on decarbonisation?
- If we have not yet assessed the financial implications of the 2030 collective ambition, do we understand why we have been unable to?
- What are we doing to collaborate with others, to understand the financial implications, and to share costs?
- Do our budgets and expenditure reflect the need to reduce carbon emissions urgently?
- Are we setting out a good level of detail in our financial statements in relation to decarbonisation spending?
(See [our blog](#) on this matter).





Know your skills gaps and increase your capacity

- 31 Within public bodies it is everyone's responsibility to take action towards the 2030 collective ambition. Delivering that ambition will require public bodies to have staff in place with some specialist expertise. Our work found enthusiasm to deliver, but we also found widespread capacity issues and skills gaps. Skills gaps in relation to decarbonisation are not unique and are symptomatic of a wider challenge across the public sector. For example, in our [Picture of Public Services 2021](#) report, we highlight that staffing numbers have fallen and skills deficits have emerged.
- 32 Public bodies told us their resources are stretched in delivering their core services, and they are lacking specialist skills in carbon reduction and in monitoring carbon emissions. In addition, the complex nature of the field means that bodies are competing for limited expertise and knowledge.
- 33 Public bodies need to understand the staff capacity and skills they have in place through robust workforce planning. Training will play a crucial role in ensuring staff understand their decarbonisation responsibilities and are best equipped to deal with the task at hand. There is also an opportunity to share the knowledge, expertise and capacity that exists within the public sector as well as the private and third sectors.

Questions that senior leaders and those who scrutinise them may want to ask

- Do we know what skills are needed, both now and in the future, to ensure we can deliver against the 2030 collective ambition?
- Do we have a plan in place to deal with any identified skills and capacity gaps through training, recruitment or working with peers and stakeholders to share resources and expertise?





Improve data quality and monitoring to support your decision making

- 34 Public bodies need to understand where their emissions are coming from so they can check if they are making progress. We found that data issues are a major barrier to having a shared understanding of the problem and to taking strategic decisions about the solutions.
- 35 Carbon emissions monitoring and reporting is a complex and rapidly developing area worldwide. The Welsh Government has published a common reporting methodology for public bodies to report their emissions through the [Welsh Public Sector Net Zero Reporting Guide](#) and the net zero reporting spreadsheet. In doing so, the Welsh Government is trying new ways of improving emissions data. Welsh public bodies responded by putting new arrangements in place and by submitting their first set of annual data in October 2021.
- 36 The Welsh Government commissioned independent consultants, to review the first submission of emissions data from public bodies and in June 2022, the Welsh Government published the consultancy report in full. The report⁷ provides the first estimate of the full range of emissions by the public sector in delivering services for the people of Wales. The report states that the figures include significant uncertainty, particularly in relation to supply chain emissions, and that the data has not been thoroughly audited. The figures suggest emissions across Wales for the public sector reduced by 5% between 2019-20 and 2020-21.
- 37 In response to our call for evidence, public bodies recognised the usefulness of having a common reporting methodology. However, some responses pointed to concerns over some calculation methods, particularly regarding supply chain and land use, and called for further clarity of definitions to ensure consistent interpretation and reporting. Some responses also noted that existing systems were not able to capture the required data, and had to be updated, or new systems had to be put into place. This was often time consuming and resource intensive. NHS bodies also raised concerns about duplication with existing reporting arrangements on carbon emissions.

⁷ [See Footnote 3.](#)

- 38 It is important to get the data right because this information will underpin decision making and monitoring of progress for decades to come. However, we acknowledge this is the first year of the new arrangements to report a complex issue and the Welsh Government is committed to developing the guidance further to address the issues identified in the consultancy report (**paragraph 36**) and to reflect wider feedback. The Welsh Government published revised [reporting guidance](#) in July 2022. We also acknowledge that while there are concerns about supply chain data, the requirement to report this data reinforces the findings from previous studies that show the importance of reducing emissions from procurement and the supply chain⁸.

Questions that senior leaders and those who scrutinise them may want to ask

- Are we playing our part in building a system that will provide consistent, accurate, high-quality data on carbon emissions across the public sector to support transparency and scrutiny?
- Do we know what the existing data is telling us and what further data do we need to support decision making?
- Based on our understanding of our own data, do we have plans in place to take appropriate action?
- How can we improve our understanding of emissions resulting from our supply chain and relevant third parties?



⁸ [Welsh Government, A route map for decarbonisation across the Welsh public sector \(Appendix A\), May 2021.](#)



Appendices

- 1 Audit approach and methods**
- 2 Legislative and policy framework underpinning decarbonisation**
- 3 The public sector route map and reporting guide**

1 Audit approach and methods

In November 2021, we issued a call for evidence to 48 public bodies, asking questions about their baseline position in achieving the 2030 collective ambition. Most public bodies responded in the period December 2021 to January 2022. We sent the call for evidence to the bodies covered by the [Well-being of Future Generations \(Wales\) Act 2015](#) at the time. This included all principal councils, fire and rescue authorities, national park authorities, health boards and NHS trusts, and the larger Welsh Government sponsored bodies.

We also sent the call for evidence to the Welsh Ambulance Services NHS Trust, Digital Health and Care Wales, and Health Education and Improvement Wales to ensure we had a more complete picture across the NHS. We also sent the call for evidence to NHS Wales Shared Services Partnership (NWSSP), which is an independent mutual organisation, owned and directed by NHS Wales, that delivers a range of services for and on behalf of NHS Wales. NWSSP is hosted by and operates under the legal framework of Velindre University NHS Trust, which is itself covered by the Well-being of Future Generations (Wales) Act 2015.

We received responses from all bodies that were sent the call for evidence, although in a small number of instances not all questions were answered. Where questions were not answered by all public bodies, this is set out in a note to each relevant graph.

To inform our work, we held discussions with relevant stakeholders including the Welsh Government, the Office of the Future Generations Commissioner for Wales, representatives of NHS Wales and the Welsh Local Government Association. We also reviewed key documents, including policies and guidance, and other relevant information provided to us by the Welsh Government and other stakeholders.

We did not undertake a detailed review at each of the public bodies. While we have largely relied on what they reported through their call for evidence responses and any supporting documentation, we have also sought to triangulate our findings through discussions with stakeholders and evidence from our wider document and data review. We also shared and discussed our emerging findings at a [public webinar](#) held in May 2022. 109 people from outside Audit Wales attended the webinar, representing a range of public, private and third sector organisations.

As stated earlier in this report, the Auditor General for Wales has committed to a long-term programme of work on climate change. We have already reported on the decarbonisation efforts of [fire and rescue authorities](#), we have begun to review council decarbonisation action plans and we are preparing a report on flood risk management. Following a recent consultation on our future work programme, we are considering our next steps in relation to auditing actions to decarbonise and to adapt to the changes already happening to our climate.

2 Legislative and policy framework underpinning decarbonisation

The graphic below sets out the key legislation, policies and guidance related to decarbonisation and climate change that apply across the Welsh public sector. We refer to sector-specific legislation and policies in the main body of this report where relevant.



April 2016

The Well-being of Future Generations (Wales) Act 2015 came into force and required public bodies covered by the Act to act in accordance with the sustainable development principle. The five ways of working set out in the Act aim to help bodies work together better, avoid repeating past mistakes and tackle long-term challenges.

March 2019

The Welsh Government published the first statutory Low Carbon Delivery Plan, Prosperity for All: A Low Carbon Wales (LCDP1).

November 2019

The Welsh Government published Prosperity for All: A Climate Conscious Wales, its most recent climate adaptation plan.



March 2016

The Environment (Wales) Act 2016 came into force and placed a duty on Welsh Ministers to set targets for reducing greenhouse gas emissions and to set carbon budgets.

July 2017

The Welsh Government set an ambition of achieving a carbon neutral public sector by 2030.

April 2019

The Welsh Government made a Climate Emergency Declaration.



March 2021

Following advice from the Climate Change Committee in December 2020, the Welsh Government set new legal targets for a 63% carbon reduction by 2030, 89% by 2040, and 100% by 2050.

May 2021

The Welsh Government published the [Welsh public sector net zero reporting guide](#) and the [net zero carbon reporting spreadsheet](#). **Appendix 3** provides further detail.



June 2021

The Welsh Government published its [Programme for Government 2021-2026](#) which puts tackling the climate and nature emergencies at the heart of the new government and makes a series of commitments to embed climate change in a number of ways.

July 2021

The Welsh Government published [Net zero carbon status by 2030: A route map for decarbonisation across the Welsh public sector](#). **Appendix 3** provides further detail.



October 2021

The Welsh Government published [Net Zero Wales Carbon Budget 2 \(2021 to 2025\)](#). This sets out specific policies for the public sector, including a target for decarbonisation plans to be in place by March 2023, targets relating to buildings, vehicles and procurement, and development of a new health and social care decarbonisation plan.

July 2022

The Welsh Government published updated versions of the [Welsh public sector net zero reporting guide](#) and the [net zero carbon reporting spreadsheet](#).

3 The public sector route map and reporting guide

To support the public sector to achieve net zero, the Welsh Government published its [public sector route map](#) in July 2021. The route map sets out four priority areas for action: buildings, mobility and transport, procurement, and land use. It also sets out key milestones for the public sector to achieve, which are:



2021-
2022

Moving up a gear: Where understanding the context and what needs to be done is vital, and where action needs to accelerate.



2022-
2026

Well on our way: Where there is an expectation that low carbon is becoming the norm and the public sector is definitely on the way to net zero.



2026-
2030

Achieving our goal: Where choosing zero carbon has become routine, culturally embedded, and self-regulating.

In May 2021, the Welsh Government published the [Welsh Public Sector Net Zero Carbon Reporting Guide](#). The aim of the guide is to develop a universal set of instructions for use by public bodies to assist in meeting the 2030 collective ambition, in particular to:

- **Baseline:** To understand the current situation and quantify organisational emissions and removals for a consistently drawn boundary. And to quantify the likely emission gap to carbon neutral operations by 2030.
- **Identify mitigation potential:** An assessment to identify significant sources of emissions enabling organisations and the public sector to prioritise action needed to move to carbon neutral operations by 2030.
- **Monitor progress:** A need to gather, collate and analyse data to assess whether organisations are on track to achieving their goal of carbon neutrality by 2030.

Alongside the guide, the Welsh Government published the [Net zero carbon reporting spreadsheet](#) for use by public bodies to capture and report their emissions data in a consistent way. The Welsh Government asked public bodies to submit the first data by October 2021 for the 2020-21 financial year. The second submission is required by September 2022 for the 2021-22 financial year.

The guide states that public bodies should report actions to reduce emissions and move to carbon neutral operations by 2030, but the format and narrative of that reporting are not prescribed. The guide does suggest it could be in the form of an annual report on progress against a published action plan or a separate document. It also suggests that management information used in collating an emissions report will provide a good basis for the narrative report. As part of our work, we have not reviewed any narrative reports produced by public bodies, although **paragraphs 34-38** of this report comment on the challenges relating to the carbon emissions data and reporting. Following feedback from public bodies and a review of the first year's data submissions, the Welsh Government published revised reporting guidance in July 2022.



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Review of Unscheduled Care – Project Brief

Background

- 1 The Auditor General has a statutory requirement to satisfy himself that NHS and local councils have proper arrangements in place to secure economy, efficiency, and effectiveness in the use of their resources as set out in Section 17 and Section 61 of the Public Audit Wales Act 2004.
- 2 In April 2022, we published a blog '[Unscheduled Care – a system under real pressure](#)' which described the numerous and significant challenges currently being experienced by the unscheduled care system in Wales. The blog considered the impact these pressures are having on patients and staff, the factors contributing to the pressure and what is being done in response. It also set out the Auditor General's intention to undertake a programme of work that will assess the extent to which the system and its leadership structures are responding to the pressures in the unscheduled system.
- 3 This project brief sets out the main areas of focus for our work on unscheduled care, together with the overall approach and timing of our audit work. Our approach recognises that the unscheduled care system is complex, with many different organisations involved in providing emergency and urgent care and ensuring that the wider system operates effectively and efficiently. Our work comes at a time when the COVID-19 pandemic has had a significant impact on unscheduled care services. While there was an initial easing of pressures on the ambulance service and emergency departments as people stayed home at the beginning of the pandemic, demand has since surpassed the pre-pandemic levels. Pressures within the wider system also means that there are significant challenges discharging patients out of hospital impacting on patient flow, with ambulance handover delays the worst on record and some patients experiencing severe delays in receiving an ambulance response and treatment in emergency departments. More detailed and up-to-date information on how the system is performing across a range of key indicators can be found in the [Unscheduled Care Data Tool](#) that accompanied [our blog](#).

Audit approach

- 4 Our work will allow the Auditor General to answer the overall question: **Does NHS Wales and its partners have effective arrangements for unscheduled care to ensure patients have access to the right care at the right time?**
- 5 Given the complex and interconnecting nature of the issues within the unscheduled care pathway, we will be undertaking the work in three parts:
 - **Part 1 – patient flow out of hospital.** This element of our work will seek to address the following question: **Do health and social care bodies have effective arrangements in place to ensure efficient discharge of medically fit patients out of hospital?**
 - **Part 2 – access to unscheduled care services.** This element of our work will seek to address the following question: **Are health bodies effectively managing the demand for unscheduled care services to reduce unnecessary pressure on the system?**
 - **Part 3 – national arrangements.** This element of our work will seek to address the following question: **Are the national arrangements and leadership structures effectively overseeing, scrutinising, and driving change in the unscheduled care system?**
- 6 **Exhibit 1** sets out the key lines of enquiry we will consider for the different parts of the work.

Exhibit 1: key lines of enquiry

Level one	Level two
<p>Do health and social care bodies have effective arrangements in place to ensure efficient discharge of medically fit patients out of hospital?</p>	<ul style="list-style-type: none"> • Do health and social care bodies have effective plans and procedures in place for discharge out of hospital? • Are patients able to flow through the unscheduled care system in a timely and efficient way? • Are health and social care bodies doing enough to review services relating to discharge out of hospital and apply lessons learned to improve further?
<p>Are health bodies effectively managing the demand for unscheduled care services to reduce unnecessary pressure on the system?</p>	<ul style="list-style-type: none"> • Do health bodies have effective plans in place to manage demand for unscheduled care services? • Are arrangements in place to enable and encourage people to access the right care, in the right place, at the right time, and are these working? • Are health bodies doing enough to review unscheduled care services and apply lessons learned to improve further?

Level one	Level two
<p>Are the national arrangements and leadership structures effectively overseeing, scrutinising and driving change in the unscheduled care system?</p>	<ul style="list-style-type: none"> • Are the national arrangements (including the national programme boards) clearly set out and working as intended? • Are there realistic and ambitious plans in place to respond to the system challenges? • Are the national arrangements (including the Emergency Ambulance Services Committee) leading to improvements?

- 7 All three elements of our work will be based on documentation, observations of relevant forums, and structured interviews with the appropriate people in NHS bodies and local councils, and Welsh Government.
- 8 For our work on patient flow out of hospital, we will also hold workshops with discharge co-ordinators and social care staff, and request and analyse data not already included in the Unscheduled Care Data Tool relating to discharge and social care capacity. Health Boards will also be required to complete a self-assessment against our previous 2017 discharge planning recommendations. Particular attention will be given to the role of the Regional Partnership Boards and the use of additional monies provided by the Welsh Government, for example, the Regional Integration Fund.
- 9 For our work on access to unscheduled care services, we will also look to gather feedback from ambulance crews through workshops and surveys, and review information available to patients via websites and phonelines. Particular attention will be given to how well 111, 'phone first' and 'same day emergency care (SDEC)' arrangements are working in local areas.
- 10 At a national level, we will give particular attention to the newly established Six Goals Board, designed to oversee the delivery of the six goals for urgent and emergency care. We will also include a focus on the role played by the Emergency Ambulance Services Committee.
- 11 We will be undertaking our audit work using a mix of remote and in person working. For any in person work, we will agree this in advance with the relevant contacts and ensure all appropriate risk assessments are undertaken in line with current COVID-19 guidelines.

Timing of our work

- 12 The indicative timescales for the key stages of the audit work are shown in **Exhibit 2**. Where appropriate, we will give interim feedback if issues of concern arise during our work.
- 13 We will keep our delivery arrangements and the timescales under close review and adjust them to avoid unnecessary burden on NHS and local government bodies at a time when services are trying to recover from the impact of the COVID-19 pandemic.

Exhibit 2: indicative timescales for the work

Audit focus	Key stage		
	Set up	Fieldwork	Reporting
Patient flow out of hospital	September 2022	September – November 2022	November – December 2022
Access to unscheduled care services	November 2022	November 2022 – January 2023	January – March 2023
National arrangements	June 2022	June – December 2022	January – March 2023

Reporting our findings

- 14 We will prepare a number of reports as part of this work setting out our findings and any recommendations. With respect to our focus on patient flow out of hospital, we will prepare local reports based on the seven Regional Partnership Board areas reflecting the findings for the respective NHS and local councils. These reports will be supplemented by a short output for individual health boards specifically setting our progress against our previous 2017 discharge planning recommendations, and a summary of key findings for each local council.
- 15 With respect to access to unscheduled care services, we will prepare local reports for individual health boards and the Welsh Ambulance Services NHS Trust. In line with the Audit Wales arrangements for public reporting, we will publish these reports on our website once they have been formally considered by the relevant Board and Scrutiny committees. Note that as part of our wider work programme, we will also be reporting on how the Welsh Ambulance Services NHS Trust is managing its workforce¹
- 16 With respect to our national focus, we will report these in a single national report which may also include a summary of the findings through our local work on patient flow and access to services, where we identify issues of wider relevance to NHS Wales and the 22 local councils. We may consider laying the report before the Senedd in line with the Auditor General's powers set out in Section 145A of the Government of Wales Act 1988.

¹ This work forms part of our all-Wales NHS thematic review of workforce which will be undertaken across all NHS bodies between September 2022 and March 2023.

Other work of note

- 17 We are aware that commentary on the unscheduled care system is a crowded space in Wales with many interested parties. We have been engaging with relevant stakeholders throughout the scoping of our work, including Age Cymru, Older People's Commissioner for Wales, Healthcare Inspectorate Wales, Care Inspectorate Wales, Improvement Cymru and Welsh Government.
- 18 We will continue to engage with key stakeholders during the review to avoid duplication and maximise any opportunities to learn from one another where that may benefit and inform the reviews involved.
- 19 The Auditor General also has a duty under The Well-being of Future Generations (Wales) Act 2015 to carry out examinations of most public bodies that he audits to assess the extent to which they have acted in accordance with the 'sustainable development principle' when setting and taking steps to meet "well-being objectives". Where relevant, we will apply this duty to our review of unscheduled care services. Findings relating to the application of the 'sustainable development principle' will be used to inform the Auditor General's national report that he must produce before each Senedd election.

Audit Wales contacts

- 20 Further information can be obtained from Anne Beegan, Performance Audit Manager (anne.beegan@audit.wales), Fflur Jones, Performance Audit Lead (fflur.jones@audit.wales) and/or Bethan Hopkins, Performance Audit Lead (bethan.hopkins@audit.wales).

Data Protection

- 21 Where we process personal data, this is in accordance with data protection legislation, including the Data Protection Act 2018 and the General Data Protection Regulation. Further information is set out in our fair processing notice attached at **Appendix 1**.

Appendix 1 – Fair Processing Notice

This privacy notice tells you about how the Wales Audit Office processes personal data provided by NHS bodies, local authorities, and Welsh Government in connection with our review of unscheduled care services.

Who we are: The Auditor General for Wales examines how public bodies manage and spend public money, and the Wales Audit Office (WAO) provides staff and resources to enable him to carry out his work.

Data Protection Officer (DPO): Our DPO is Martin Peters, who can be contacted by telephone on 029 20320500 or by email at: infoofficer@audit.wales.

The relevant laws (legal basis): We process personal data in accordance with the Data Protection Act 2018 (DPA) and the General Data Protection Regulation (GDPR). Our lawful basis for processing is the statutory powers and duties under the Public Audit (Wales) Act 2004, the Government of Wales Act 1998, and Well-being of Future Generations (Wales) Act 2015.

Purpose of processing: We are collecting opinions and information to help us carry out our review of unscheduled care services. Some of this information may be about identifiable individuals, which would make it personal information, even though the purpose of our work is not in itself to collect information about identifiable individuals. The information collected will be used for this work and may also be used in our wider statutory audit work.

Who will see the data? The Auditor General and the WAO audit team will have access to the information provided. We may share some information with senior management at the audited bodies involved, and our published reports may include some information. We may share some data with other regulatory bodies for the purpose of their reviews and such information will be processed in accordance with their respective privacy policies.

How long we keep the data? We will keep the information collected, including personal data, for a period of 6 years following publication of our report, or 25 years if published within a report, and we will hold data securely in accordance with our Information Security Policy.

Your rights: You have rights to ask for a copy of the current personal information held about you or to object to data processing that causes unwarranted and substantial damage and distress. Contact the Information Officer, Wales Audit Office, 24 Cathedral Road, Cardiff, CF11 9LJ or email infoofficer@audit.wales.

Our rights: The Auditor General has rights to information, explanation, and assistance under paragraph 17 of schedule 8 Government of Wales Act 2006 and/or section 52 Public Audit (Wales) Act 2004 and/or section 26 of the Local Government (Wales) Measure 2009. It may be a criminal offence, punishable by a fine, for a person to fail to provide information.

The Information Commissioners Office: If you require further information in relation to your rights under data protection law or are dissatisfied with how we are handling your personal data you may contact the Information Commissioner at: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF, or email casework@ico.gsi.gov.uk or telephone 01625 545745.

Consultation on Fee Scales 2023-24

August 2022

How to respond

Please respond by 16 September 2022.

Responses can be sent to the following address:

Fee scales consultation
Audit Wales
24 Cathedral Road
Cardiff
CF11 9LJ

Or completed electronically and sent by email to: info@audit.wales

If you require this publication in an alternative format and/or language please contact us using the details provided above or by telephone on 029 2032 0500.

Publication of responses – confidentiality and data protection

Information provided in response to this consultation may be published or disclosed in accordance with access to information legislation (chiefly the Freedom of Information Act 2000, but also data protection legislation, including the General Data Protection Regulation, and the Environmental Information Regulations 2004).

If you want any information you provide to be treated as confidential, you should tell us why you regard the information you have provided as confidential. If we receive a request for disclosure of information we will take full account of your explanation, but we cannot give any assurance that confidentiality can be maintained in all circumstances. An automatic confidentiality disclaimer generated by your IT system will not, of itself, be regarded as binding on the Auditor General or Audit Wales.

Personal data will be processed in accordance with data protection legislation. Where such data falls within the scope of a request for information from another person, the provisions of data protection legislation and the Freedom of Information Act will need to be considered in the particular circumstances. While no situation can be prejudged, this is likely to mean that information concerning senior officials and public figures is likely to be disclosed while the names and addresses of ordinary members of the public are likely to be withheld.

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Consultation

You will be familiar with our annual consultation on fee scales, which we are required to do for Local Government bodies, but choose to consult on more widely so that all stakeholders have an opportunity to respond to our fee proposals.

Legislation requires that the fees we charge **may not exceed** the full cost of exercising the function to which the fee relates. We set our audit fees based on our estimated cost base, the estimated skills mix for audit work and the estimated number of days required to complete the work. We do not and cannot make profits on our work.

Audit Wales remain determined to minimise audit fees whilst ensuring that our audit quality continues to meet rigorous standards.

For 2023-24, we are facing significant cost pressures on both staff and non-staff costs, and whilst we have various initiatives in place to reduce our overall cost base, some of these increases will unfortunately need to be passed on as increased fees.

We have been working hard to identify efficiencies and have identified areas that will deliver savings of £2 million over the next 5 years on travel and accommodation costs.

We do, however, need to recognise cost of living pressures on our staff and need to make provision for pay increases in line with the rest of the public sector.

As set out in our [Estimate for 2022-23](#), we continue to make significant investment in audit quality to respond to recent UK-wide reviews¹ of audit and new professional standards. These various reviews reflect increasing expectations of audit and of the quality of that audit. To maintain this investment in 2023-24, and to respond to pay and price pressures, we will need to increase our fee rates by an average of 5.5% in 2023-24.

We also plan to continue to provide access to the National Fraud Initiative on a free-of-charge basis.

1 Competition and Markets Authority Review; Kingman Review; and Brydon Review

Our proposed fee rates for 2023-24 are set out in **Exhibit 1**.

Exhibit 1: proposed fee rates 2023-24

Grade	Rate (£ per hour) 2023-24	Rate (£ per hour) 2022-23
Audit Director	170	163
Audit Manager	130	122
Audit Lead	107	100
Senior Auditor	86	84
Auditor	62	60
Graduate trainee	54	51
Apprentice	40	39

The Senedd Finance Committee scrutinises us on our spending, performance and budget plans and the assumptions in this consultation are subject to their approval of our Estimate in autumn 2022 and our Fee Scheme early in 2023.

Further information on our work and our expenditure is provided in our [Annual Report and Accounts 2021-22](#).

Facilitating thematic and cross sector reviews

In the [supporting information for our 2022-23 Estimate](#), we set out that, as part of our emerging strategy, we would be asking the Finance Committee to switch the funding for some of our performance audit work in local government and health from audit fees to the Welsh Consolidated Fund (WCF) in our Estimate for 2023-24.

Specifically, this switch will apply to the 22 principal councils and seven health boards but not to other Local Government bodies or NHS Trusts and Special Health Authorities.

In its November 2021 [report](#) following scrutiny of the Estimate, the Finance Committee noted our proposal. However, it emphasised that ‘understanding the views of audited bodies will be crucial to gaining the Committee’s support’.

The elements of our performance audit fee that we are seeking to switch to WCF relate to delivery of 'thematic' or topic-specific reviews that typically involve audit work across a number of audited bodies (on an all-Wales and/or regional level) and often with a cross-sector or whole-system focus. We might also want to look at issues such as the Welsh Government's system leadership on the theme being examined, which cannot be funded from audit fees.

We see such reviews as adding value to our audit regime with their ability to give a whole-system view, helping improve the quality of services provided to taxpayers, and providing feedback on the Welsh Government's 'One Welsh Public Service' developments. We are therefore keen to make the delivery of these reviews as flexible and efficient as possible. The key constraints that we emphasised about the current funding model concerned:

- potential inflexibility in the way we disseminate findings – arising from any expectation from audited bodies paying fees that there would typically be an output specific to that body; and
- transactional complexity – given the need to balance time charging across multiple timesheet codes and with the 'charge no more than the full cost' requirements of the Public Audit (Wales) Act 2013, meaning we have to be careful that there is no cross-subsidisation from one body to another.

In determining how much funding we would look to switch to the WCF, we are looking to strike an appropriate balance between work funded locally and that funded through the WCF, and recognising that other existing WCF funding streams already provide opportunity for cross-cutting work. The key principles being:

- retaining sufficient local audit fee to support the delivery of work that is specifically focused on individual audited bodies, including risk assessment, examination of corporate governance and financial management issues (including WFG Act work), and individual bespoke audit projects arising from our local assessment of risks;
- ensuring sufficient local audit fee is retained to support our routine local engagement with audited bodies, including regular meetings with senior leaders in audited bodies, and attendance at board, council and committee meetings as necessary; and
- applying the proposal to larger audited bodies (principal councils and health boards) to which our thematic work more typically applies.

We anticipate that we will be reducing the fees for our local performance audit work by around a third (£1.3 million) and switching funding for this work to WCF. To hold the WCF harmless for this change, Welsh Government would be asked, assuming the changes proposed are agreed, to adjust budget decisions accordingly.

We believe a change to our funding model will support the direction of travel we want to take with our work programme by giving us improved flexibility to examine more cross-cutting and whole-system issues – and also make that journey more straightforward to administer from a financial management perspective.

We would welcome your views on whether you support this proposed approach.

ISA315 and audit quality

Our audits for accounts ended 31 March 2023 will be carried out under a revised auditing standard (ISA 315 Identifying and Assessing the Risks of Material Misstatement). The revised standard will have significant and far-reaching impacts on how auditors undertake audit risk assessments and therefore on the overall audit. It is expected that audits – particularly in the first year of implementation (2022-23 audits) – will require us to use more qualified staff to deal with the higher level of judgement necessitated by the standard.

Our initial assessment of the impact of this richer skills mix is a potential average increase in the fee scales for our financial audit work of between 12% and 18%. This is an estimate at this point and will be reviewed following the implementation of our revised approach in the first half of 2023. We are aware that private sector audit firms have written to clients informing them that fees are likely to increase by up to 20%, as a result of this new requirement.

We recognise the concern that this increase will cause but the new standards inevitably mean higher costs and whilst we will continue to do everything that we can to keep costs down, we must ensure that our audits remain of high quality. Our Engagement Directors will discuss audit-specific fees with each body as we complete our 2022-23 audit risk assessment.

Our draft fee scales for local government bodies

The remainder of this document provides the fee scales for local government bodies and the National Fraud Initiative. The scales show the range of fees we expect to charge for a typical audited body in that sector with actual fees being set in response to local circumstances. These scales are not required for any other sector.

I would very much welcome your response to this consultation by 16 September 2022, to inform the Senedd's review of our Estimate and Draft Fee Scheme for 2023-24.

Audit Wales are required to comply with Welsh Language Standards that provide for the Welsh language not to be treated less favourably than the English language. More information can be found on [our Welsh language arrangements on our website](#). When reviewing this consultation, we would welcome your views on whether you consider there to be anything in this consultation that undermines or supports this requirement. We would also welcome your thoughts on any revisions that could be made to support opportunities to use the Welsh language or ensure we do not treat the Welsh language less favourably than the English language.

Many thanks



Adrian Crompton

Auditor General for
Wales

Fee scales for work undertaken under the National Fraud Initiative (data matching)

- 1 We invite your views on continuing participation in the National Fraud Initiative (NFI) on a nil-fee basis.
- 2 We are required to consult on and prescribe scales of fees for data matching for mandatory participants in the NFI. The Auditor General conducts the NFI using his statutory data-matching powers under Part 3A of the Public Audit (Wales) Act 2004.
- 3 The NFI matches data across organisations and systems to help public bodies identify potentially fraudulent or erroneous claims and transactions. The NFI has been a highly effective tool in detecting and preventing fraud and overpayments. Our last biennial [report](#) identified potential savings and over-payments of £8 million across Wales’s public services, increasing cumulative savings to £42.9 million since 1996.
- 4 Since April 2015, the Senedd has met the costs of running the NFI through payment from the Welsh Consolidated Fund. This is intended to encourage participation of organisations on a voluntary basis and to simplify arrangements for mandated participants. As required by legislation, the fees for mandatory participants are shown in **Exhibit 2**.

Exhibit 2: NFI fees

	Fee 2023-24
Unitary authority; police and crime commissioners and chief constables; fire and rescue authorities; NHS trusts; local health boards	Nil
Voluntary participants	Nil
All participants may also be provided with access to the NFI Application Checker (App Check).	Nil

Fee scales for Local Government bodies

- 5 We invite your views on the proposed fee scales which will apply to Local Government bodies for the audit of accounts 2022-23 and for 2023-24 Performance audit work.
- 6 Our audit of accounts fee scale takes account of an average increase of 15% related to the implementation of ISA315 as discussed above. We are continuing to review the impact of this new standard and will reflect the outcome in our Fee Scheme for 2023-24 which will be published early in 2023.
- 7 Our proposed performance audit fee scale takes into account the proposed switch of funding for around one third of our local performance work at Unitary Authorities to the WCF from April 2023.

Unitary authorities

Exhibit 3: draft fee scale for the audit of 2022-23 accounts

Gross Expenditure £ million	Fee range			Previous Year
	Minimum £'000	Median £'000	Maximum £'000	Median £'000
100	135	159	182	139
200	162	191	219	167
300	181	212	244	186
400	195	229	264	200
500	207	243	280	213
600	217	255	294	223
700	226	266	306	233
800	234	276	317	241
900	242	285	327	249
1,000	249	293	337	256
1,100	255	300	345	262
1,200	261	307	353	268

Exhibit 4: draft fee scale for 2023-24 performance audit work

All unitary authorities	Minimum £'000	Median £'000	Fee range	Previous Year
			Maximum £'000	Median £'000
	70	74	84	105

Local Government Pension Funds**Exhibit 5: draft fee scale for audit of 2022-23 accounts**

All pension funds	Minimum £'000	Median £'000	Fee range	Previous Year
			Maximum £'000	Median £'000
	36	48	57	41

Fire and Rescue Authorities**Exhibit 6: draft fee scale for audit of 2022-23 accounts**

Gross Expenditure £ million	Minimum £'000	Median £'000	Fee range	Previous Year
			Maximum £'000	Median £'000
20	40	46	53	41
40	48	56	64	49
60	53	62	72	54
80	57	67	77	59
100	61	71	82	62

Exhibit 7: draft fee scale for 2023-24 performance audit work

All fire and rescue authorities	Fee range			Previous Year
	Minimum £'000	Median £'000	Maximum £'000	Median £'000
	17	17	17	17

National Park Authorities**Exhibit 8: draft fee scale for audit of 2022-23 accounts**

Gross Expenditure £ million	Fee range			Previous Year
	Minimum £'000	Median £'000	Maximum £'000	Median £'000
2	24	29	33	25
4	29	35	40	30
6	33	39	44	34
8	35	42	48	36
10	38	44	51	39

Exhibit 9: draft fee scale for 2023-24 performance audit work

All national park authorities	Fee range			Previous Year
	Minimum £'000	Median £'000	Maximum £'000	Median £'000
	22	22	27	21

Police and Crime Commissioners

- 8 Auditors undertake audits of two statutory bodies in a police area – the Police and Crime Commissioners (PCCs) and the Chief Constables (CCs). The split of the total fee between the two bodies in a particular police area will be a matter for auditors to determine, based on accounting requirements and the operational arrangements put in place by each of the bodies.

Exhibit 10: draft fee scale for audit of 2022-23 accounts

Combined Gross Expenditure of PCC and CC £ million	Combined fee range for PCCs and CCs			Previous Year
	Minimum £'000	Median £'000	Maximum £'000	Median £'000
50	68	78	89	69
100	80	92	105	81
150	88	102	116	90
200	94	110	125	96
250	100	116	132	102
300	104	121	138	106
350	108	126	144	111

Town and community councils with annual income or expenditure under £2.5 million

- 9 Town and community councils in Wales are subject to a limited assurance audit regime.
- 10 In October 2020, the Auditor General published a [paper](#) setting out how these audits will be carried out on a three-year cycle as set out in **Exhibit 11**.

Exhibit 11: three-year audit cycle for town and community councils

	Group A	Group B	Group C
Year 1	Transaction testing	Limited procedures	Limited procedures
Year 2	Limited procedures	Transaction testing	Limited procedures
Year 3	Limited procedures	Limited procedures	Transaction testing

- 11 Charges for this work are based on time taken to complete the audit at fee rate charges as set out in **Exhibit 1** on page 5.
- 12 In circumstances where the auditor requires further evidence to properly discharge their responsibilities, including following publication of a related public interest report, additional testing will be undertaken to address the auditor's concerns.
- 13 It is emphasised that the actual charge made to any particular body will be dependent on the time actually worked on that particular audit. The range of fees provided in **Exhibit 12** is for indicative purposes only.

Exhibit 12: estimated time charges for the audit of 2022-23 accounts of town and community councils

	Band 1 (<£10k)	Band 2 (<£25k)	Band 3 (<£50k)	Band 4 (<£100k)	Band 5 (<£500k)	Band 6 (>£500k)
Transaction audit	£145 – £185	£170 – £200	£235 – £285	£360 – £440	£640 – £765	£850 – £1,100

	Band 1 (<£10k)	Band 2 (<£25k)	Band 3 (<£50k)	Band 4 (<£100k)	Band 5 (<£500k)	Band 6 (>£500k)
Limited procedures	£110 – £135	£140 – £165	£140 – £165	£210 – £265	£210 – £255	£210 – £255

Fee rates for other work in local government

- 14 Other than those types of bodies for which fee scales have been prescribed as shown above, there are a small number of other types of local government body where our prescription of the fee scale is a matter of converting the resource requirements into fees directly based on the costs of delivering the work or by applying the fee rates as set out in **Exhibit 1**. This will include audits of Corporate Joint Committees. It remains the case that for audits of these bodies we apply a zero-based approach to audit planning.
- 15 For all types of local government body, to meet his statutory responsibilities, it is sometimes necessary for the Auditor General to carry out work which goes beyond general duties (those set out in section 17 of the Public Audit (Wales) Act 2004 and in section 15 of the Well-being of Future Generations (Wales) Act 2015). Additional work can include reports in the public interest, extraordinary audit, special inspections and further work in relation to elector challenge and the prevention of unlawful expenditure. Charges for this type of work will reflect the nature of the work required.
- 16 Auditors may also undertake grant certification work at local government bodies on behalf of the Auditor General. The amount of grant certification work undertaken in any year is dependent on the number of schemes subject to audit and the number of audited bodies participating in those schemes. Charges for this work are made on a per-hour basis and reflect the size, complexity and/or any issues in respect of the grant in question as set out in **Exhibit 13**.

Exhibit 13: estimates of the relative proportions of audit staff grades to be used for different types of grants work.

Grade of staff	Complex grants staff mix	All other grants staff mix
	%	%
Engagement director	1 to 2	0 to 1
Audit Manager	4 to 6	1 to 2
Audit Lead	18 to 21	12 to 16
Auditor/graduate trainee/ apprentice	71 to 77	81 to 87

Complex grants include:

- BEN01 Housing and council tax benefits scheme
- LA01 National non-domestic rates return
- PEN05 Teachers' pensions return



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Reference: AC/324/caf

Date issued: 1 September 2022

Dear Colleagues

Approach to auditing the Corporate Joint Committees and understanding their evolving arrangements

As the appointed auditor of the Corporate Joint Committees (CJCs), I set out in this letter that I will be doing an early landscape review to understand the CJCs' evolving arrangements. I also set out my approach to auditing the CJCs for 2021-22 and 2022-23 to meet my requirements under the Public Audit Wales Act 2004 and the Well-being of Future Generations (Wales) Act 2015.

CJC commentary/landscape review

In my work programme consultation paper in March 2022, I set out that I would be keeping track of governance arrangements around the creation of new bodies, including the new CJCs in local government, where I have a statutory role.

In the autumn 2022, my team will be doing some work to gain an understanding of the CJCs' evolving arrangements and their plans. I will publish a summary of my findings. The commentary will also:

- provide an overview of the progress of the CJCs in setting up their arrangements to carry out their three functions and meet their legislative requirements;
- compare and contrast the approaches of the four CJCs;

- gain assurance that the CJs are putting in place proper arrangements to secure value for money in the use of their resources;
- provide early feedback to help the CJs learn and improve, and make recommendations where relevant to improve the economy, efficiency and effectiveness in the discharge of functions of the CJs;
- understand the approach the CJs are taking to respond to the WFG Act, including setting their well-being objectives;
- identify any emerging areas for improvement or issues that need to be addressed in order to facilitate regional collaboration; and
- help inform the focus of future audit work relating to the CJs.

This work will be done under Section 41 of the Public Audit Wales Act 2004. This Act places a duty on me to undertake studies designed to enable me to make recommendations for improving economy, efficiency and effectiveness in the discharge of the functions or services of local government bodies in Wales. The work will also support my responsibilities under the Well-being of Future Generations (Wales) 2015 Act (the 'Act') as the CJs are now named bodies under the Act. My team will shortly share a project brief providing more information about this work.

My audit requirements

As the CJs are considered to be local government bodies under Part 2 of the Public Audit (Wales) Act 2004 (the 2004 Act), I am required to:

- Give an opinion on the annual accounts of the CJC;
- Satisfy myself that the CJC has proper arrangements to secure economy, efficiency and effectiveness in its use of resources;
- Provide opportunity for electors to ask questions or make objections at audit; and
- Consider whether there are any matters that come to my attention that should be brought to the attention of the public and/or whether I should make written recommendations under section 25 of the 2004 Act.

As the CJs are also now named bodies under the Well-being of Future Generations (Wales) Act 2015, I am also required to:

- assess the extent to which the CJs have acted in accordance with the sustainable development principle when:
 - setting well-being objectives; and
 - taking steps to meet them.

- carry out such an examination of each public body at least once in a reporting period and report on the results of those examinations to the Senedd.

2021-22 audit

Proper accounting practice will be determined by the income and expenditure recognised by the CJsCs. For the 2021-22 Statement of accounts, where there have been no transactions in the year for the CJC, I would accept a statement of accounts that simply states that the CJC has had no transactions in the year. As such, there would be no specific proper arrangements audit work. I do not anticipate charging a fee to those CJsCs that fall into this category.

As with the accounts, we would accept an Annual Governance Statement that simply states that the CJC was established on 1 April 2021 but has largely been inactive throughout the year.

My audit opinion would simply confirm that we agree there has been no activity or minimal activity.

Those CJsCs with income and expenditure below £2.5 million will need to prepare accounts in the form of the normal small body annual return. The annual return includes a proforma annual governance statement. My accounts audit and proper arrangements work to inform my 2021-22 opinion will reflect the low level of activity during 2021-22. My audit opinion will be a limited assurance opinion confirming that no matters have been identified during my audit that indicate that the annual return has not been properly prepared or that the CJC has not complied with its statutory responsibilities. In addition to this work, my teams have been engaging with you over the year to understand your evolving governance arrangements. They will continue to do this. I anticipate charging a fee of approximately £2,000 for this work, but my team will discuss this with any CJsCs that fall within this category.

2022-23 audit

At this stage, the CJsCs have set budgets for 2022-23 which sit below the £2.5 million threshold which would require a full set of financial statements. The CJsCs will, therefore, be required to prepare accounts in the form of the normal small body annual return. As for 2021-22, our audit work will reflect the extent of the CJsCs' activities.

However, I recognise that as the CJsCs develop, their budgets and levels of income and expenditure may change. For those CJsCs with income or expenditure exceeding £2.5 million, a full set of financial statements will be required as set out in the CIPFA/LASAAC Code. Where this is the case, I will discuss with each of the CJsCs

my intended work on the accounts and to satisfy myself that the CJC has proper arrangements to secure economy, efficiency and effectiveness in its use of resources.

Well-being of Future Generations Act

The CJsCs are required to publish their well-being objectives by April 2023. I am required to undertake a dedicated examination of the extent to which each CJC has acted in accordance with the sustainable development principle when setting their well-being objectives. I will seek to incorporate this examination into my commentary work in a proportionate way.

I am also required to carry out examinations to assess the extent to which CJsCs have applied the sustainable development principle when taking steps to meet their well-being objectives. I will adopt a proportionate approach to this work. I will also integrate this work with my proper arrangements work in future audit plans.

If you have any queries about the commentary work or audits please contact Derwyn Owen (Derwyn.owen@audit.wales) or Sara-Jane Byrne (sara-jane.byrne@audit.wales).

Yours sincerely



ADRIAN CROMPTON
Auditor General for Wales

Project Brief – Corporate Joint Committees (CJCs) commentary

Audit year: 2022-23

Date issued: August 2022

Publication reference number: 3143A2022

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We welcome correspondence and telephone calls in Welsh and English. Corresponding in Welsh will not lead to delay. Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg a Saesneg. Ni fydd gohebu yn Gymraeg yn arwain at oedi.

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Project brief

Legislative basis for the commentary

- 1 This project is being undertaken in accordance with Section 41 of the Public Audit Wales Act 2004. This Act places a duty on the Auditor General to undertake studies designed to enable him to make recommendations for improving economy, efficiency and effectiveness in the discharge of the functions or services of local government bodies in Wales.
- 2 It also supports the Auditor General in discharging some of his commitments and responsibilities in relation to the Well-being of Future Generations (Wales) 2015 Act (the 'Act') which requires public bodies in Wales to think about the long-term impact of their decisions, to work better with people, communities, and each other.
- 3 Our privacy notice can be found on [our website](#) and it provides information about the potential collection of personal information by the Auditor General as part of this work.

Background to the commentary

- 4 In our programme consultation paper in March 2022, we set out that we would be keeping track of governance arrangements around the creation of new bodies, including the new Corporate Joint Committees (CJCs) in local government, where the Auditor General has a statutory role.
- 5 Four corporate joint committees have been established by regulations under the Local Government and Elections (Wales) Act 2021 to help regional collaboration between authorities:
 - South East Wales CJC
 - South West Wales CJC
 - North Wales CJC
 - Mid Wales CJC
- 6 The aim in setting up the CJCs is to strengthen regional collaboration. They became legal entities as of April 2021 and can have budgets, staff, assets and undertake functions. They are largely subject to the same or similar powers and duties as councils. From 30 June 2022, the CJCs have three functions:
 - Developing transport policies
 - Preparing a strategic development plan
 - Economic well-being - anything CJC considers is likely to promote or improve the economic well-being of its area
- 7 There are a series of statutory guidance documents to support the implementation of the CJCs, with further guidance due out later this year.

Purpose of the commentary

- 8 The purpose of this commentary is to:
- gain an early understanding of the CJsCs' evolving arrangements and their plans;
 - provide an overview of the progress of the CJsCs in setting up their arrangements to carry out their three functions and meet their legislative requirements;
 - compare and contrast the approaches of the four CJsCs;
 - gain assurance that the CJsCs are putting in place proper arrangements to secure value for money in the use of their resources and make related recommendations where relevant;
 - provide early feedback to help the CJsCs learn and improve;
 - understand the CJsCs' plans to set their well-being objectives and apply the sustainable development principle;
 - identify any emerging areas for improvement or issues that need to be addressed in order to facilitate regional collaboration including understanding how the CJsCs align with other partnerships and regional structures; and
 - help inform the focus of future audit work relating to the CJsCs.

Method

- 9 This commentary will include observing relevant meetings, document reviews and interviews with CJC officers and members. As a minimum, we would like to interview the Chair, Chief Executive and Director of Finance of each CJC. We will also get the perspectives of the constituent bodies of each of the CJsCs (ie the councils and national park authorities) through our regular liaison meetings with the Chief Executives and key contacts at these bodies.
- 10 We also intend to speak with Welsh Government and the Welsh Local Government Association.

Overall commentary question

- 11 The question this commentary will seek to answer is: **Are Corporate Joint Committees making good progress in developing their arrangements to meet their statutory obligations and the Welsh Government's aim of strengthening regional collaboration?** To answer this question, we will explore:
- the understanding of Welsh Government's aims for the CJsCs;

- have CJs established effective governance arrangements to meet the Welsh Government aims and statutory obligations;
- whether CJs have clear and effective plans to deliver the Welsh Government aims and meet their statutory obligations;
- how the CJs will fit in to existing partnership arrangements; and
- how CJs are planning to meet their requirements under the Well-being of Future Generation (Wales) Act 2015 including how they are setting their well-being objectives.

Output

12 We will provide a report.

Document request

Exhibit 1: document request

Prior to the interviews, we will undertake a review of the documents identified below. However, we would be grateful if you could supply us with any additional documents which you feel may be relevant for this commentary. The list is not exhaustive and requests for additional documents may be made during the course of the commentary. Where documents in the list below are publicly available, we would be grateful if you could please direct us to where we can find them

Document Title

- Plans/documents setting out ambitions for each of the CJs
- Plans/documents outlining how the CJs will carry out the three functions conferred upon them
- Plans/documents outlining how the CJs will be resourced
- Plans/documents outlining how the CJs will meet the requirements of the Well-being of Future Generation (Wales) Act 2015, including publishing their well-being objectives by April 2023
- Plans/documents setting out CJC governance arrangements in meeting the legislative requirements of the Local Government and Elections (Wales) Act 2021, and regulations

Timescales for the commentary

Exhibit 2: Timescales for the commentary

Proposed timetable	
Project brief issued	August 2022
Document review Meeting observations Interviews	September-October 2022
Draft output	January 2023

Audit Wales contacts

Exhibit 3: Audit Wales contacts

The table below sets out the Audit Wales team that will be working on this commentary.

Name	Contact details
Director	Gary Emery Gary.emery@audit.wales
Audit Manager	Sara-Jane Byrne Sara-jane.byrne@audit.wales
Senior Auditor	Jason Williams Jason.williams@audit.wales
Senior Auditor	Allison Rees Allison.Rees@audit.wales

Project Brief: Planning Service follow-up review – Ceredigion County Council

Issue Date: September 2022

Document Reference: 3137A2022

Audit year: 2022-23

Background

1. Following our Assurance and Risk work in 2019-20 and 2020-21, we agreed with the Council to undertake a review of its Planning Service. This review took place between April to July 2021, and we issued our report in October 2021¹.
2. Our review sought to answer the question: Is the Planning Service effectively and sustainably meeting its objectives and contributing towards the achievement of the priorities in the Council's Corporate Strategy? Overall, we found that **whilst Council members and senior officers view the planning service as strategically critical, significant longstanding weaknesses in the Development Control Committee's governance arrangements were not sustainably or cohesively supporting the Council to improve performance and achieve its strategic objectives and priorities.**
3. We issued 10 recommendations as shown in **Exhibit 1**.

Exhibit 1: recommendations

Recommendations

Governance

- R1 The Council should review its constitution to strengthen the governance of its development control arrangements. The review should:
- learn from the development control governance arrangements of other Local Planning Authorities (LPAs);
 - develop an agreed Terms of Reference for the Council's Development Control Committee, to clearly state its purpose, role and responsibilities, and how it links to Corporate Priorities;

¹ [Ceredigion County Council – Review of the Planning Service | Audit Wales](#)

Recommendations

- define what it deems as strategically important and 'major' planning applications;
- strengthen the Development Control Committee's scheme of delegation by considering raising the threshold for planning applications called into Committee to allow it to better focus on more strategically important and major applications;
- ensure planning applications submitted by or on behalf of the Council's officers and members are considered by the Development Control Committee and not under officer delegated powers to safeguard against any perceived conflicts of interest and to promote independence and transparency;
- review the balance of time local ward members have to speak on planning applications at committee meetings as compared to applicants and objectors; and
- review and include the Council's Planning Code of Practice in the constitution and ensure members understand and act in accordance with it.

R2 The Council should ensure that its Development Control Committee and committee support arrangements comply with data protection principles and the processing of personal information in accordance with the Data Protection Act 2018² and the UK General Data Protection Regulation.

R3 The Council's Development Control Committee members need to ensure that any planning decisions are based on sound material planning considerations, and not applicants' personal circumstances.

R4 The Council needs to ensure that recordings of its 'in public' Development Control Committee meetings are made publicly available after committee meetings to adhere to the future requirements of the Local Government and Elections (Wales) Act 2021³.

R5 The Council should ensure that Development Control Committee decisions relating to 'affordable' homes in the open countryside are made and reported accurately in accordance with the Council's Affordable Housing supplementary guidance⁴.

² [Chapter 12 – Data Protection Act 2018](#)

³ [Part 3; Section 46 – Local Government and Elections \(Wales\) Act 2021](#)

⁴ Ceredigion County Council, [Supplementary Planning Guidance Affordable Homes, September 2014](#)

Recommendations

- R6 The Council and Development Control Committee should assess the cumulative implications and long-term infrastructure impact of approving single affordable dwellings and TAN 6 planning applications in the open countryside to ensure they contribute sustainably and cohesively to the Council's wider corporate priorities.

Service Planning

The Council's Planning Service should:

- R7 More clearly present its performance information and targets in its business plans.
- R8 Review the effectiveness and efficiency of combining the Development Management Officer and Enforcement roles including the impact on performance.

Monitoring

- R9 The Council should establish a framework to assure itself that the Development Control Committee contributes cohesively and sustainably to achieving the Council's corporate priorities.

Well-being of Future Generations

- R10 In making any changes to the planning service, the Council should take the opportunity to consider how it might act more closely in accordance with the sustainable development principle in contributing to the delivery of the Council's well-being objectives when making planning decisions.

What will the review look at?

4. This follow up review will focus on assessing the Council's progress in addressing our 10 recommendations stated in **Exhibit 1**.

How will the review be done?

5. Our work will include a review of documents, interviews with officers and members and we will observe Development Management committee meetings.

6. We will request interviews and focus groups with relevant officers and members as the review progresses.

What will be the output?

7. We will agree with the Council how best to feedback the findings of our work and will provide a summary output.

Documents we would like to review

8. Prior to the interviews, we will undertake a review of the documents identified below. However, we would be grateful if you could supply us with any additional documents which you feel may be relevant to our work in this area. The list is not exhaustive and requests for additional documents may be made during the course of the review. Where documents in the list below are publicly available on the Council's website, we would be grateful if you could please direct us to where we can find them:
 - Corporate Strategy (if changed from our previous review)
 - Council's detailed action plan in response to the Audit Wales Planning Service recommendations and any progress reports/updates on the Council's action plan
 - Evidence of the Council's learning from reviewing the development management governance arrangements at other Local Planning Authorities
 - Terms of reference for the Development Management committee
 - Terms of reference for the Development Management committee's 'cooling off' group
 - Planning Code of Practice
 - Scheme of Delegation
 - Training materials for the Development Management Committee since our last report
 - Member induction materials on the role and responsibility of the Development Management committee including materials presented to non-members of the Development Management committee
 - A list of all major planning applications since April 2022
 - Reports to Welsh Government on affordable housing
 - Council's framework demonstrating the Development Management's committee's contribution to achieving corporate priorities
 - Evidence demonstrating consideration and application of the sustainable development principle

- Evidence of the Council considering the long-term implications and infrastructure impact of approving single affordable dwellings and TAN 6 applications in the open countryside
- Latest staff structure for Development Management and Planning Policy
- Development Management Business Plan for 2022-23
- Planning Policy Business Plan for 2022-23
- Development Management Quarterly Survey returns for 2021-2022 and Q1 and Q2 2022-23 (when available)
- Any reports/presentations to members on the Development Management team's performance including reports to Scrutiny
- Outcome of the Council's review of combining Development Management and Enforcement roles

Timescale and contacts

9. Our review is planned to take place Autumn 2022.
10. If you would like to discuss any aspect of this review, please contact
 - Non Jenkins – non.jenkins@audit.wales
 - Bethan Hopkins – bethan.hopkins@audit.wales
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Legislative basis for the review

11. This project is being undertaken to help discharge the Auditor General's duties under section 17 of the Public Audit (Wales) Act 2004 (the 2004 Act) and section 18 of the Local Government (Wales) Measure 2009. It may also inform a study for improving value for money under section 41 of the 2004 Act, and/or an examination undertaken by the Auditor General under section 15 of the Wellbeing of Future Generations Act (Wales) 2015.
12. Our privacy notice can be found on [our website](#) and it provides information about the potential collection of personal information by the Auditor General as part of this work

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Cyngor Sir CEREDIGION County Council

REPORT TO:	Governance and Audit Committee
DATE:	27 September 2022
LOCATION:	Remotely by Video Conference
TITLE:	Ceredigion County Council Responses to Regulator & Inspectorate Reports
PURPOSE OF REPORT:	To provide the Governance and Audit Committee with the Council's responses to Regulator and Inspectorate Reports
For:	Decision

Introduction

This Report sets out the Council's responses regarding Regulator and Inspectorate Reports and progress made regarding proposals and recommendations.

This Report has 2 parts:

- a) Council tracker of Regulator/Inspectorate proposals for improvement and recommendations; and*
- b) Other Council related matters.*

Current Position

a) Council tracker of Regulator/Inspectorate proposals for improvement and recommendations

- Council Management Response Forms 2020-2021 & 2021-2022 Update:
 - MRF - 'Raising our Game' Tackling Fraud in Wales Update (**Appendix 1**)
 - Progress Note – MRF - Welsh Community Care Information System (**Appendix 2**)
 - See progress note highlighted in yellow
 - MRF – Review of Planning Service (**Appendix 3**)
 - As previously reported 17 January 2022. See Action Plan at **Appendix 4** for update
 - Planning Task and Finish Group Action Plan Update 24.08.2022 (**Appendix 4**)
- Council Management Response Forms 2022-23:
 - MRF - Springing Forward – Review of Strategic Asset Management (**Appendix 5**)
 - MRF – Springing Forward – Review of Strategic Workforce Management (**Appendix 6**)

b) Other Council related matters

RECOMMENDATIONS:	To consider the Council’s responses to Regulator and Inspectorate Reports
Reasons for Recommendation	To keep the Governance and Audit Committee informed of reports, proposals and work being undertaken
Appendices:	<p>Appendix 1 - MRF - ‘Raising our Game’ Tackling Fraud Update</p> <p>Appendix 2 - Progress Note – MRF - Welsh Community Care Information System</p> <p>Appendix 3 - MRF Review of Planning Service</p> <p>Appendix 4 - Planning Task and Finish Group Action Plan Update 24.08.2022</p> <p>Appendix 5 - MRF - Springing Forward – Review of Strategic Asset Management</p> <p>Appendix 6 - MRF – Springing Forward – Review of Strategic Workforce Management</p>
Contact Name:	Elin Prysor
Designation:	Corporate Lead Officer: Legal & Governance & Monitoring Officer
Date of Report:	31/08/2022

AW National Report Summary and Proposals for Improvement

Regulatory Authority: Audit Wales

Report title: 'Raising our Game' Tackling Fraud in Wales

Issue date: 30 July 2020

Audit Committee:

Document reference: https://www.audit.wales/sites/default/files/2020-11/raising_our_game_tackling_fraud_in_wales_english.pdf

Report Summary

This report examines seven 'key themes' that all public bodies need to focus on in raising their game to tackle fraud more effectively:

- leadership and culture;
- risk management and control frameworks;
- policies and training;
- capacity and expertise;
- tools and data;
- collaboration; and
- reporting and scrutiny.

Recommendations

Ref	Proposal for Improvement / Recommendation	Council Response
R1	The Welsh Government should enhance its strategic leadership of counter-fraud across the public service in Wales, playing a coordinating role where it can, while recognising that individual bodies remain responsible for their own counter-fraud activities.	The Council would welcome a co-ordinating role by Welsh Government in this area, which would assist and support collaboration and consistency in working practices within Local Government.
R2	All public bodies should champion the importance of a good anti-fraud culture and actively promote its importance to give confidence to staff and members of the public that fraud is not tolerated.	<ul style="list-style-type: none"> • The Council has a comprehensive 'Strategy on Countering Fraud, Corruption and Bribery (to include Anti-Money Laundering)' which is due for its 3-yearly review in April 2021. Update presented to & endorsed by Governance & Audit Committee 3/6/21; final approval by Council 17/6/21. Updated copy on Council website. • The public are able to report any suspected incidents of Council Tax Reduction Scheme fraud and/or

Ref	Proposal for Improvement / Recommendation	Council Response
		<p>Housing Benefit / DWP benefit fraud on-line by following the instructions on the Council's website.</p> <ul style="list-style-type: none"> • As part of the Council's safeguarding arrangements, the website also has a page detailing how suspected financial abuse (which includes fraud/theft) against a vulnerable adult should be reported. • The Council undertakes the National Fraud Initiative exercise regularly in order to prevent and detect fraud via data matching. Notifications publicising this exercise to staff and the public are placed on the Council website and on Ceri. • Internal Audit use 'Activedata' software to undertake data analytic techniques within systems where appropriate eg during the processing of covid grants. • Zurich, the Council's insurer, provided a training module on Ethics & Fraud to the Council's Corporate Workshop on 28 May 2021. Following this presentation, the slides were used as a basis for an e-learning module for all staff. IA provided content & module created by Learning & Development. The launch of the module is currently awaiting the update of the Code of Conduct which is awaiting approval by the TU's.
R3	All public bodies should undertake comprehensive fraud risk assessments, using appropriately skilled staff and considering national intelligence as well as organisation-specific intelligence.	<ul style="list-style-type: none"> • All Managers produce business plans which include their business risks – fraud can be input as a risk if deemed appropriate, with mitigating actions noted. • Fraud appears as a priority heading in the Internal Audit annual audit plan of work. This is supported by notifications from external bodies such as NAFN and CIPFA, as well as other Local Authorities via the Welsh

Ref	Proposal for Improvement / Recommendation	Council Response
		Chief Auditor Groups and by undertaking internal risk assessments.
R4	Fraud risk assessments should be used as a live resource and integrated within the general risk management framework to ensure that these risks are appropriately managed and escalated as necessary.	All risks within business / service plans are assessed for impact & likelihood in accordance with the Council's Risk Management Framework. Any risks with a resultant score falling in the high or critical risk categories are escalated to the Corporate Risk Register which is monitored by Leadership Group and reported to Governance & Audit Committee.
R5	All public bodies need to have a comprehensive and up-to-date set of policies and procedures which together represent a cohesive strategy for identifying, managing and responding to fraud risks.	<ul style="list-style-type: none"> • The 'Strategy on Countering Fraud, Corruption and Bribery (to include Anti-Money Laundering)' covers the prevention, detection and investigation of fraud. • The Risk Management Framework provides a comprehensive process for identifying and mitigating all risks. • The 'Policy and Guidelines for Safeguarding Children & Adults at Risk' contains a referral process with supporting forms, if financial abuse is suspected. • The Council has a Whistleblowing Policy if staff wish to report a concern, which can be made anonymously. • All the above policies & procedures are supported by various training packages for staff.
R6	Staff working across the Welsh public sector should receive fraud awareness training as appropriate to their role in order to increase organisational effectiveness in preventing, detecting and responding to fraud.	<ul style="list-style-type: none"> • Enforcement Officers such as Trading Standards staff are qualified to conduct PACE interviews. • The Council's HR service arranges in-house training for staff who are designated 'investigating officers' for disciplinary matters.

Ref	Proposal for Improvement / Recommendation	Council Response
		<ul style="list-style-type: none"> • Each service has a trained designated safeguarding officer to which allegations of abuse against vulnerable persons are reported. • The Audit Manager holds a CIPFA Certificate in Investigative Practices (CCIP) & the Corporate Manager – Internal Audit is an Accredited Counter Fraud Technician (ACFTech). • Zurich, the Council’s insurer, provided a training module on Ethics & Fraud to the Council’s Corporate Workshop on 28 May 2021. Following this presentation, the slides were used as a basis for an e-learning module for all staff. IA provided content & module created by Learning & Development. The launch of the module is currently awaiting the update of the Code of Conduct which is awaiting approval by the TU’s.
R7	Cases where fraud is identified and successfully addressed should be publicised to re-enforce a robust message from the top that fraud will not be tolerated.	<ul style="list-style-type: none"> • Any enforcement work resulting in successful court cases are covered by the local press. • Internal audit counter-fraud work undertaken is reported to Governance & Audit Committee annually. • Any member of staff responsible for a risk on the corporate risk register, or an action in an audit report can be called to the Governance & Audit Committee to provide assurances that appropriate systems / actions are in place.
R8	All public bodies need to build sufficient capacity to ensure that counter-fraud work is resourced effectively, so that investigations are undertaken professionally and in a manner that results in successful sanctions against the perpetrators and the recovery of losses.	The Council does not have a dedicated fraud team, but investigations are undertaken by officers who are deemed appropriate to each case, as per their experience / qualifications (see point R6 above).
R9	All public bodies should have access to trained counter-fraud staff that meet recognised professional standards.	As per point R8 above.

Ref	Proposal for Improvement / Recommendation	Council Response
R10	All public bodies should consider models adopted elsewhere in the UK relating to the pooling /sharing of resources in order to maximise the availability of appropriately skilled staff.	The North & Mid Wales Chief Auditor Group is currently in the process of resurrecting the Specialist Fraud Working Group, which will assist with support and consistency in internal audit fraud practices throughout member authorities.
R11	All public bodies need to develop and maintain dynamic and agile counter-fraud responses which maximise the likelihood of a successful enforcement action and re-enforces the tone from the top that the organisation does not tolerate fraud.	As per point R8 above.
R12	All public bodies should explore and embrace opportunities to innovate with data analytics in order to strengthen both the prevention and detection of fraud.	Internal Audit use 'Activedata' software to undertake data analytic techniques within systems where appropriate eg during the processing of covid grants.
R13	Public bodies should work together, under the Digital Economy Act and using developments in data analytics, to share data and information to help find and fight fraud.	The Council undertakes the National Fraud Initiative exercise regularly in order to prevent and detect fraud via data matching between own services and with other national public sector bodies.
R14	Public bodies need to collate information about losses and recoveries and share fraud intelligence with each other to establish a more accurate national picture, strengthen controls, and enhance monitoring and support targeted action.	The Council perceives this as a task appropriate to WG if it accepts the coordinating role of strategic leadership of counter-fraud across the public services in Wales (see point R1 above).
R15	Governance & Audit Committees must become fully engaged with counter-fraud, providing support and direction, monitoring and holding officials to account.	<ul style="list-style-type: none"> Internal audit counter-fraud work undertaken is reported to Governance & Audit Committee annually in the Internal Audit Counter Fraud Report. Any member of staff responsible for a risk on the corporate risk register, or an action in an audit report can be called to the Governance & Audit Committee to provide assurances that appropriate systems / actions are in place.

WAO National Report Summary and Proposals for Improvement

Regulatory Authority: Wales Audit Office

Report title: Welsh Community Care Information System

Issue date: 14th October 2020

Audit Committee: 12th November 2020

Document reference: https://audit.wales/sites/default/files/WCCIS-Eng_10.pdf

Report Summary

The Welsh Community Care Information System (WCCIS) is intended to enable health and social care staff to deliver more efficient and effective services using a single system and a shared electronic record. The arrangements for reporting the benefits from WCCIS roll-out have been the subject of discussion and review from the outset. Work is still ongoing to develop a suitable reporting framework.

Recommendations

Ref	Proposal for Improvement / Recommendation	Council Response
R1	<p>We recommend that, before committing any further central funding, the Welsh Government works with the WCCIS National Programme Team, health boards, local authorities and the supplier to:</p> <ul style="list-style-type: none"> • produce an updated business case that takes account of local, regional and national costs and sets out expectations for further roll-out of the system, its use over the remainder of the contract term, the development of national data standards and planning for any successor arrangements; • ensure the organisations involved have the necessary capacity to support implementation and are giving enough priority to the programme against a clearly agreed plan; and • pull together a clear national picture on feedback from front-line users about the performance and general functionality of the system. 	<p>Clear development plan between the Local Authority and Health on future development of the system. Regionally we are sharing data with our Health Board through the system and have worked in partnership to develop the system. Other Local Authority's in the region have yet to sign the deployment order, therefore we currently have had limited engagement.</p> <p>Regionally we are developing local plans on the development of national data standards and interoperability of all the systems within the region</p>
R2	<p>We recommend that the Welsh Government works with the National Programme Team to consider:</p> <ul style="list-style-type: none"> • how the WCCIS contract might have been strengthened to support and incentivise delivery and manage risk; and 	<p>Central resource of business design and development – plan once for all users, common data sets, common workflows</p>

Ref	Proposal for Improvement / Recommendation	Council Response
	<ul style="list-style-type: none"> • how relevant lessons can be applied to any successor contracting arrangements and wider public procurement. 	<p>All stakeholders must be committed to the product and give a clear timeline of implementation. This can only be achieved if all are part of the specification and procurement process</p>

Note: There is no further update to provide at this stage as recommendations are for Welsh Government to implement and the Council is awaiting their plan. The Council are still working together with Hywel Dda Health Board where possible.

Council Response Form

Council action planned in response to the recommendations issued by Audit Wales

Council: Ceredigion County Council

Report title: Review of Planning Services

Issue date: 16th November 2021

Document reference: 2602A2021-22

Ref	Recommendation	Council action planned in response to recommendation issued by Audit Wales	Target date for completion of actions	Responsible officer
	Governance			
R1	<p>The Council should review its constitution to strengthen the governance of its development control arrangements. The review should:</p> <ul style="list-style-type: none"> learn from the development control governance arrangements of other Local Planning Authorities (LPAs); develop an agreed Terms of Reference for the Council's Development Control Committee, to clearly state its purpose, role and 	<ul style="list-style-type: none"> The Council has established a Task and Finish Group (T&F group) to develop actions that will improve the Planning Service including decision making. The T&F Group agreed an Action Plan on the 6th July that included a range of tasks. The Action Plan is regularly updated and was revised on the 10th November to include the Audit Wales Planning Report recommendations. A review of the Constitution and current practice, taking into account 	March 2022	Russell Hughes-Pickering (RHP), Task and Finish Group (T&F Group). Support from Development Management (DM), Planning Policy (PP), Legal & Governance Services (L&G) and Democratic Services (DS).

Ref	Recommendation	Council action planned in response to recommendation issued by Audit Wales	Target date for completion of actions	Responsible officer
	<p>responsibilities, and how it links to Corporate Priorities;</p> <ul style="list-style-type: none"> • define what it deems as strategically important and ‘major’ planning applications; • strengthen the Development Control Committee’s scheme of delegation by considering raising the threshold for planning applications called into Committee to allow it to better focus on more strategically important and major applications; • ensure planning applications submitted by or on behalf of the Council’s officers and members are considered by the Development Control Committee and not under officer delegated powers to safeguard against any perceived conflicts of interest and to promote independence and transparency; • review the balance of time local ward members have to speak on planning applications at committee meetings as compared to applicants and objectors; and • review and include the Council’s Planning Code of Practice in the constitution and ensure members understand and act in accordance with it. 	<p>arrangements in other authorities, is currently progressing.</p> <ul style="list-style-type: none"> • A revised Terms of Reference has been drafted. This will be considered by the T&F Group on the 10th December and reported with other proposed changes to the Governance and Audit Committee in January. • Revisions to the Constitution have been drafted that propose amendments to the section on delegations. Draft proposals include automatically reporting: strategic and major applications; council own applications; Member and certain staff applications to Committee. These will initially be discussed by the T&F Group on the 10th December. • A paper has been drafted on the role and time allowed for local Ward Members to speak at Committee. This is to be considered by the T&F Group on the 10th December. • A revised Code of Practice and accompanying Operational Procedures has been drafted. This was initially considered by the T&F Group on the 30th November. Further revisions maybe necessary as other responses are agreed. 		

Ref	Recommendation	Council action planned in response to recommendation issued by Audit Wales	Target date for completion of actions	Responsible officer
R2	The Council should ensure that its Development Control Committee and committee support arrangements comply with data protection principles and the processing of personal information in accordance with the Data Protection Act 2018 and the UK General Data Protection Regulation.	<ul style="list-style-type: none"> Members will receive training on their obligations under the GDPR as part of the new member training and a section on said legislation is now included in the draft protocol for members in planning. 	May / June 2022	RHP, T&F Group, DM, PP, L&G, DS and Customer Contact (CC)
R3	The Council's Development Control Committee members need to ensure that any planning decisions are based on sound material planning considerations, and not applicants' personal circumstances.	<ul style="list-style-type: none"> The T&F Group agreed a 'cooling off' deferral process in July 2021. This was shared and agreed by the Development Control Committee on the 14th July 2021. The process was first applied to cases considered at the Development Control Committee on the 28th July 2021. Several cases have been considered and reported back since. This process will be reviewed after six months so that more permanent arrangements can be put in place. In addition to the cooling off deferral process The T&F Group agreed, on 26th October 2021, to resume a training programme for Members from January 2022. It will initially focus on PPW and Future Wales; the Well Being and FG Act & Socio Economic Duty; Phosphates; and Case Law 	In place	RHP, T&F Group, DM, PP, L&G and DS.
R4	The Council needs to ensure that recordings of its 'in public' Development Control Committee meetings are made publicly	<ul style="list-style-type: none"> In accordance with the requirements of the LGEW Act 2021, arrangements are being made to enable hybrid meetings 	May 2022	DS, CC.

Ref	Recommendation	Council action planned in response to recommendation issued by Audit Wales	Target date for completion of actions	Responsible officer
	available after committee meetings to adhere to the future requirements of the Local Government and Elections (Wales) Act 2021	to be held from May 2022. New equipment is currently being installed in the Chamber December 2021/January 2022. The system will allow meetings to be recorded and made available online.		
R5	The Council should ensure that Development Control Committee decisions relating to 'affordable' homes in the open countryside are made and reported accurately in accordance with the Council's Affordable Housing supplementary guidance	<ul style="list-style-type: none"> • Additional information in relation to compliance with the Affordable Homes SPG has been added to a number of internal council monitoring systems and DC committee reports for AH properties will explicitly state whether the proposal is in-line with the AH SPG. • A review of all current and past AH approvals for AH will be undertaken and their status in accordance with compliance will be updated on the council's systems. • This will be reported to the T&F Group in January 2022. 	March 2022	RHP, T&F Group, DM, PP and DS.
R6	The Council and Development Control Committee should assess the cumulative implications and long-term infrastructure impact of approving single affordable dwellings and TAN 6 planning applications in the open countryside to ensure they contribute sustainably and cohesively to the Council's wider corporate priorities.	<ul style="list-style-type: none"> • A response to this recommendation will look at affordable housing and TAN6 dwellings separately. TAN6 applications by their very definition will need to be located functionally close to the agricultural holding or dwelling. Policies also allow for affordable housing where they are in or adjacent to settlements. • Officer are developing a sustainability checklist for use by members at the Development Control Committee to assess the individual and cumulative impacts of decision making – this is 	March 2022	RHP, T&F Group, DM, PP and DS.

Ref	Recommendation	Council action planned in response to recommendation issued by Audit Wales	Target date for completion of actions	Responsible officer
		<p>being informed by PPW11, Dev Plans Man 3 and the WBFG Act and the corporate priorities of the council. The checklist will be pre-completed for members by planning officers and will form part of the agenda pack at DCC for decision making.</p> <ul style="list-style-type: none"> This will be reported to the T&F Group in January 2022. 		
	<u>Service Planning</u>			
R7	The Council's Planning Service should: More clearly present its performance information and targets in its business plans.	<ul style="list-style-type: none"> Business and Service Plans will be reviewed. A Tender Brief has been drafted for appointing consultants to help clear planning application and enforcement backlogs. This will help inform revised performances targets and measures. 	March 2022	RHP, T&F Group, DM and PP.
R8	Review the effectiveness and efficiency of combining the Development Management Officer and Enforcement roles including the impact on performance.	<ul style="list-style-type: none"> This is to be reviewed when caseloads have been reduced. 	October 2022	RHP, T&F Group and DM.
	<u>Monitoring</u>			
R9	The Council should establish a framework to assure itself that the Development Control Committee contributes cohesively and sustainably to achieving the Council's corporate priorities.	<ul style="list-style-type: none"> Decisions made contrary to officer advice and that do not fulfil the criteria of the checklist being developed under R6 will be annually reviewed as part of the AMR process and reported to the internal audit procedures. 	March 2022	RHP, T&F Group, DM, PP, L&G and DS

Ref	Recommendation	Council action planned in response to recommendation issued by Audit Wales	Target date for completion of actions	Responsible officer
	<u>Well-being of Future Generations</u>			
R10	In making any changes to the planning service, the Council should take the opportunity to consider how it might act more closely in accordance with the sustainable development principle in contributing to the delivery of the Council's well-being objectives when making planning decisions.	<ul style="list-style-type: none"> To review PPW and other monitoring frameworks to identify ways to capture contributions to the delivery of well-being objectives. To review how this can be made clearer in Committee reports. Currently reviewing other authority reports. Briefings / training on the wellbeing and FG Act and sustainability. 	March 2022	RHP, T&F Group, DM, PP, L&G and DS

Planning Task & Finish Group Action Plan

Ref	Action	Time-scale	Status / Comments	Who	Key Documents
Task 1: Set up Task & Finish Group and appoint Chair					
1.1	Agree Membership of a Task & Finish Group	28 th June 2021	Completed		
1.2	Appoint Chair	28 th June 2021	Completed		
1.3	Set up meetings	29 th June 2021	Completed		
1.4	Agree Action Plan	6 th July 2021	Completed Action Plan is a 'live' document. Reviewed at each meeting	T&F Group, RHP	Action Plan (Document TF1) agreed and reviewed
Task 2: Agree arrangements for considering high risk 'red' decisions					
2.1	Consider the introduction a 28 day 'cooling off' period	Mid July 2021	Completed Cooling Off process introduced in July 2021 taking into account Para 9.6.17 – Development Management Manual (Document TF2) Document TF10 – Cooling Off discussed at T&F on 20 th July	T&F, RHP Legal and Governance team (L&G)	Revised wording presented as TF10.
2.2	Agree definition of high risk 'red' cases	Mid July 2021	Completed Draft definitions (Document TF4) considered by T&F group on 20 th July.	T&F, RHP	Draft definitions (Document TF4)
2.3	Seek agreement for new arrangements and timescale for their introduction with other Members	End July 2021	Completed Action Plan shared with Committee and other Members pre DCC meeting on 14 th July.	T&F	Action Plan (Document TF1)

2.4	To agree wording for Constitution and/or Planning Member and Officer Code of Conduct	July / August 2021 – March 2022	<p>Completed Examples shared at T&F Group on 27th July. Changes to Constitution agreed in March 2022. Included – Operational Procedures, Code of Practice, Revised Delegated Powers</p>	T&F, L&G, RHP	Constitution March 2022
2.5	Implement for trial period	July 2021	<p>Completed Applied at DCC on 28th July. Applications have since been referred to the T&F group.</p>	T&F, Cttee	
2.5	The Council's Development Control Committee members need to ensure that any planning decisions are based on sound material planning considerations, and not applicants' personal circumstances. AW Recommendations R3.	November 2021-March 2022	<p>On-going Link to Action 3.10 below. Model reasons where decisions being made contrary to policy. Also to Task 9 Training for Members.</p> <p>The T&F Group agreed a 'cooling off' deferral process in July 2021.</p> <p>The T&F Group agreed, on 26th October 2021, to resume a training programme for Members from January 2022. Should focus on PPW and Future Wales; the Well Being and FG Act & Socio Economic</p>	T&F, Cttee, RHP	

		May 2022	Duty; Phosphates; and Case Law Covered in Members training post elections		
2.6	Delegating authority to the Cabinet Member and CLO Economy and Regeneration	March 2022	Completed Considered as part of changes to delegated powers in Constitution	T&F, L&G, RHP	Constitution March 2022
Task 3: Review Delegation and Committee Processes - The Council should review its constitution to strengthen the governance of its development control arrangements (AW Recommendation R1)					
3.1	Learn from the development control governance arrangements of other Local Planning Authorities (LPAs) AW Recommendation R1a.	Dec 2021	Completed Changes arising from the Action Plan have taken into account practice in other authorities.	T&F, Cttee, L&G, DM, Policy, RHP	
3.2	Amend Delegated Powers <ul style="list-style-type: none"> • 'Red' cases • Applications lacking information • Phosphates • Where Members declare an interest 	Sept – March 2022	Completed Changes to Constitution agreed in March 2022. Included – Operational Procedures, Code of Practice, Revised Delegated Powers	T&F, L&G, RHP	Constitution March 2022
3.3	Review cases to be presented to Committee <ul style="list-style-type: none"> • Major Applications • Council Own Development Define what it deems as strategically important and 'major' planning applications. AW Recommendation R1c Strengthen the Development Control Committee's scheme of delegation by considering raising the threshold for planning	Sept – March 2022	Completed Changes to Constitution agreed in March 2022. Included – Operational Procedures, Code of Practice, Revised Delegated Powers Revisions to delegated powers differentiates between strategic / major	T&F, L&G, RHP, Development Management (DM) team	Constitution March 2022

	applications called into Committee to allow it to better focus on more strategically important and major applications. AW Recommendations R1d		applications and more minor applications.		
3.4	Ensure planning applications submitted by or on behalf of the Council's officers and members are considered by the Development Control Committee and not under officer delegated powers to safeguard against any perceived conflicts of interest and to promote independence and transparency. AW Recommendation R1e	Nov 2021 – March 2022	Completed Revisions to the Constitution include automatically reporting: strategic and major applications; council own applications; Member and certain staff applications to Committee.	T&F, L&G, DM	Constitution March 2022
3.5	Review the balance of time local ward members have to speak on planning applications at committee meetings as compared to applicants and objectors. AW Recommendation R1f	Nov 2021 – March 2022	Completed A paper has been considered on the role and time allowed for local Ward Members to speak at Committee. Changes are included in Constitution.	T&F, L&G, Democratic Services, DM, RHP	Constitution March 2022
3.6	Agree Terms of Reference Develop an agreed Terms of Reference for the Council's Development Control Committee, to clearly state its purpose, role and responsibilities, and how it links to Corporate Priorities. AW Recommendation R1b	Nov 2021-March 2022	Completed The Terms of Reference has been revised in the Constitution.	T&F, L&G, Democratic Services (DS)	Constitution March 2022
3.7	Review size of Committee	Oct 2021 – March 2022	Completed Discussed at the T&F Group meeting on 30 th November. Agreed to reduce to 15 at Council on 27 th January 2022.	T&F, L&G, DS, DM	Constitution March 2022

3.8	<p>Introduce new Planning Members and Officer Code of Conduct & Protocol for considering applications</p> <p>Review and include the Council's Planning Code of Practice in the constitution and ensure members understand and act in accordance with it. AW Recommendation R1g</p>	Oct – March 2022	<p>Completed</p> <p>A Code of Practice and accompanying Operational Procedures has been included in the Constiution.</p>	T&F, L&G, DS, RHP, DM	Constitution March 2022
3.9	<p>Provide model reasons for referring a case to Committee.</p>	March 2022	<p>Completed</p> <p>Included in Code of Practice</p>	T&F, RHP, DM	Constitution March 2022
3.10	<p>Provide advice on providing reasons for cases contrary to policy.</p> <p>The Council's Development Control Committee members need to ensure that any planning decisions are based on sound material planning considerations, and not applicants' personal circumstances. AW Recommendations R3.</p>	March 2022	<p>Completed</p> <p>Advice contained in Code of Practice. Further advice to be given in training and briefing sessions for Members</p>	T&F, RHP, DM	Constitution March 2022
3.11	<p>Review SIP Process and Protocols</p>	March 2022	<p>Completed</p> <p>Included as part of changes to Constitution and Protocol</p>	T&F, L&G, DS, RHP, DM	Constitution March 2022
3.12	<p>The Council should ensure that it's Development Control Committee and committee support arrangements comply with data protection principles and the processing of personal information in accordance with the Data Protection Act 2018 and the UK General Data Protection Regulation. AW Recommendation 2.</p>	May / June 2022	<p>Completed</p> <p>Members received training on their obligations under the GDPR as part of the new member training and a section on said legislation has been included in the Code of Practice</p>	T&F, DS, L&G, Data Protection, DM, RHP	Constitution March 2022
3.13	<p>The Council needs to ensure that recordings of its 'in public' Development Control Committee meetings are made publicly available after committee meetings to adhere to the future</p>	May / June 2022	<p>On-going</p> <p>In accordance with the requirements of the LGEW Act 2021, arrangements</p>	T&F, DS, RHP	

	requirements of the Local Government and Elections (Wales) Act 2021. AW Recommendation R4.		have been put in place so that hybrid meetings can be held from May 2022. The system will allow meetings to be recorded and made available online. A decision is yet to be made on making the recordings available.		
3.14	Review Constitution	March 2022	Completed	T&F, L&G, DS, RHP, DM, Planning Policy (PP)	Constitution March 2022
Task 4: Review Impact of Decision Making on delivery of Sustainable Development and Well Being and Future Generations Objectives					
4.1	The Council should establish a framework to assure itself that the Development Control Committee contributes cohesively and sustainably to achieving the Council's corporate priorities. AW Recommendation R9	Jan – Dec 2022	On-going A framework is being developed. Information can be reviewed annually as part of the AMR process.	T&F, Policy and Performance, DM, Planning Policy, RHP	
4.2	In making any changes to the planning service, the Council should take the opportunity to consider how it might act more closely in accordance with the sustainable development principle in contributing to the delivery of the Council's well-being objectives when making planning decisions. AW Recommendation R10.	Jan – Dec 2022	On-going To review PPW and other monitoring frameworks to identify ways to capture contributions to the delivery of well-being objectives and links to the Corporate Strategy. The Corporate Strategy for 2022-2027 sets out how sustainable development principles inform objectives and actions in the plan.	T&F, Policy and Performance, DM, Planning Policy, RHP	

			Briefings / training on the wellbeing and FG Act and sustainability.		
4.3	The Council and Development Control Committee should assess the cumulative implications and long-term infrastructure impact of approving single affordable dwellings and TAN 6 planning applications in the open countryside to ensure they contribute sustainably and cohesively to the Council's wider corporate priorities. AW Recommendation R6.	Jan – Dec 2022	<p>On-going</p> <p>The T&F group will look at affordable housing and TAN6 dwellings separately. TAN6 applications by their very definition will need to be located functionally close to the agricultural holding or dwelling. Policies also allow for affordable housing where they are in or adjacent to settlements.</p> <p>Officers are developing checklists for use when considering individual and cumulative impacts of decision making – this is being informed by PPW11, Dev Plans Man 3 and the WCFG Act and the corporate priorities of the council.</p> <p>This working is still progressing.</p>	T&F, Policy and Performance, DM, Planning Policy, RHP	
4.4	The Council should ensure that Development Control Committee decisions relating to 'affordable' homes in the open countryside are made and reported accurately in accordance with the Council's Affordable Housing	Jan - Dec 2022	<p>On-going</p> <p>Additional information is being included in committee reports for AH properties that explicitly state whether</p>	T&F, DM, Planning Policy, RHP	

	supplementary guidance. AW Recommendation R5.		the proposal is in-line with the AH SPG. A review of all current and past AH approvals for AH is currently being undertaken to assess compliance with policies and SPG.		
Task 5: Review Role of Local Member					
5.1	Agree advice and protocol for local Member	March 2022	Completed Includes in revisions to Constitution – operational procedures and Code of Practice	T&F, L&G, DS, RHP, DM	Constitution March 2022
5.2	Review protocol for contact by officers during application stage and prior to Committee	March 2022	Completed Includes in revisions to Constitution – operational procedures and Code of Practice	T&F, RHP, DM	Constitution March 2022
5.3	Consider whether the local Member should be able to vote if Member of the Committee	March 2022	Completed Includes in revisions to Constitution – operational procedures and Code of Practice	T&F, L&G	Constitution March 2022
5.4	Agree process for delegated powers where the local Member has declared an interest	March 2022	Completed Includes in revisions to Constitution – operational procedures and Code of Practice	T&F, L&G, DS, RHP, DM	Constitution March 2022
Task 6: Protocol for Officer Advice at Committee					
6.1	Review current arrangements	Sept 2021	Completed Discussed current arrangements at T&F on	T&F, L&G, DS, RHP, DM	

			20 th July. Current approach not proposed to change.		
6.2	Agree protocol for considering applications at Committee	Dec 2021	Completed Current approach not proposed to change.	T&F, L&G, DS, RHP, DM	
Task 7: Improve Service Planning					
7.1	More clearly present its performance information and targets in its business plans. AW Recommendation R7	March 2022 and October 2022	On-going A commitment to developing performance data has been included in business and service plans for 202/23. A target being given for performance and service standards to be developed and agreed by October 2022. The timeframe reflects time to progress other elements of the Action Plan, staffing issues, the need to put arrangements in place to engage consultants and deal with complaints. The Council has now appointed consultants to help clear planning application and enforcement backlogs. This will help inform revised performances targets and measures.	T&F, DM	

7.2	Review the effectiveness and efficiency of combining the Development Management Officer and Enforcement roles including the impact on performance. AW Recommendation R8.	Dec 2022	On-going This is to be reviewed when caseloads have been reduced.	T&F, DM, RHP	
7.3	Review resources, consider actions to clear backlogs and add resilience to the team	March 2022	On-going The Council has appointed consultants to help clear planning application and enforcement backlogs. The Council has also appointed Cadnant, who specialise on historic and listed buildings, to assist with the Y Hen Coleg proposals. The Council is also seeking help with ecology demands arising from phosphate issues. The Council is also seeking to recruit staff for its policy and DM teams	T&F, DM, RHP	
Task 8: Improve quality of information submitted to the LPA					
8.1	Re-instate regular agent forum meetings	October 2021	On-going T&F considered on 20 th July. Agent meeting held on 22nd October.	T&F, DM	
8.2	Review guidance for applicants and agents - to promote importance of pre-application advice	Dec 2022	On-going Work has been delayed due to other pressures.	T&F, DM	

			Reviews will be considered this Autumn.		
8.3	Review guidance for applicants and agents –to emphasise importance of quality submission – adherence to policy, appropriate scale, location and supporting information.	Dec 2022	On-going Work has been delayed due to other pressures. Reviews will be considered this Autumn.	T&F, DM	
8.4	Review guidance for applicants and agents – lobbying Members and submission of information prior to Committee	Dec 2022	On-going Changes have been made in the Code of Practice. Further guidance to be provided to agents,	T&F, DM	
Task 9: Provision of Training and Briefings for Members					
9.1	Set up programme for training and regularly briefings, to include: <ul style="list-style-type: none"> • PPW and Future Wales • Well Being and FG Act & Socio Economic Duty • Phosphates • Case Law 	July 2022	On-going Training was provided to all Members following the elections. Further training will be provided through regular briefing, the first provided in July	T&F, L&G, DS, RHP, DM, PP	
9.2	Agree training for Councillors post Election	May / June 2022	Completed Training was provided in May 2022	T&F, DS	
Task 10: To review the funding of resources to provide greater enforcement of unauthorised developments					
10.1	Review the effectiveness and efficiency of combining the Development Management Officer and Enforcement roles including the impact on performance. AW Recommendation R8.	June / Sept / Dec 2022	On-going Consider alongside 7.3 above. This is to be reviewed when caseloads have been reduced.	T&F, DM, RHP	

10.2	Prepare a report to cover: <ul style="list-style-type: none"> • Staff resources • Number of cases • Breakdown by type • Income 	Sept 2021	<p>Completed Update presented to T&F Group on 7th September and 25th January 2022.</p> <p>Support to be provided through appointment of consultants. Tender to be published by 11th Feb 2022.</p>	RHP, DM	
10.3	Consider necessity to report to relevant Scrutiny Committee	Dec 2022	<p>On-going Further information to be provided to T&F group</p>	T&F	
10.4	Consider budget provision and agree new resources if considered necessary	March 2022	<p>Completed Discussed at T&F Group on 26th October. Budgets subsequently agreed to appoint consultants and to enhance team with additional full time permanent post.</p>	T&F	
10.5	Review Enforcement Charter – characterisation of cases and timescales for dealing with enforcement complaints	Dec 2022	<p>On-going To be reviewed subject to the above</p>	T&F, RHP, DM	
10.6	Consider other powers – Proceeds of Crime	Dec 2022	<p>Not Started Internal position made to concentrate on arrangements to clear backlog and improve performance before tackling new approaches</p>	T&F, L&G, RHP, DM	
10.7	Introduce regular monitoring and reporting of enforcement performance data	March 2022	<p>On-going Included as part of Business and Service Plan for 2022/2023.</p>	T&F, RHP, DM	

			Performance and service standards to be considered in autumn 2022.		
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Council Response Form

Council action planned in response to the recommendations issued by Audit Wales

Council: Ceredigion County Council

Report title: Springing Forward – Review of Strategic Asset Management

Issue date: June 2022

Document reference: 2970A2022

Ref	Recommendation	Council action planned in response to recommendation issued by Audit Wales	Target date for completion of actions	Responsible officer
R1	<p>Early engagement on key changes to asset use.</p> <p>The Council should ensure that it undertakes early engagement with Council Members, the wider Leadership Group, citizens and other stakeholders on the impact that key changes within its Hybrid Working Strategy will have on some of the Council's key assets, such as the offices at Penmorfa and the future</p>	<p>The Hybrid Strategy and Interim Hybrid Working Policy have been developed through significant engagement of the workforce. This has informed the New Ways of Working Group on current and expected patterns of working as well as the level and type of desk space required. As a result, Pilot Hybrid</p>	<p>March 2023 – for developing options around future use of assets</p>	<p>RHP / New Ways of Working Group</p>

Ref	Recommendation	Council action planned in response to recommendation issued by Audit Wales	Target date for completion of actions	Responsible officer
	plans for how citizens will access services.	<p>Spaces have been set up to help monitor new approaches in practice.</p> <p>This will help gauge the level of space and opportunities for using space and delivering services differently. The next phase will involve engagement with a wide range of stakeholders including external partners and citizens to consider options and optimise use of the Council's assets.</p>		
R2	<p>Workforce vision and planning</p> <p>The Council's processes around its asset planning, monitoring and governance could be strengthened by:</p> <ul style="list-style-type: none"> refreshing its 2018 Service and Corporate Asset Management Plans, ensuring that these reflect the current strategic long-term vision for assets and that they are integrated into business planning; 	<p>It is recognised that improvements can be made to have a more strategic long-term vision and plan for its assets. It will do this through:</p> <ul style="list-style-type: none"> A refresh of the Council's Corporate Asset Management Plan. A review of its asset management and asset development arrangements so that they are more strategic and streamlined. 	<p>September / October 2022 – to review existing arrangements for asset management and development.</p> <p>March 2023 – for preparing a new draft Corporate Asset Management Plan, including a 10 year plan for</p>	RHP

Ref	Recommendation	Council action planned in response to recommendation issued by Audit Wales	Target date for completion of actions	Responsible officer
	<ul style="list-style-type: none"> developing robust plans to manage the risks identified by the 2019 condition survey; and clearly articulating how it is using the Sustainable Development principle to shape future asset-focused strategies and plans. 	<ul style="list-style-type: none"> The development of a 10 year capital programme for maintaining, improving and where appropriate disposing of Council assets. 	maintaining assets.	
R3	<p>Benchmarking</p> <p>The Council should develop and use further benchmarking data to:</p> <ul style="list-style-type: none"> more routinely support the development of its Corporate and Service Asset Management plan; and strengthen its business planning and self-assessment arrangements. 	The Council will review its use of data to inform the preparation of plans and provide a framework for improving arrangements in the future.	March 2023 – to develop benchmarking data as plans are drafted.	RHP

Council Response Form

Council action planned in response to the recommendations issued by Audit Wales

Council: Ceredigion County Council

Report title: Springing Forward – Review of Strategic Workforce Management

Issue date: June 2022

Document reference: 2971A2022

Ref	Recommendation	Council action planned in response to recommendation issued by Audit Wales	Target date for completion of actions	Responsible officer
R1	<p>Workforce vision and planning</p> <p>The Council's workforce vision, planning and monitoring could be strengthened by:</p> <ul style="list-style-type: none"> refreshing its corporate workforce vision; having a clearer integration with its tier one annual Business Planning process; an annual review of its strategic workforce plans; 	<p>Development of five-year Strategic Workforce Plan 2022 – 2027 in progress coinciding with new administration and Corporate Strategy.</p> <p>The process will also include the following:</p> <ul style="list-style-type: none"> Review of annual reporting mechanism of strategic workforce plans and integration with business planning process Review of Hybrid Working Strategy including the introduction of targets and timescales 	<p>September/October 2022 - Services to complete Strategic Workforce Planning Toolkit</p> <p>December 2022 – Implement Hybrid Working Strategy targets and timescales</p> <p>March 2023 – drafting and approval of Strategic</p>	Geraint Edwards

Ref	Recommendation	Council action planned in response to recommendation issued by Audit Wales	Target date for completion of actions	Responsible officer
	<ul style="list-style-type: none"> developing a more comprehensive picture of workforce skills and competencies; more clearly demonstrating how it consistently uses the sustainable development principle to support the delivery of its workforce planning; and developing specific targets and timescales for its Hybrid Working Strategy success measures. 	<ul style="list-style-type: none"> Research skills competency framework and development workforce assessment process 	<p>Workforce Plan 2022 – 2027</p> <p>March 2023 – Skills competency framework development and assessment</p>	
R2	<p>Benchmarking</p> <p>The Council should undertake more routine workforce benchmarking to strengthen its business planning and self-assessment arrangements</p>	<ul style="list-style-type: none"> The Council will review its current benchmarking measures and use of data to inform the preparation of plans and provide a framework for improving future self-assessment arrangements. 	March 2023	Geraint Edwards

Cyngor Sir CEREDIGION County Council

REPORT TO: Governance and Audit Committee

DATE: 27th of September 2022

LOCATION: Hybrid

TITLE: Estyn Inspections, Summer term 2022

PURPOSE OF THE REPORT: For information

REASON THE COMMITTEE HAS REQUESTED THE INFORMATION: For information

Estyn has resumed its inspections of schools with pilot visits having taken place in the Spring term 2022 and the inspection regime continuing in its usual way from the Summer term 2022. The Inspection Framework has been revised and now gradings such as Unsatisfactory, Adequate, Good and Excellent are no longer given for various elements of the Framework. Rather, the appraisal narrative notes a school's strengths and areas for improvement for specific aspects of their work. Estyn's recommendations continue and Estyn will come to an opinion if the school requires significant improvements and requires a second visit from Estyn within a certain period.

The following schools were inspected recently:

- Ysgol Uwchradd Aberteifi
<https://www.estyn.gov.wales/provider/6674044>
- Ysgol Llangwryfon
<https://www.estyn.gov.wales/provider/6672310>
- Ysgol Penglais
<https://www.estyn.gov.wales/provider/6674047>

None of the three schools require a second visit and the recommendations raised by Estyn are included in the School Development Plans of these schools.

WELLBEING OF FUTURE GENERATIONS:

Has an Integrated Impact Assessment been completed? If, not, please state why

Summary:

Long term:

Collaboration:

Involvement:

Prevention:
Integration:

RECOMMENDATION: This item is for information.

REASON FOR RECOMMENDATION: This item is for information.

Contact Name: Mary Davies
Designation: Corporate Manager - School Improvement
Date of Report: 8:09:22
Acronyms:

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Cyngor Sir CEREDIGION County Council

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Designation: Corporate Manager - School Improvement
Date of Report: 8:09:22
Acronyms:

CEREDIGION COUNTY COUNCIL

Report to:	Governance and Audit Committee
Date of meeting:	27 September 2022
Title:	Internal Audit Progress Report 1/4/22 – 30/6/22
Purpose of the report:	To provide Members with an update on the work undertaken by internal audit during the above period

The Committee considered the annual Internal Audit Strategy 2022/23 at its meeting in March 2022 which also identified the main areas of work for the 2022/23 interim operational audit plan. The Plan included reviews carried forward from the previous year's audit plan, routine audits eg grant certifications and work prioritised dependant on risk, on which the Internal Audit Section can form its assurance opinion.

For 2022/23, a risk assessment was undertaken in addition to information from the Council's Corporate Risk Register as new risks to the Council continue to emerge, which are constantly changing. IA will therefore assess its work on an on-going basis, considering the Council's changing needs and priorities regularly.

This progress report notes the steps made to date toward delivery of the audit strategy, by providing a summary of the work undertaken. It also documents the current resource position, and the Section's improvement plan.

Recommendation(s):	To consider the work undertaken and current position of the Internal Audit Section
Reasons for decision:	That the Committee is satisfied that the Internal Audit Section is undertaking sufficient and appropriate work in order to provide a realistic assurance at year-end, whilst adding value and assisting the Council in achieving its objectives.
Appendices:	Internal Audit Progress Report 1/4/22-30/6/22
Corporate Lead Officer:	Elin Prysor CLO-Legal and Governance / Monitoring Officer
Reporting Officer:	Alex Jenkins Corporate Manager – Internal Audit
Date:	27 July 2022

Mae'r adroddiad yma ar gael yn Gymraeg.
This report is available in Welsh.

Gwasanaethau Cyfreithiol a Llywodraethu Legal and Governance Services

Gwasanaeth Archwilio Mewnol
Internal Audit Service



Adroddiad Cynnydd Archwilio Mewnol
Internal Audit Progress Report
1 April 2022 – 30 June 2022



Report Prepared by: Alex Jenkins,
Corporate Manager – Internal Audit

Date of Issue: 27 July 2022

Presented to Governance & Audit
Committee: 21 September 2022

ADRODDIAD CYNNYDD ARCHWILIO MEWNOL

INTERNAL AUDIT PROGRESS REPORT

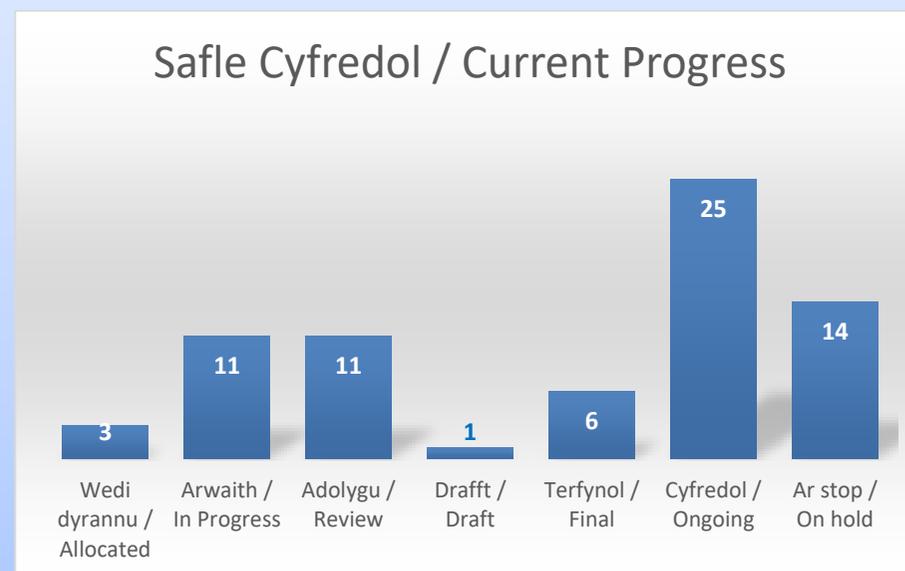
01/04/2022 – 30/06/2022

1 INTRODUCTION

- 1.1 The Internal Audit Strategy and Annual Plan for 2022/23 was approved by the Committee (GAC) on 10 March 2022.
- 1.2 The initial risk assessment has been carried out by the Corporate Manager – Internal Audit (CMIA) and additional consideration was given to risks within the Corporate Risk Register when compiling the operational plan for 2022/23. Risks to the Council continue to emerge from the pandemic and more recently, the Cost of Living crisis. The CMIA has therefore assessed the work on an on-going basis, considering the Council's changing needs and priorities regularly.
- 1.3 The purpose of this report is to update the GAC on the work undertaken by the Internal Audit (IA) service during the first quarter of the 2022/23 financial year and highlight any areas of concern that may have arisen during the completed audits. A copy of the Interim Audit Plan as at 30/6/22 is attached in Appendix 1.

2 AUDIT WORK UNDERTAKEN

2.1 Audit Plan Progress:



- 2.2 As at 30/6/2022 a total of 87 items appear in the operational Interim Audit Plan. These are made-up of 71 items that have mainly either been carried-forward from the previous year (eg audits that are already in progress) or are annual pieces of work (eg grants) which have been included as 'planned' items. The remaining 16 items have been added during the first quarter, ie unplanned. (The unplanned items are highlighted in Appendix I).
- 2.3 Six pieces of work were finalised during the quarter, as per table below, which will be considered in determining the IA annual opinion:

Audit Area	Type of Audit	Assurance
<p>Harbours Account</p> <p>Scope: Account audit. The Council must prepare annual accounts following proper practices as set out in the One Voice Wales/Society of Local Council Clerks publication, Governance and Accountability for Local Councils in Wales – A Practitioners' Guide. The Guide states that bodies may prepare their accounts in the form of an annual return prepared by Audit Wales, which includes internal audit input regarding account preparation. The audit is in respect of the 2020/21 account.</p>	Account	N/A
<p>Treasury Management – Key Control</p> <p>Scope: Key financial risk area. Completed every 3-years. The review considers the arrangements for both investments and loans: monitoring registers, reconciliation with MAS, compliance with policy, authorisation, separation of duties and contingency plans. It does NOT include the ICT system</p>	Key Control	High
<p>AGS Framework Review 2021/22 - Update</p> <p>Scope: Governance review which considers the effectiveness of the Governance Framework, especially in the areas specifically addressed in the AGS action plan.</p>	Governance	High
<p>Coroners – Revised Report</p> <p>Scope: Requested to undertake a further comparison of CCC FD fees against FD fees of other Welsh LA's</p>	Advisory	N/A

Audit Area	Type of Audit	Assurance
Emergency Welcome Centre Scope: Provide advice for governance arrangements and controls at Emergency Welcome Centre	Advisory / Governance	N/A
Direct Payments – Governance, Control & Documentation Scope: A member of IA staff attends the meetings to ensure governance & controls are considered when implementing new systems and improving existing systems & procedures within the Direct Payments service.	Advisory / Governance	N/A

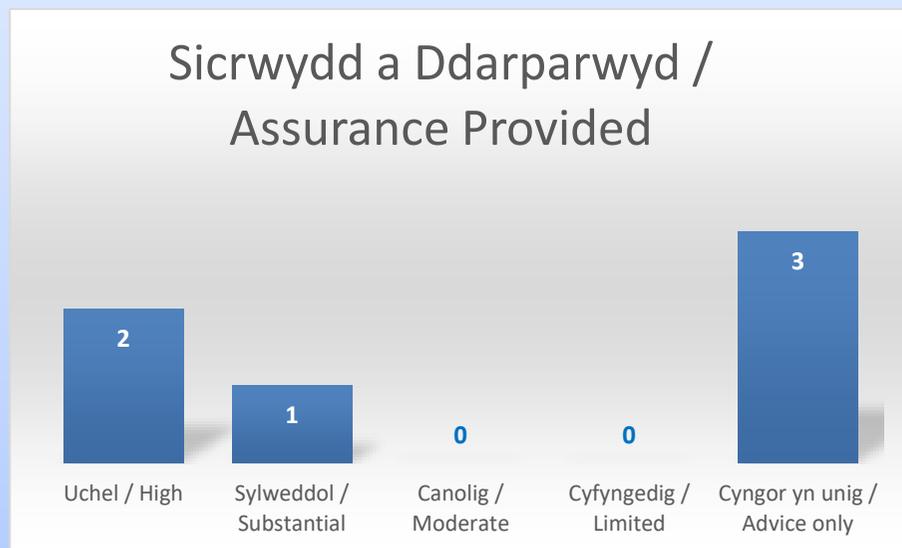
2.4 Examples of good practice noted from the finalised audits have been listed below, which also form part of the annual assurance process:

- **Harbour account** – detailed working papers available which reconcile to ledger to support the account.
- **AGS Framework Review** – Effective collaboration throughout relevant services and effective workshop to discuss measures taken. Prompt response by services to improve processes in response to AW report.
- **Treasury Management Key Control** – Regular monitoring is in place and regular reporting is timely, adequate and compliant.
- **Emergency Welcome Centre** – Effective collaboration in consideration of ‘cash’ security, record management and monitoring of Emergency Cash Fund.
- **Direct Payments – Governance, Control & Documentation**– Effective collaboration within the Governance, Control & Documentation Task & Finish Group to ensure consideration to governance, risk & controls throughout the Direct Payment Support Service during their transfer in-house from and external provider.

2.5 A total of 25 items are on-going pieces of work (as noted in Appendix I), from which IA have extracted examples of good practice achieved during the quarter, which again will be considered in forming the IA annual opinion:

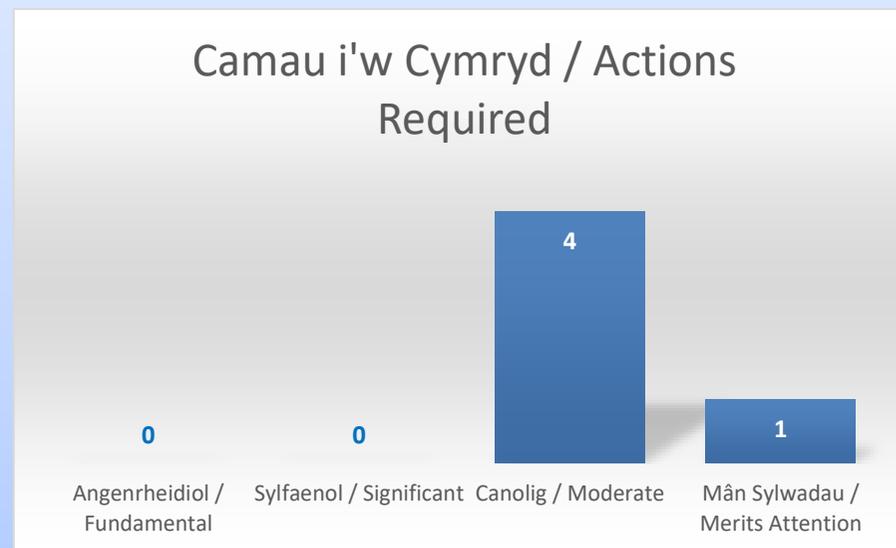
- **Grants (paid due to pandemic or Cost of Living crisis)** – good collaboration between CMs, officers & services has supported effectiveness of systems; officers' awareness of error / fraud as well as need for promptness has helped ensure correct payments made in timely manner; auditing claims prior to payment has reduced risk of need to recover incorrect / fraudulent payments; use of 'ActiveData' data analytics system has enabled payments to be checked against intel received from National Anti-Fraud Network and other sources
- **Annual Governance Statement** – framework in place; annual improvement plan standard item on GAC agenda for progress monitoring
- **Direct Payments** – Steering group in place. Phase 1 completed and Governance, Control & Documentations Task & Finish Group ensured that sufficient governance & controls were in place to reduce risks when the Direct Payment Support Service was brought in-house from an external provider. Good collaboration continues throughout the Council in preparation for Phase 2 (improvement).
- **Emergency Planning & Business Continuity** – Corporate Business Continuity Plans being reviewed and updated by services & Civil Contingencies staff. Training was given to CMs in order to develop plans to respond to ransomware attacks. Emergency Rest Centre Procedures Pack produced for staff; volunteers recruited and trained to run the centres, to ensure proper procedures in place in the event of an incident
- **Code of Conduct** – internal audit and governance officer input provided to assist Learning & Development in the production of a training e-module on Code, Ethics & Fraud.
- **LG & Elections (Wales) Act 2021** – arrangements in hand to ensure correct split of Elected Members / Lay Members on GAC from May, as required by Act.
- **Corporate Project Management Panel** – new project proposals put forward & actions requested by panel where appropriate.
- **Corporate Management Workshop** – updates to managers re ways of working, carers policy, wellness strategy and wellbeing objectives for information and role development.
- **Cyber Resilience & Information Governance Group** – the Group will provide operational support, preparedness and direction to address and reduce cyber risks and improve the Council's cyber security, information security and governance. It shall act as a source of knowledge and expertise and will oversee and monitor the Information Governance and Cyber Security Risks and Action Plans.
- **NMWAG** - North & Mid Wales Auditor Group - Fraud aims to share knowledge & skills re countering fraud to build resilience throughout LAs. Fraud responses to Audit Wales shared to determine future direction of group.

2.6 The levels of assurance provided for the audits completed are as follows:



2.7 A guide to the criteria used to determine the overall assurance is shown in Appendix II.

2.8 A total of five 'actions required' are recommended in the finalised reports issued of which none were deemed fundamental or significant:



2.9 The criteria used to determine the 'actions required' is outlined in Appendix III.

2.10 There were no significant or fundamental actions issued in Quarter 1.

3 RESOURCES

3.1 The IA Structure, as noted in Appendix IV, has been fully resourced during the first quarter of 2022/23.

3.2 A total of 166 days have been dedicated to audit work during the period 1 April 2022 to 30 June 2022, representing 23% of the assessed days estimated as required to complete the audit plan to year-end (or 90% of days required to complete the audit plan for the first quarter).

3.3 The CMIA continues to support the Welsh Chief Auditors Group (WCAG) which ensures best practice and consistency between all authorities; and the North & Mid Wales Chief Auditors Group (NMWCAG) to compare practices and share generic documentation. These meetings continue to be held using 'Teams'.

3.4 During the year, the NMWCAG introduced a Counter Fraud Sub-Group, which dedicates more time to specific subjects. This Sub-Group is attended by the Audit Manager (via Teams).

3.5 All members of staff ensure they meet any continuous professional development conditions, and complete the Council's mandatory training requirements. During this period:

- All members of audit staff have undertaken the required Council's webinars and e-learning training modules, the e-learning system has been redeveloped and several members of audit staff have undertaken refresher e-learning modules.
- The CMIA has completed all training on the Council's Ceredigion Manager's Programme.
- The CMIA has 'attended' regular webinars hosted by the Institute of Internal Auditors (IIA), CIPFA, Data Cymru.
- Two members of staff are continuing their Institute of Internal Auditors' qualification; and
- All members of staff have 'attended' Pentana's Super User training.

3.6 Arrangements are also in place to continuously develop IA staff's audit / digital / ICT and counter fraud skills via training and subscribing to information sources such as CIPFA's Better Governance Forum.

3.7 All IA staff are currently working from home.

4 IMPROVEMENT PLAN 2022/23

Ref	Conformance with Standard	Action Required	Target Date
Std 1210	<p>5.3.1 Does the CAE hold a professional qualification, such as CMIIA/CCAB or equivalent?</p> <p>The CMIA in post up to 31/12/21 held the Chartered Institute of Public Finance and Accountancy's qualification, CIPFA, which is a CCAB body. The CMIA in post from 1/1/22 is currently studying for the IIA's Certificate in Internal Audit.</p>	CMIA to achieve CMIIA professional qualification.	Within 3 years of appointment
Std 1311	<p>5.4.5 Does ongoing performance monitoring include obtaining stakeholder feedback?</p> <p>No QCQs issued during pandemic. QCQs to be issued in Q2 for work undertaken in Q1. QCQ template also being setup on Pentana.</p>	Once Audit Plan in place, QCQs to be issued to auditees.	During 2022/23
Std 2010	<p>6.1.1 Has the CAE determined the priorities of the internal audit activity in a risk-based plan and are these priorities consistent with the organisation's goals?</p> <p>The IA Strategy & Plan does not set out the priorities of IA activity nor how they align to the organisation's goals.</p>	Produce risk-based audit plan in accordance with services' road plans which clearly sets out the priorities of audits consistent to the Council's priorities.	During 2022/23
Std 2050	<p>6.1.15 Using other sources of assurance.</p> <p>Assurance mapping system in place and is discussed at weekly team meetings, currently being reviewed and developed – will be input onto Pentana for monitoring and updating.</p>	Assurance mapping system to be reviewed and developed to further embed into IA work.	Throughout 2022/23
Std 2500	<p>6.6.1 Where issues have arisen during the follow-up process has the CAE considered revising the internal audit opinion?</p> <p>Due to the pandemic, no follow-ups were conducted in 2021/22. Follow-ups for ongoing audits will be monitored on Pentana.</p>	The follow-up audits due will be carried forward to 2022/23.	31 March 23

AJ	<p>Pentana (MKI) system not found as useful when working reactively.</p> <p>Pentana (MKI) will implemented fully for planned audits, but some reactive work will continue to be conducted & recorded using shared electronic folders.</p>	<p>The system has been evaluated and IA team have undertaken training on the system. IA plan to be input for Q3&Q4.</p>	<p>31 March 23</p>
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<u>Interim Audit Plan 2022/23</u>		
Audit Area	Scope	Status
Changes due to Pandemic		
Risk assessed reactive work due to pandemic	IA will undertake reviews of systems and procedures and any other work where it is identified that the Service can add value to the Council's operations during the pandemic.	
- Tenancy Hardship Grant	2021 Grants – checking a sample of applications prior to payment; validating information and documentation; other testing as appropriate; sitting on queries / appeals panel.	Unplanned On-going
- Cost of Living Payments	A member of IA staff attends meeting to ensure satisfactory arrangements are in place within CSC, to provide advice and guidance when required. Assurance assessed re procedures in place to ensure payments are made effectively and accurately and controls are in place to reduce the risk of fraud.	Unplanned On-going
- Unpaid Carers Payments	2022 Grants – checking a sample of applications prior to payment; validating information and documentation; other testing as appropriate; sitting on queries / appeals panel.	Unplanned On-going
- Registration Service - income collection	Registration Service – independent verification of payments received and banked during office closure. To be undertaken once staff return to offices.	On Hold
- Free School Meals	Scope: Free School Meals – check in-lieu allowances paid - £39/fortnight/pupil by Tesco/Sainsbury voucher or cash (c1,200 pupils) Additional checking to be undertaken.	In Progress
- Personal Protection Equipment (PPE)	During transition from stock-taking spreadsheets to computerised system, audit will ensure correct levels of stocks are transferred between the two systems to provide an independent check to the service.	
Housing Support Grant - Steering Group	A member of IA staff attends the group tasked with ensuring satisfactory arrangements are in place for Governance with regards to the Housing Support Grant and to provide advice and guidance when required. Assurance assessed re procedures in place to ensure the Group is adequately supported and achieves its objectives.	Unplanned On-going
Economic Adjustment - Silver Command	A member of IA staff attends the group tasked with ensuring satisfactory arrangements are in place within CSC, to provide advice and guidance when required. Assurance assessed re procedures in place to ensure the Group is adequately supported and achieves its objectives.	Completed

Key Control Audits:		
Main Accounting System	Key financial risk area. Completed every 3-years. The review considers the arrangements for: monitoring, reconciliation, compliance with policy, authorisation, separation of duties and contingency plans for the Council's main accounting system. It does NOT include the ICT system.	In Progress
Council Tax	Key financial risk area. Completed every 3-years. The review considers the arrangements for processing council tax payments: separation between creating and collecting a debit; methods of payment; reconciliation of debit to valuation list; promptness of processing amendments; daily postings to accounts; unidentified items posted to suspense; missed payments; monitoring of collection rates; payments reconciled to ledger; security of system. Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager IA.	In Review
Treasury Management	Key financial risk area. Completed every 3-years. The review considers the arrangements for both investments and loans: monitoring registers, reconciliation with MAS, compliance with policy, authorisation, separation of duties and contingency plans. It does NOT include the ICT system	Completed Quarter 1
National Non-Domestic Rates	Key financial risk area. Completed every 3-years. The review considers the arrangements for processing NNDR payments: separation between creating and collecting a debit; methods of payment; reconciliation of debit to valuation list; promptness of processing amendments; daily postings to accounts; unidentified items posted to suspense; missed payments; monitoring of collection rates; payments reconciled to ledger; security of system. It does NOT include the ICT system.	In Progress
Creditors	Key financial risk area. Completed every 3-years. The review considers the arrangements for: authorising and paying costs incurred by the Council and the controls over the payment process. The scope does NOT include consideration of the nature of the expenditure or whether VFM was achieved. Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager AM.	In Review
Sundry Debtors	Key financial risk area. Completed every 3-years. The review considers the arrangements for raising invoices to recover debt owed to the Council: accuracy of value and coding; promptness of raising bills; monitoring of collection rates; debt independently reconciled to ledger; arrears recovery in progress; invoices accountable; security of system. Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager AM.	In Review

Payroll	Key financial risk area. Completed every 3-years. The review considers the arrangements for processing payroll: separation between creating and amending job roles and staff details and processing payroll; security of system. It does NOT include the ICT system.	In Progress
HR/Payroll Amendments	System audit of controls in place on amendments to staff payroll e.g. regrading, change in job role etc. The audit will also consider correct authorisation of amendments and separation of duty.	
Follow-up of Recommended Actions 2018/19 onwards	Assurance that previous recommended actions made have been implemented where appropriate. A prepared spreadsheet of all actions requiring re-viewing which is regularly updated.	On Hold
Corporate Governance		
Annual Governance Statement	Contribute to finalising 2021/22 AGS & 2022/23 procedures, as necessary throughout the year.	On-going
Annual Governance Statement Framework Review 2021/22 - Update	Governance review which considers the effectiveness of the Governance Framework, especially in the areas specifically addressed in the AGS action plan.	Completed Quarter 1
Annual Governance Statement Framework Review 2022/23	Governance review which considers the effectiveness of the Governance Framework, especially in the areas specifically addressed in the AGS action plan.	
Emergency Planning & Business Continuity Management Group	A member of IA staff attends the group tasked with ensuring satisfactory arrangements are in place within CSC, to provide advice and guidance when required. Assurance assessed re procedures in place to ensure the Group is adequately supported and achieves its objectives. Meets quarterly.	On-going
Business Continuity	Risk review which considers the arrangements in place re Business Continuity. Assurance assessed re procedures in place in Corporate and Service Business Continuity Plans.	In Review
Constitution review	Ensure Constitution kept up to date & relevant	On-going
Risk management & Corporate Risk Register:		
Risk Management	Contribute to RM & procedure, as necessary throughout the year.	

Risk Register: Check mitigating controls in place for risks	Risk management review which assesses the effectiveness of controls in place for ALL risks identified in the corporate risk register. Elements will be selected, and the effectiveness of the stipulated mitigating controls will be reviewed. The scope is limited to the arrangements noted in the report. The sample will be chosen at the commencement of the audit.	In Review
Brexit Group	A member of IA staff attends the meetings to ensure awareness of any major changes in systems, and to determine whether IA input is required. Assurance assessed re procedures in place to ensure the Group is adequately supported and achieves its objectives.	Completed
Brexit	Risk review which considers the arrangements in place for the changes due to Brexit.	Unplanned In Progress
Well-Being of Future Generations / Equalities		
IIA Review & Assessment	WFGA review which considers the arrangements in place for preparing and submitting IIAs, and the consistency in approach and compilation.	On Hold
New Socio-Econ requirements	WFGA review which considers the arrangements in place for preparing to comply with the new socio-econ requirements. Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager AM.	In Review
Welsh Standards	WFGA review which considers the arrangements in place for compliance with the Welsh Standards requirements.	Unplanned In Review
General Data Protection Regulation / DP		
GDPR / DP Compliance (ICO Guidance)	GDPR. The Regulation became effective in May 2018 and has a significant effect on how data is held and protected. There are reputational implications as well as financial penalties for non-compliance. The review will assess the Council's arrangements for compliance with various elements of the Regulation such as privacy notices, and data audits.	In Progress
GDPR in schools	GDPR. All schools processing personal data must pay a fee to the Information Commissioner's Office. The review consists of a periodic registration check, to ensure all CSC schools hold a valid and up to date registration with the ICO. The review does NOT include a review of the data provided to the ICO.	
Information Governance Team	GDPR. The Information Governance Team meets monthly. The DPO & team review services' Data Privacy Notices & DP assessments. They are in the process of planning a data audit to identify associated risks & to produce a more bespoke retention policy for the Council. IA will catch-up with the DPO periodically.	On-going

Information Governance Health Check	Zurich Municipal to conduct an Information Governance Health check based on the Corporate Risks identified. The Information Governance Health Check will enable CCC to benchmark its approach to information risk management and develop additional mitigation strategies to help reduce the likelihood of information breaches	Unplanned Allocated
Projects		
Corporate Project Management Panel	New projects. A member of IA staff attends the panel to ensure awareness of any major changes in systems, and to determine whether IA input is required. Assurance assessed re procedures in place to ensure the Panel is adequately supported and achieves its objectives. Meets fortnightly.	On-going
Development Group	A member of IA staff attends the meetings to ensure awareness of any major changes in systems, and to determine whether IA input is required. Assurance assessed re procedures in place to ensure the Group is adequately supported and achieves its objectives. Meets quarterly.	On-going
Direct Payments - Governance Task & Finish Group	A member of IA staff attends the meetings to ensure governance & controls are considered when implementing new and improving existing systems procedures in the Direct Payments service and to determine whether IA input is required. Assurance assessed re procedures in place to ensure the Group is adequately supported and achieves its objectives.	Completed Quarter 1
Corporate Management		
Corporate Management Workshop	The CMIA attends the meetings to ensure awareness of any major changes in systems, and to determine whether IA input is required. Assurance assessed re procedures in place to ensure the Group is adequately supported and achieves its objectives. Meets quarterly.	On-going
Grants		
Post-16 Funding	Grant audit. Covering correspondence and evidence is collected and forwarded to WG to support the declarations made.	
Education Improvement Grant - 2020/21 End of Year audit	Grant audit. Completing an End of Year Audit Checklist and Testing Schedule to provide assurance that the grant is spent and administered in accordance with WG's guidelines. Also, to certify the Year-end Claim Form to confirm the funding provided by the grantor in 2020/21 has been duly allocated to the purposes of the grant, in line with the grant terms and conditions of funding and in line with the Council's compliance and audit requirements.	

Pupil Development Grant - 2020/21 End of Year audit	Grant audit. Completing an End of Year Audit Checklist and Testing Schedule to provide assurance that the grant is spent and administered in accordance with WG's guidelines. Also, to certify the Year-end Claim Form to confirm the funding provided by the grantor in 2020/21 has been duly allocated to the purposes of the grant, in line with the grant terms and conditions of funding and in line with the Council's compliance and audit requirements.	
Other Services & Systems		
CLIC	An evaluation of the service provided - scope to be agreed.	On Hold
Credit Cards	System audit. To concentrate on new system / cards issued. Documentation of systems; ascertain risks in system; and evaluate governance & controls required; test.	On Hold
Change Floats & Petty Cash imprests - Year end reconciliations to ledger	Checking the end of year procedures re reconciliation of imprests to ledger, supported by service declaration returns for 2020/21 & 2021/22.	Unplanned In Progress
Change Floats & Petty Cash imprests - FOLLOW-ON - verification of imprests (annual declarations from imprest holders)	Due to anomalies discovered during initial audit in 2021, follow-on work to 1. verify imprest holders; 2. request declarations from each to confirm imprest sums held & 3. reconciled these sums to ledger to check for consistency / anomalies.	In Progress
Harbours account 2021/22	Account audit. The Council must prepare annual accounts following proper practices as set out in the One Voice Wales/SLCC publication Governance and accountability for local councils in Wales – A Practitioners' Guide (the Practitioners' Guide). The Practitioners' Guide states that bodies may prepare their accounts in the form of an annual return prepared by Audit Wales, which includes internal audit input regarding account preparation. This was in respect of the 2020/21 account.	Completed Quarter 1
Harbours Income - updated to include all supporting info re account	Scope: Testing undertaken to support Harbours account, as stipulated by AW form: appropriate books of account maintained, financial regulations met, risks assessed, adequate budgetary process, expected income fully received, salaries and deductions properly applied, asset and investment registers maintained, accounting statements properly prepared.	Draft
VAT	Scope: Testing undertaken on calculation and coding of VAT payments to include creditor & debtor invoices and property transactions. To consider whether VAT guidance is in line with HMRC requirements. Is VAT calculated at correct rate and issued within basic tax point. VAT return is completed correctly and submitted promptly.	In Progress

Lampeter Wellbeing Centre	New service provision at Lampeter Wellness Centre (previously Leisure Centre). Service will involve IA re new systems to include Gladstone replacement.	Unplanned
Waste	An evaluation of the procedures introduced for waste collection, as discussed with WAO. Consider governance of current system - especially situ re new Strategy. How have problems been dealt with eg seagulls - were they successful - if not, why? What is planned? Public engagement.	On Hold
Sustainable Drainage Systems (SUDS)	Check Council has a system in place that is compliant with regulatory requirements. Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager AM.	In Review
Environmental Audit	Carbon Management / Biodiversity / Transport (including Carbon Reduction Plans - Check arrangements planned & in place. No duplication of AW work, but IA to ensure procedures in place to satisfy AW.) Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager AM.	In Review
Museum	System audit. To concentrate on new 'cash' & 'stock' services introduced to Museum i.e. café, shop & bar. (Document systems. Ascertain risks in system; and governance & controls required. Test) Queries arose following quality review which will be addressed once staff return to offices.	On Hold
Houses to Homes - general	Empty property initiative. Request to review procedures. Scope to be agreed.	On Hold
Coroners - Comparison - Revised Report	Requested to undertake a further comparison of CCC FD fees against FD fees of other Welsh LA's	Unplanned Completed Quarter 1
Climate Change & Sustainability	Zurich Municipal to provide assurance on the effectiveness of the controls outlined in the Council's risk register to manage the risk on Climate Change & Sustainability. This Health Check will provide insight into current plans and actions and will provide an assessment to help the Council better understand the key risk exposures and where improvements are needed in supporting and mitigating against a climate emergency.	Unplanned Allocated
Safeguarding		
Section safeguarding procedures	Assurance that all services have introduced a safeguarding policy for staff, which is periodically audited.	On Hold
Corporate Safeguarding procedures	Full system audit - programme compiled using CIPFA TISonline guidance. Some testing not undertaken due to pandemic. Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager IA.	In Review

Direct Payments	Ensure sufficient controls in place in preparation for Direct Payments Support Service transfer to CCC from April 2021.	Complete
Direct Payments - Second Phase	Member of IA to attend Steering Group meetings to provide oversight and advice on governance, controls on risks identified.	Ongoing
Counter Fraud (including NFI)		
National Fraud Initiative	The review provides assurance against reputational damage and financial losses due to fraudulent activity by partaking in the National Fraud Initiative, which is an exercise that matches electronic data within and between public and private sector bodies to prevent and detect fraud.	Ongoing
Code, Ethics & Fraud Training eModule	Training recommendation from Ethics Audit undertaken by Carmarthenshire CC. Following successful presentation by Zurich to Managers Workshop 28/5/21 arrangements currently in progress to incorporate this info into an e-learning module for all staff.	In Progress
Audit of Ethics - follow-on to Carmarthenshire County Council's work	Scope: System audit, based on CIPFA's recommendations from its TISonline guidelines. Some tests not done due to the pandemic. Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager IA.	In Review
Code of Conduct review	Code is currently being reviewed & updated by Monitoring Officer & Governance Officer to ensure it remains up to date & relevant. IA input provided when required. Assurance assessed re procedures in place.	Ongoing
ActiveData - Creditors vs Payroll bank details	Data matching / analysing. The review provides assurance against reputational damage and financial losses due to fraudulent activity by using the 'Active Data' data analytics system.	
ActiveData - Covid Grants vs Payroll bank details	Data matching / analysing. The review provides assurance against reputational damage and financial losses due to fraudulent activity by using the 'Active Data' data analytics system. Checks staff members correctly report Declaration and Registration of Interests.	
ActiveData - Business Rates Grants / Hardship grants	ActiveData – Utilise ActiveData by checking Grant payment records against any identified suspicious records e.g. NAFN intel alerts.	Ongoing
Audit Scotland Paper	Audit Scotland paper suggesting counter fraud (& other) questions that can be raised with managers - questionnaire devised for the audit element, but requested by LG to defer due to CMs' workloads	On Hold
Procurement & New Creditors	Check a sample of new creditors to ensure they are genuine businesses.	Ongoing
Recruitment	Check a sample of new appointments to ensure all details required have been provided.	On Hold
Payroll errors / fraud	Check a sample of new appointments to ensure person in post.	Ongoing

ICT Audit		
PCI Standard	Check compliance with the Standard's requirements.	On Hold
Audit logs	Test audit logs produced from a sample of systems and evaluate how they are used by service.	On Hold
Security - physical and environmental	Evaluate security within main buildings (to be rolled out to smaller offices and other establishments such as schools).	On Hold
Cyber Resilience & Information Governance Group	The Group will provide operational support, preparedness and direction to address and reduce cyber risk and improve the council's cyber security, information security and governance. It shall act as a source of knowledge and expertise and will oversee and monitor the Information Governance and Cyber Security Risks and Action Plans. Meets monthly.	Ongoing
North & Mid Wales Auditors - Fraud Group	North & Mid Wales Chief Auditor Group - Fraud: To share knowledge & skills re countering fraud to build resilience throughout LAs. Meets quarterly.	Ongoing
LG & Elections (Wales) Act 2021		
LG & Elections (Wales) Act 2021	Assurance procedures in place to ensure Council has planned, prepared & made arrangements to comply with the new requirements	Ongoing
Intro of CJsCs - Group	Check compliance & arrangements made to put in place	Ongoing
Self-assessment arrangements	Check compliance & arrangements made to put in place. No duplication of AW work, but IA to ensure procedures in place to satisfy AW.	
Consultancy (Other)		
Governance & Audit Committee support	Support GAC as necessary.	Ongoing
AW Protocol	Audit Support - Assurance that GAC receive all AW reports accordingly (Rob Starr). Assurance services address AW recommendations. Method re tracking.	Ongoing
AW Management Response Form - Tackling Fraud	Complete, monitor & update AW Management Response Form re Fraud	Ongoing
Additional Reviews / Queries / Contingency		
Childcare Scheme	Initial enquiries & field work - scope to be determined	Unplanned Allocated
Emergency Welcome Centre	Provide advice for governance arrangements and controls on Emergency Welcome Centre	Unplanned Completed Quarter 1

Emergency Welcome Centre - Cash Fund	Provide and independent verification of cash issued from Emergency Cash Fund.	Unplanned In Progress
Effectiveness of Gold Command	Scope to be determined	
Assurance		
Assurance Mapping	Assurance available from other sources	On-going

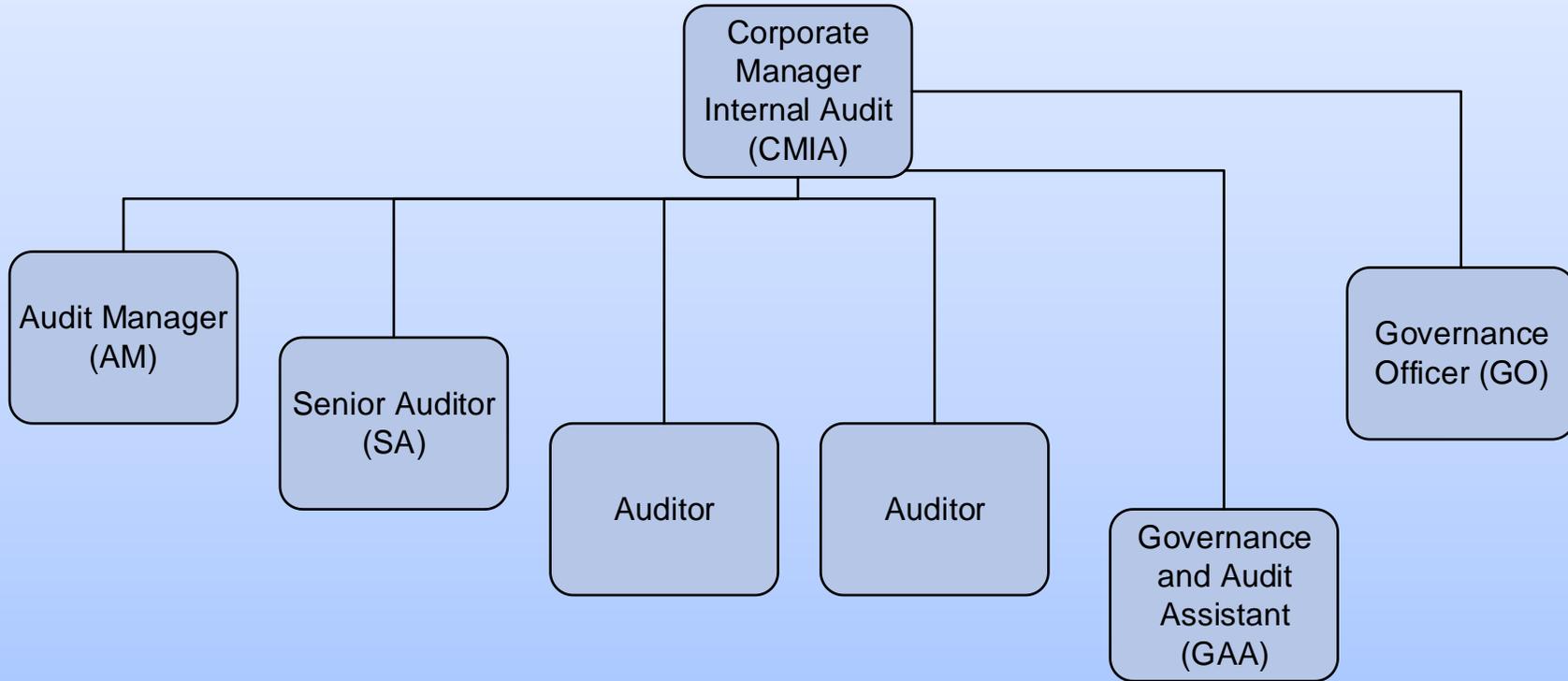
Guide to the assurance criteria used:

Level:	High	Substantial	Moderate	Limited
Adequacy of Controls:	Controls in place to ensure achievement of service objectives and to protect Council against significant foreseeable risks. No fundamental weaknesses found.	Controls in place to ensure achievement of service objectives and to mitigate significant foreseeable risks. Some areas of improvement identified.	Controls in place to varying degrees. Gaps identified which leaves service exposed to certain risks. Improvement required.	Controls considered insufficient. Need to strengthen procedures significantly and ensure compliance.
Risks:	Minor risks only.	Opportunity exists to improve on risk exposure.	Need to introduce additional controls and/or improve compliance.	Failure to improve controls leaves Council exposed to significant risk (major financial loss, reputation, failure to achieve service's key objectives).
Guide:	No fundamental or significant actions required.	No fundamental actions required. Limited significant actions.	Number of significant actions.	Number of fundamental / significant actions.
Follow-up required:	Initial audit only.	Follow-up of any significant actions only / self-assessment with samples to evidence compliance.	IA follow-up with sample tests undertaken to ensure all actions implemented, and to re-assess assurance.	IA follow-up with full testing undertaken to ensure all actions implemented, and to re-assess assurance.

Guide to the classification of actions used:

Classification of Actions			
Fundamental	Significant	Moderate	Merit Attention
Weakness that is crucial to the management of risk within the service. Needs to be notified and requires the attention of the CLO.	Important findings that identify non-compliance with established procedures that could lead to a risk of financial / reputational loss to Service.	Findings that identify non-compliance with established procedures but do not represent any major risk of financial / reputational loss to Service.	Items requiring little or no action. Included as may be of interest to service or best practice advice.

Internal Audit Structure



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CEREDIGION COUNTY COUNCIL

Report to:	Governance and Audit Committee
Date of meeting:	27 September 2022
Title:	Internal Audit Self-Assessment 2021-22
Purpose of the report:	To provide assurance to Members of the Audit Committee re: the Internal Audit Service's compliance with the Public Sector Internal Audit Standards (PSIAS)
Cabinet Portfolio and Cabinet Member:	Councillor Matthew Vaux, Cabinet Member for Partnerships, Housing, Legal and Governance and Public Protection

The PSIAS and CIPFA's Local Government Application Note supersede the 2006 Code for Internal Audit and came into force from April 2013. The PSIAS and Application Note must be complied with in order to ensure proper internal audit practices are applied.

The Application Note contains a checklist which has been developed to satisfy the requirements set out in PSIAS 1311 and 1312 for periodic self-assessments as part of the Quality Assurance and Improvement Program (QAIP). It incorporates the requirements of the PSIAS as well as the Application Note in order to give comprehensive coverage of both documents.

The completed self-assessment is attached in full, along with resulting improvement plan.

Recommendation(s):	The Audit Committee notes the contents of the self-assessment
Reasons for decision:	That the Audit Committee is satisfied that the Internal Audit Section is complying sufficiently with the PSIAS and Application Note in undertaking its duties in order to provide reliable assurance at year-end.
Appendices:	Appendix 1 Internal Audit Self-Assessment
Corporate Lead Officer:	Elin Prysor CLO-Legal and Governance / Monitoring Officer
Reporting Officer:	Alex Jenkins Corporate Manager – Internal Audit
Date:	25 June 2022

Internal Audit Self-Assessment 2021/22

Questions to Consider			Evidence / Comments
1 Mission of Internal Audit			
<p>1.1 Based on your review of conformance with other requirements of the Public Sector Internal Audit Standards (PSIAS) and Local Government Application Note (LGAN), does the internal audit activity aspire to accomplish the Mission of Internal Audit as set out in the PSIAS?</p> <p><i>To enhance and protect organisational value by providing risk-based and objective assurance, advice and insight.</i></p>			<p>The internal audit activity has regard to the Council's Corporate Strategy in its Business Plan which cascades down to the staff appraisal plans to ensure there is a focus on organisational value.</p> <p>The annual risk-based audit plan (which considers the Corporate Risk Register) provides the activity's proposed work schedule for the year; however, it includes a contingency if additional advice is sought from services.</p> <p>All assurance, advice & insight provided is evidenced to confirm objectivity. Some changes necessary during 2020/21 and 2021/22 due to pandemic, but within IASAB guidance.</p>
CONFORMS	PARTIAL	NOT CONFORMING	

Questions to Consider			Evidence / Comments
2 Definition of Internal Audit			
<p>2.1 Based on your review of conformance with other requirements of the PSIAS and LGAN, is the internal audit activity independent and objective?</p>			<p>The requirement for independence and objectivity is included in the Internal Audit Charter, which includes:</p> <ul style="list-style-type: none"> • Staff's requirement to declare any interest that may impact upon their objectivity in an annual written statement (as well as in accordance with the Council's corporate policy on the declaration and registration of hospitality and interests) to enable the Corporate Manager – Internal Audit (CMIA) to plan the allocation of work to avoid the risk of any conflict of interest; • Any internal auditors appointed from within the Council are not permitted to perform an audit which is in any way related to their previous post, for at least 1 year after appointment to ensure

CONFORMS	PARTIAL	NOT CONFORMING	objectivity is not impaired; also, the assignment of routine audit work is subject to annual rotation, where necessary.
<p>2.2 Based on your review of conformance with other requirements of the PSIAS and LGAN, does the internal audit activity use a systematic and disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes within the organisation?</p>			<p>Internal audits are undertaken by following a specific 'audit program' of work required of each assignment. The program covers all areas of work to be covered. The areas of risk, controls and governance are included in the audit programs as appropriate to each assignment (determined by the CMIA). Some changes necessary during 2020/21 and 2021/22 due to pandemic, but within IASAB guidance. All audits are reviewed upon their completion by the CMIA, Audit Manager (AM) or Senior Auditor (SA) to ensure all the work required by the program has been undertaken to a satisfactory quality & standard. Audit reports are issued in the CMIA's name.</p>
CONFORMS	PARTIAL	NOT CONFORMING	

Questions to Consider	Evidence / Comments
3 Core principles	
<p>The Core Principles, taken as a whole, articulate internal audit effectiveness, and provide a basis for considering whether the review of conformance with the attribute standards and performance standards reflects full conformance, partial conformance or non-conformance with the PSIAS and the Local Government Application Note. In making this assessment, the assessor should have regard to positive evidence of conformance or non-conformance and the lack of evidence of non-conformance where positive evidence is difficult to obtain.</p>	
<p>Where there are instances of partial conformance or non-conformance in particular areas, you may need to make a judgment having regard to materiality and other factors in order to form a view on whether the internal audit activity conforms with a particular Core</p>	

Principle. Any such judgments should be highlighted and explained.			
Demonstrates integrity			<p>Demonstrates integrity. Internal Audit (IA) staff have regard to the Council's Employee Code of Conduct which is underpinned by the seven principles of public life. Currently being updated. The work undertaken by the IA section is subject to scrutiny by the CMIA or AM for completeness, correctness and quality. Clear and concise working papers are required, as noted in the Audit Manual (updated May 2022). All findings and conclusions have to be sufficiently evidenced. Any weaknesses discovered during the reviews are highlighted and discussed with the service being audited. Staff have regard to the Council's Strategy to Counter-Fraud, Corruption & Bribery (to include Anti-Money Laundering) (update to Governance & Audit Committee June 2021); and are aware of the procedures to be followed if they suspect any fraud or irregularities during the course of their work, as documented in the Audit Manual.</p> <p>IA staff sign an annual code of ethics affirmation to confirm they have read the PSIAS ethics requirements, have understood them, and agree to comply with them.</p> <p>Ethics & Counter Fraud training to be presented to Managers 27/5/21 – this will also be delivered by the CMIA to IA staff. New e-module has been completed and is now in development with Learning & Development to be released as a mandatory learning module for all staff.</p> <p>The IA section has regard to and contributes to the Council's corporate objectives by enhancing and protecting organisational value by providing risk-based and objective assurance, advice & insight.</p>
3.1 Having regard to your review of conformance with the Code of Ethics (Integrity, Seven Principles of Public Life), do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by demonstrating integrity?			
CONFORMS	PARTIAL	NOT CONFORMING	

<p>Demonstrates competence and due professional care</p>					
<p>3.2 Having regard to your review of conformance with the Code of Ethics (Competence, Confidentiality, Seven Principles of Public Life) and any other evidence from the review of conformance with Standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by demonstrating competence and due professional care?</p>	<p>Each IA review is allocated to staff based on each auditor’s knowledge, skills and experience. Every member of staff is aware of the PSIAS requirements, as well as the IA Charter and Audit Manual, updated May 2022 to ensure services are performed in accordance with set standards. All IA members of staff comply with the Council’s Corporate Appraisal scheme, which requires the continuous enhancement of knowledge, skills and competencies (to incl mandatory training modules). (Due by 1 June 2022). New staff provided with IA induction as well as corporate induction & sent on CIPFA’s ‘Intro to Audit’ training course. Those who are members of professional bodies also conform to those bodies’ CPD requirements. Weekly team meetings are held to discuss IA workload and other issues, which are supported by periodic one-to-one meetings with the CMIA. Quality control questionnaires are sent to auditees to request feedback re the service provided. These have historically been circulated at year-end. No QCQs despatched in 2020/21 or 2021/22 due to the pandemic. However, the Service received positive feedback from some auditees during the year.</p>				
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CONFORMS	PARTIAL	NOT CONFORMING			
<p>Is objective and free from undue influence (independent)</p>					
<p>3.3 Having regard to your review of conformance with the Code of Ethics (Objectivity, Seven Principles of Public Life) and any other evidence from the review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by being objective and free from undue influence (independent)?</p>	<p>(R2.1) The requirement for independence and objectivity is included in the Internal Audit Charter, which notes:</p> <ul style="list-style-type: none"> • Staff’s requirement to declare any interest that may impact upon their objectivity in an annual written statement (as well as in accordance with the Council’s corporate policy on the declaration and registration of hospitality and interests) to enable the Corporate Manager – Internal Audit (CMIA) to plan the allocation of work to avoid the risk of any conflict of interest; 				

			<ul style="list-style-type: none"> Any internal auditors appointed from within the Council are not permitted to perform an audit which is in any way related to their previous post, for at least 1 year after appointment to ensure objectivity is not impaired; also, the assignment of routine audit work is subject to annual rotation, where necessary.
CONFORMS	PARTIAL	NOT CONFORMING	
<p>Aligns with the strategies, objectives, and risks of the organisation</p> <p>3.4 Based on your review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by being aligned with the strategies, objectives, and risks of the organisation?</p>			<p>(R1.1) The internal audit activity has regard to the Council's Corporate Strategy in its Business Plan which cascades down to the staff appraisal plans to ensure there is a focus on organisational value.</p> <p>The annual risk-based audit plan (which considers the Corporate Risk Register) provides the activity's proposed work schedule for the year; however, it includes a contingency if additional advice is sought from services. All assurance, advice & insight provided is evidenced to confirm objectivity.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<p>Is appropriately positioned and adequately resourced</p> <p>3.5 Based on your review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by being appropriately positioned and adequately resourced?</p>			<p>The CMIA's position in the Council allows her to have regular and open engagement across the Council, to include the Leadership Group (LG) and GAC; and individual members of each. (5.2.1)</p> <p>The annual audit strategy and plan is presented to GAC for approval, which includes the annual operational plan and its resource requirement. The service was re-structured wef Nov 2020 and a further change made to the Apprentice Assistant Auditor post to become a Governance & Audit Assistant Post in April 2022 (6.1.9)</p>
CONFORMS	PARTIAL	NOT CONFORMING	

Demonstrates quality and continuous improvement		
3.6 Based on your review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by demonstrating quality and continuous improvement?	IA has a QAIP which is reported upon in the CMIA's Annual (end of year) Report to GAC. The QAIP covers all aspects of IA, to include the annual and 5-yearly assessment to check conformance to PSIAS and LGAN. EQA currently in progress by Ynys Mon. The results from the QAIP form the basis of IA's improvement plan for the following year.	
CONFORMS	PARTIAL	NOT CONFORMING
Communicates effectively		
3.7 Based on your review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by communicating effectively?	The CMIA has free and unfettered access to the Leadership Group, GAC, managers and Members. Engagements and results are communicated effectively to clients, either by report, memo or email.	
CONFORMS	PARTIAL	NOT CONFORMING
Provides risk-based assurance		
3.8 Based on your review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by providing risk-based assurance, based on adequate risk assessment?	All assurance, advice & insight provided is risk-based, objective and evidenced. Some changes necessary during 2020/21 and 2021/22 due to pandemic, but within IASAB guidance.	
CONFORMS	PARTIAL	NOT CONFORMING
Is insightful, proactive, and future-focused		
3.9 Based on your review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by being insightful, proactive, and future-focused?	IA has regards to the Corporate Strategy during any planning which contains the Council's corporate vision, priorities and well-being objectives, in order to align them with the service provision. Pandemic necessitated working in a more 'reactive' way.	
CONFORMS	PARTIAL	NOT CONFORMING
Promotes organisational improvement		
3.10 Based on your review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by promoting organisational improvement?	Recommended actions are provided to an activity if any weaknesses are detected during a review in its governance, risk management and control processes. Any deemed fundamental or significant are reported to GAC.	
CONFORMS	PARTIAL	NOT CONFORMING

Questions to Consider	Evidence / Comments
4 Code of Ethics	
<p>Integrity</p> <p>4.1 Based on your review of conformance with other requirements of the PSIAS and LGAN, do you consider that internal auditors display integrity by:</p> <ul style="list-style-type: none"> • Performing their work with honesty, diligence and responsibility/ • Observing the law and making disclosures expected by the law and the profession? • Not knowingly partaking in any illegal activity nor engaging in acts that are discreditable to the profession of internal auditing or to the organisation? • Respecting and contributing to the legitimate and ethical objectives of the organisation? 	<p>Internal Audit (IA) staff have regard to the Council's Employee Code of Conduct which is underpinned by the seven principles of public life. The work undertaken by the IA section is subject to scrutiny by the CMIA or AM for completeness, correctness and quality. Clear and concise working papers are required, as noted in the Audit Manual. All findings and conclusions have to be sufficiently evidenced. Any weaknesses discovered during the reviews are highlighted and discussed with the service being audited.</p> <p>Staff have regard to the Council's Strategy to Counter-Fraud, Corruption & Bribery (to include Anti-Money Laundering); and are aware of the procedures to be followed if they suspect any fraud or irregularities during the course of their work, as documented in the Audit Manual. IA staff sign an annual code of ethics affirmation to confirm they have read the PSIAS ethics requirements, have understood them, and agree to comply with them.</p> <p>The IA section has regard to and contributes to the Council's corporate objectives by enhancing and protecting organisational value by providing risk-based and objective assurance, advice & insight.</p>
<p>CONFORMS PARTIAL NOT CONFORMING</p>	
<p>Objectivity</p> <p>4.2 Based on your review of conformance with other requirements of the PSIAS and LGAN, do you consider that internal auditors display objectivity by:</p> <ul style="list-style-type: none"> • Not taking part in any activity or relationship that may impair or be presumed to impair their unbiased assessment? 	<p>The requirement for independence and objectivity is included in the Internal Audit Charter, which includes:</p> <ul style="list-style-type: none"> • Staff's requirement to declare any interest that may impact upon their objectivity in an annual written statement (as well as in accordance with the Council's corporate policy on the declaration and registration of

<ul style="list-style-type: none"> • Not accepting anything that may impair or be presumed to impair their professional judgement? • Disclosing all material facts known to them that, if not disclosed, may distort the reporting of activities under review? 	<p>hospitality and interests) to enable the CMIA to plan the allocation of work to avoid the risk of any conflict of interest;</p> <ul style="list-style-type: none"> • Any internal auditors appointed from within the Council are not permitted to perform an audit which is in any way related to their previous post, for at least 1 year after appointment to ensure objectivity is not impaired; also, the assignment of routine audit work is subject to annual rotation, where necessary. <p>All audits are independently reviewed prior to circulation to ensure work is undertaken to a satisfactory standard, to include the disclosure of all material facts known, as appropriate. These are supported by evidence.</p>	
<p>CONFORMS</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p>Confidentiality</p>		
<p>4.3 Based on your review of conformance with other requirements of the PSIAS and LGAN, do you consider that internal auditors display due respect and care by:</p> <ul style="list-style-type: none"> • Acting prudently when using information acquired in the course of their duties and protecting that information? • Not using information for any personal gain or in any manner that would be contrary to the law or detrimental to the legitimate and ethical objectives of the organisation? 	<p>Most information collected is electronic, which is saved in a personal IA file. Any manual sensitive and confidential information collected during the course of their duties is locked by IA staff in their tambours overnight or when not in use.</p> <p>During the pandemic, staff have worked from home 'paperless'.</p> <p>Current Data Audit underway by DPO. All members of IA staff have read the Council's guidance and have received training on Information Security, Data Protection and the General Data Protection Regulation.</p>	
<p>CONFORMS</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p>Competency</p>		
<p>4.4 Based on your review of conformance with other requirements of the PSIAS and LGAN, do you consider that internal auditors display competence by:</p>	<p>Each IA review is allocated to staff based on each auditor's knowledge, skills and experience. Every member of staff is aware of the PSIAS requirements, as well as the IA Charter and Audit Manual, to ensure services</p>	

<ul style="list-style-type: none"> • Only carrying out services for which they have the necessary knowledge, skills and experience? • Performing services in accordance with the PSIAS? • Continually improving their proficiency and effectiveness and quality of their services, for example through CPD schemes? 			<p>are performed in accordance with set standards.</p> <p>All IA members of staff comply with the Council's Corporate Appraisal scheme, which requires the continuous enhancement of knowledge, skills and competencies (to incl mandatory training modules). Two members of staff are currently studying to achieve an IIA qualification. Those who are members of professional bodies also conform to those bodies' CPD requirements.</p> <p>Weekly team meetings are held to discuss IA workload and other issues, which are supported by periodic one-to-one meetings with the CMIA.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<p>Seven Principles of Public Life</p> <p>4.5 Based on your review of conformance with other requirements of the PSIAS and LGAN, do you consider that internal auditors, whether consciously or through conformance with organisational procedures and norms, have due regard to the Committee on Standards of Public Life's <i>Seven Principles of Public Life</i>?</p>			<p>All IA staff have regard to the Committee on Standards of Public Life's Seven Principles of Public Life as they underpin the Council's Employee Code of Conduct.</p>
CONFORMS	PARTIAL	NOT CONFORMING	

Questions to Consider	Evidence / Comments
Standards	
5 Attribute Standards	
5.1 1000 Purpose, Authority and Responsibility	
The questions in this section seek to confirm that the purpose, authority and responsibility of the internal audit activity have been properly defined consistent with the PSIAS, formally approved in an internal audit charter and periodically reviewed.	
5.1.1 Does the internal audit charter conform with the PSIAS by including a formal definition of: <ul style="list-style-type: none"> • The purpose • The authority, and • The responsibility 	Does the internal audit charter conform with the PSIAS by including a formal definition of: The IA Charter defines IA's purpose; its authority and right of access within the Council and with third parties; and the scope of its

Of the internal audit activity consistent with the Public Sector Internal Audit Standards (PSIAS)?	responsibilities. The right of access is also included as part of the Financial Regs in the Council's Constitution.	
CONFORMS	PARTIAL	NOT CONFORMING
5.1.2 Does the internal audit charter conform with the PSIAS by clearly and appropriately defining the terms 'board' and 'senior management' for the purposes of the internal audit activity? Note that it is expected that the audit committee will fulfil the role of the board in the majority of instances.	The IA Charter defines the GAC as the 'Board' for the purposes of IA activity and the LG as 'senior management'.	
CONFORMS	PARTIAL	NOT CONFORMING
<p>5.1.3 Does the internal audit charter also:</p> <ul style="list-style-type: none"> • Set out the internal audit activity's position within the organisation? • Establish the chief audit executive's (CAE) functional reporting relationship with the board? • Establish the accountability, reporting line and relationship between the CAE and those to whom the CAE may report administratively? Where applicable, this will need to encompass shared service or external providers of internal audit, and the role of the contract manager. • Establish the responsibility of the board and also the role of the statutory officers (such as the CFO, the monitoring officer and the head of paid service) with regards to internal audit? • Establish internal audit's right of access to all records, assets, personnel and premises and its authority to obtain such information and explanations as it considers necessary to fulfil its responsibilities? • Define the scope of internal audit activities? • Recognise that internal audit's remit extends to the entire control environment of the organisation? • Establish the organisational independence of internal audit? 	<p>The IA Charter:</p> <ul style="list-style-type: none"> • Notes IA's position within the Legal & Governance services; • Confirms the CMIA's functional reporting relationship with the GAC; • Confirms the CMIA's administrative reporting relationship with the Corporate Lead Officer – Legal & Governance / Monitoring Officer; • Notes the GAC's responsibility with regards to IA, (as per its Terms of Reference) and that the CMIA has unrestricted access to, and freedom to report without fear or favour to, all levels of management and elected Members; • Stipulates IA's authority and right of access as per the Council's Financial Regulations and Accompanying Financial procedures which form part of the Constitution; • Defines the scope of IA's review and consultancy work; • Confirms that IA's remit extends to the entire control environment of the Council; • Notes how IA achieves and maintains its independence; • States how resource requirements are measured to ensure effective achievement of the annual audit plan; 	

<ul style="list-style-type: none"> • Cover the arrangements for appropriate resourcing? • Define the role of internal audit in any fraud-related work? • Set out the existing arrangements within the organisation's anti-fraud and anti-corruption policies, requiring the CAE to be notified of all suspected or detected fraud, corruption or impropriety? • Include arrangements for avoiding conflicts of interest if internal audit or the CAE undertakes non-audit activities? • Define the nature of assurance services provided to the organisation, as well as assurances provided to parties external to the organisation? • Define the nature of consulting services? • Recognise the mandatory nature of the PSIAS? 	<ul style="list-style-type: none"> • Notes IA's role when any fraud or irregularities are discovered, as per the Council's Strategy to Counter-Fraud, Bribery and Corruption Strategy (to include Anti-Money Laundering); • Notes how staff should report their concerns or suspicions to IA, as per the Council's Strategy on Counter-Fraud, Bribery and Corruption Strategy (to include Anti-Money Laundering); • Confirms IA staff avoid undertaking operational duties, to ensure impartial and effective professional judgements and decisions are made at all times*; • Confirms IA provides independent, objective and reasonable assurance to management and Members that arrangements are in place and are operating effectively, and that the annual IA opinion on assurance is based upon IA's findings from all the audit reviews undertaken during each year. This opinion supports the Annual Governance Statement; • States that the IA section contributes to the achievement of the Council's objectives by providing an advice and consulting activity to services; and • Outlines the mandatory nature of the Standards. 	
CONFORMS	PARTIAL	NOT CONFORMING
5.1.4 Does the CAE periodically review the internal audit charter and present it to senior management and the board for approval?	The original IA Charter was approved by Audit Committee on 16/5/13. It is reviewed annually by the CMIA and the last update was approved in March 2022.	
CONFORMS	PARTIAL	NOT CONFORMING
5.2 1100 Independence and Objectivity		
The questions in this section seek to confirm that the internal audit activity is independent and internal auditors are objective in performing their work.		
5.2.1a) Does the CAE have direct and unrestricted access to senior management and the board?	The CMIA has unrestricted access to, and freedom to report without fear or favour to, all levels of management and	

5.2.1b) Does the CAE have free and unfettered access to, as well as communicate effectively with, the chief executive or equivalent and the chair of the audit committee?	Members (to include the Chief Executive and the Chair of the Audit Committee), as per the IA Charter and as documented in CIPFA's 'Putting Principles into Practice' document.	
CONFORMS	PARTIAL	NOT CONFORMING
5.2.2a) Does the CAE attend audit committee meetings? 5.2.3b) Does the CAE contribute to audit committee agendas?	The CMIA and/or a representative attends each meeting of the GAC (currently held via zoom). The CMIA contributes the IA Charter and any reviews; Annual Audit Strategy and Plan; Quarterly Progress Reports; Annual (EOY) Reports which includes the results of the Annual Self-Assessments plus any other appropriate documents; or reports that the Audit Committee has requested.	
CONFORMS	PARTIAL	NOT CONFORMING
5.2.3 Are threats to objectivity identified and managed at the following levels: <ul style="list-style-type: none"> • Individual auditor? • Engagement? • Functional? • Organisation? 	<ul style="list-style-type: none"> • All individual auditors are required to declare any interest that may impact upon their objectivity in an annual written statement; • The CMIA plans engagements to avoid any identified threats to objectivity by considering the annual declarations; • Functionally, any internal auditors appointed from within the Council are not permitted to perform an audit which is in any way related to their previous post, for at least 1 year after appointment to ensure objectivity is not impaired; also, the assignment of routine audit work is subject to annual rotation, where necessary; • All members of staff within the Council are required to comply with the corporate policy on the declaration and registration of hospitality and interests for which a quarterly reminder is circulated. 	
CONFORMS	PARTIAL	NOT CONFORMING

<i>1110 Organisational Independence</i>		
<p>This subsection seeks to confirm that reporting and management arrangements been put in place that preserve the CAE's independence and objectivity. This is of particular importance when the CAE is line-managed by another officer of the authority.</p>		
<p>5.2.4a) Does the CAE report to an organisational level equal or higher to the corporate management team? 5.2.4b) Does the CAE report to a level within the organisation that allows the internal audit activity to fulfil its responsibilities?</p>		
<p>The CMIA reports organisationally to the CLO – Legal and Governance Services. The CLOs report to the Corporate Directors & CE. All form the LG. This does not impair on the CMIA's independence as she has unrestricted access to, and freedom to report without fear or favour to, all levels of management and Members (to include the Chief Executive and the Chair of the Audit Committee), as per the IA Charter and as documented in CIPFA's 'Putting Principles into Practice' document. Audit reports primarily communicate to management an independent and objective opinion on the governance, risk and controls on the area within their responsibility, and prompt implementation of corrective actions to strengthen / improve systems / controls within the service audited. The risk associated with each recommended action is identified in the action plan. If the CMIA decides that the service has accepted a level of risk that may be unacceptable to the Council, the CMIA will discuss this with senior management and may also bring it to the attention of the Audit Committee. The CMIA's position in the Council therefore allows her to have regular and open engagement across the Council, to include the LG & GAC.</p>		
CONORMS	PARTIAL	NOT CONFORMING
<p>5.2.5 Does the CAE's position in the management structure:</p> <ul style="list-style-type: none"> • Provide the CAE with sufficient status to ensure that audit plans, reports and action plans are discussed effectively with the board? 		
<p>The CMIA has unrestricted access to, and freedom to report without fear or favour to, all levels of management to include the Chief Executive; and is encouraged to provide reports and presentations to the LG meetings. This</p>		

<ul style="list-style-type: none"> Ensure that he or she is sufficiently senior and independent to be able to provide credibility constructive challenge to senior management? 	<p>support is fundamental as a way of ensuring the role is undertaken effectively; and provides confidence to the CMIA when challenging managers that required actions and recommendations will be addressed, and the knowledge that any escalated concerns will be dealt with, prior to the need to refer to GAC.</p>	
<p>CONFORMS</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p>5.2.6 Does the CAE confirm to the board, at least annually, that the internal audit activity is organisationally independent?</p>	<p>The CMIA sets-out how independence is achieved in the Annual (end of year) Report to GAC.</p>	
<p>CONFORMS</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p>5.2.7a) Is the organisational independence of internal audit realised by functional reporting by the CAE to the board?</p>	<p>IA is organisationally independent as the CMIA reports functionally to the GAC.</p>	
<p>5.2.7b) The 'Interpretation' to PSIAS 1110 provides examples of factors which may indicate that the CAE reports functionally to the Board, which include where the board:</p> <ul style="list-style-type: none"> Approves the internal audit charter Approves the risk-based audit plan Approves the internal audit budget and resource plan Receives communications from the CAE on the activity's performance (in relation to the plan, for example) Approves decisions relating to the appointment and removal of the CAE Approves the remuneration of the CAE Seeks reassurance from management and the CAE as to whether there are any in appropriate scope or resource limitations. 	<p>Factors to support this include the Audit Committee:</p> <ul style="list-style-type: none"> Approving the IA Charter; Approving the annual risk-based audit strategy and plan; Approving the resource plan (which forms part of the audit plan); Reporting IA's activity, performance and improvement on a quarterly and annual basis; and Providing assurance on scope and resource levels. <p>As is general practice in the UK public sector, the GAC does not approve the CMIA's remuneration.</p> <p>To ensure the CMIA is safeguarded and that her remuneration and/or performance is not inappropriately influenced by those subject to audit:</p> <ul style="list-style-type: none"> The CMIA's position in the Council is noted in the IA Charter; Any amendments to the CMIA's position is noted in the Annual (end of year) Report, and the IA Charter updated accordingly; and The CMIA's performance appraisal is undertaken by the CLO – Legal & Governance / Monitoring Officer. 	
<p>The Public Sector Interpretation to PSIAS 1110 notes that board approval of CAE remuneration does not generally happen in the UK public sector, and that the underlying principle is therefore that the independence of the CAE must be safeguarded by ensuring that their remuneration or performance assessment is not inappropriately influenced by those subject to audit.</p>		

EQA assessors should therefore consider whether adequate steps are taken to safeguard the independence of the CAE by ensuring that remuneration or performance assessment is not inappropriately influenced by those subject to audit. This might for example reflect some involvement of the chief executive in the performance assessment process or feedback from the audit committee chair.			
CONFORMS	PARTIAL	NOT CONFORMING	
<i>1111 Direct Interaction with the Board</i>			
5.2.8 Does the CAE communicate and interact directly with the board?			The CMIA has free and unfettered access to the Chief Executive and those sitting on the LG, and is encouraged to provide reports and presentations at the group's meetings. This support is fundamental as a way of ensuring the role is undertaken effectively. LG actively encourages lead officers to invite the CMIA to their managers' meetings and other events such as workshops and head teachers' training days to discuss how IA can add value to their services.
CONFORMS	PARTIAL	NOT CONFORMING	
<i>1112 Chief Audit Executive Roles Beyond Internal Auditing</i>			
5.2.9a) Where the CAE has roles or responsibilities that fall outside of internal auditing, are adequate safeguards in place to limit impairments to independence or objectivity?			N/A – the CMIA does not have any roles or responsibilities that fall outside of internal auditing. Some changes necessary during 2020/21 and 2021/22 due to pandemic, but within IASAB guidance, eg 'audit' of grants prior to payment. These changes & the safeguards put in place were reported to GAC.
5.2.9b) Does the board periodically review these safeguards?			
CONFORMS	PARTIAL	NOT CONFORMING	
<i>1120 Individual Objectivity</i>			

5.2.10 Do internal auditors have an impartial, unbiased attitude?	All audit decisions or opinions provided are impartial and unbiased and based on proven facts available. Evidence is collected to support all decisions and opinions.	
CONFORMS	PARTIAL	NOT CONFORMING
5.2.11 Do internal auditors avoid any conflict of interest, whether apparent or actual?	Staff are required to declare any potential conflict of interest in an annual declaration to the CMIA. The CMIA allocates work taking this into account as well as past duties performed within the Council and IA service. If anything arises during an audit, work can be re-allocated.	
CONFORMS	PARTIAL	NOT CONFORMING
<i>1130 Impairment to Independence or Objectivity</i>		
5.2.12 If there has been any real or apparent impairment of independence or objectivity, has this been disclosed to appropriate parties (depending on the nature of the impairment and the relationship between the CAE and senior management/the board as set out in the internal audit charter)?	N/A – no impairment identified.	
CONFORMS	PARTIAL	NOT CONFORMING
5.2.13 Does review indicate that work allocations have operated so that internal auditors have not assessed specific operations for which they have been responsible within the previous year?	As stated in the IA Charter, any internal auditors appointed from within the Council are not permitted to perform an audit which is in any way related to their previous post, for at least 1 year after appointment to ensure objectivity is not impaired.	
CONFORMS	PARTIAL	NOT CONFORMING
5.2.14 If there have been any assurance engagements in areas over which the CAE also has operational responsibility, have these engagements been overseen by someone outside of the internal audit activity?	N/A – the CMIA does not have any roles or responsibilities that fall outside of internal auditing. The CMIA is the Governance Officer's line manager, but only on an administrative basis. The GO assists IA with items such as assurance mapping, but all other operational work is provided, monitored and managed by the Monitoring Officer.	
CONFORMS	PARTIAL	NOT CONFORMING
5.2.15 Is the risk of over-familiarity or complacency managed effectively: for example by rotating assignments for ongoing assurance engagements and	As stated in the IA Charter, the assignment of routine audit work is subject to annual rotation.	

other audit responsibilities periodically within the internal audit team?			
CONFORMS	PARTIAL	NOT CONFORMING	
5.2.16 Have internal auditors declared interests in accordance with organisational requirements?			As stated in the IA Charter, auditors are required to declare any interest that may impact upon their objectivity in an annual written statement (as well as in accordance with the Council's corporate policy on the declaration and registration of hospitality and interests).
CONFORMS	PARTIAL	NOT CONFORMING	
5.2.17 Where any internal auditor has accepted any gifts, hospitality, inducements or other benefits from employees, clients, suppliers or other third parties (other than as may be allowed by the organisation's own policies), has this been declared and investigated fully?			N/A – no gifts, hospitality, inducements or other benefits from employees, clients, suppliers or other third parties received (but staff are aware of Council policy if any items were offered).
CONFORMS	PARTIAL	NOT CONFORMING	
5.2.18 Does review indicate that no instances have been identified where an internal auditor has used information obtained during the course of duties for personal gain?			Confirmed – no instances have been identified where an internal auditor has used information obtained during the course of duties for personal gain.
CONFORMS	PARTIAL	NOT CONFORMING	
5.2.19 Have internal auditors disclosed all material facts known to them which, if not disclosed, could distort their reports or conceal unlawful practice, subject to any confidentiality agreements?			All audits are independently reviewed prior to circulation to ensure work is undertaken to a satisfactory standard, to include the disclosure of all material facts known, as appropriate.
CONFORMS	PARTIAL	NOT CONFORMING	
5.2.20 If there has been any real or apparent impairment of independence or objectivity relating to a proposed consulting services engagement, was this disclosed to the engagement client before the engagement was accepted?			N/A – no impairment identified.
CONFORMS	PARTIAL	NOT CONFORMING	
5.2.21 Where there have been significant additional consulting services agreed during the year that were not already included in the audit plan, was approval sought from the board before the engagement was accepted?			GAC acknowledges that the audit plan is flexible and have agreed that the CMIA is permitted to periodically review and amend the plan in response to any developments and initiatives which are deemed relevant. The annual operational audit plan contains

			contingency days for such work. Any amendments are included in regular progress reports to AC.
CONFORMS	PARTIAL	NOT CONFORMING	
5.3 1200 Proficiency and Due professional Care			
This section seeks to confirm that engagements are performed with proficiency and due professional care, having regard to the skills and qualifications of the CAE and their staff, and how they exercise their capability in practice.			
<i>1210 Proficiency</i>			
5.3.1 Does the CAE hold a professional qualification, such as CMIIA/CCAB or equivalent?			The CMIA in post up to 31/12/21 held the Chartered Institute of Public Finance and Accountancy's qualification, CIPFA, which is a CCAB body. The CMIA in post from 1/1/22 is currently studying for the CIAA's Certificate in Internal Audit and is committed to progressing with further qualifications once obtained.
CONFORMS	PARTIAL	NOT CONFORMING	
5.3.2 Is the CAE responsible for recruiting appropriate internal audit staff, in accordance with the organisation's human resources processes? Does the CAE ensure that up-to-date job descriptions exist that reflect roles and responsibilities and that person specifications define the required qualifications, competencies, skills, experience and personal attributes?			The CMIA is responsible for recruiting appropriate staff, in accordance with the Council's HR policies and processes (using the Ceri system) who have the required knowledge, qualifications, competencies, skills, experience and personal attributes required to deliver the audit service. As a result of the recent re-structures, all job descriptions and person specifications were updated and evaluated during 2018/19 or 2019/20. The CMIA post became effective from 1/1/19, whilst the remainder of the posts commenced from 4/5/19, 1/11/20 and 1/12/20. All posts are independently job-evaluated.
CONFORMS	PARTIAL	NOT CONFORMING	
5.3.3 Having regard to the answers to the other questions in this section and other matters, does the internal audit activity collectively possess or obtain the skills, knowledge and other competencies required to perform its responsibilities? Where the internal audit activity does not possess the skills, knowledge and other competencies required to perform its responsibilities, does the CAE			Experience and qualifications are considered at recruitment by the compilation of skills matrices. Further training and development needs are considered during staff appraisals, to include professional bodies' CPD requirements where appropriate. Two members of staff are currently studying to achieve an IIA qualification. In the past, where specialist skills and knowledge such as ICT audit are not

obtain competent advice and assistance?	available in the section, this service has been obtained from other accountancy bodies or neighbouring LAs. The CMIA & AM received training and development from Mindgrove to address this requirement during 2019/20.		
CONFORMS	PARTIAL	NOT CONFORMING	
5.3.4 Do internal auditors have sufficient knowledge to evaluate the risk of fraud and anti-fraud arrangements in the organisation?	All staff are familiar with the Council's Strategy on Counter-fraud, Bribery and Corruption (to include Anti-Money Laundering); and are aware of the actions to take if any irregularity is suspected. The CMIA and AM hold CIPFA's Certificate in Investigative Practices. The Senior Auditor holds the Counter Fraud Technician qualification.		
CONFORMS	PARTIAL	NOT CONFORMING	
5.3.5 Do internal auditors have sufficient knowledge of key information technology risks and controls?	IA staff have sufficient knowledge of key risks and controls regarding information, its security and the ICT environment; however, additional assistance has been obtained in the past where a more in-depth knowledge of computerised systems is needed. The CMIA & AM received training and development from Mindgrove to address this requirement during 2019/20.		
CONFORMS	PARTIAL	NOT CONFORMING	
5.3.6 Do internal auditors have sufficient knowledge of the appropriate computer-assisted audit techniques that are available to them to perform their work, including data analysis techniques?	Two members of staff have received training in the IDEA CAATS system. The Section also places reliance on the results of AW's annual NFI data-matching exercise. Active Data was also acquired during 2019/20 which can be used for sampling as well as data matching.		
CONFORMS	PARTIAL	NOT CONFORMING	
<i>1220 Due Professional Care</i>			
5.3.7 Do internal auditors exercise due professional care by considering the: <ul style="list-style-type: none"> • Extent of work needed to achieve the engagement's objectives? • Relative complexity, materiality or significance of matters to which assurance procedures are applied? • Adequacy and effectiveness of governance, risk management and control processes? • Probability of significant errors, fraud, or non-compliance? 	<ul style="list-style-type: none"> • The scope of each audit is determined prior to its commencement. An audit program is compiled for each review, which ensures the objective of the audit is achieved. • The CMIA ensures auditors have the necessary knowledge & skills when considering the allocation of work and complexity, etc of systems. • The audit programme includes the appropriate review of governance, risk 		

<ul style="list-style-type: none"> • Cost of assurance in relation to potential benefits? <p>In doing the above, internal auditors must also consider how technology-based audit and other data analysis techniques can provide assurance.</p>	<p>management and control processes according to audit objective.</p> <ul style="list-style-type: none"> • The audit plan is risk-assessed which takes account of probability of significant errors, etc during its compilation. These matters are also considered when new audits / consultations are requested during the year which would require the re-prioritisation of work. Staff are aware of the procedures to be followed if they suspect any fraud or irregularities, as documented in the IA Charter. • Cost of assurance / benefit is considered according to its feasibility and any perceived risks. 	
CONFORMS	PARTIAL	NOT CONFORMING
<p>5.3.8 Do internal auditors exercise due professional care during a consulting engagement by considering the:</p> <ul style="list-style-type: none"> • Needs and expectations of clients, including the nature, timing and communication of engagement results? • Relative complexity and extent of work needed to achieve the engagement's objectives? • Cost to the consulting engagement in relation to potential benefits? 	<ul style="list-style-type: none"> • Consulting engagements are considered on a case-by-case basis. Work is undertaken in accordance with the brief agreed with a client to ensure maximum benefit of the review (unless any weaknesses and/or irregularities are discovered which would require further investigation). Results are provided in the most effective and efficient manner eg an email or memo may be more appropriate than a report for less significant advisory consultations. • The CMIA ensures auditors have the necessary knowledge & skills when considering the allocation of work and complexity, etc of systems, to ensure the best outcome. The scope of each review is agreed prior to its commencement which ensures the objective of the consultation is achieved. • Cost of assurance / benefit is considered according to its feasibility and any perceived risks. 	
CONFORMS	PARTIAL	NOT CONFORMING

<i>1230 Continuing Professional Development</i>			
5.3.9 Has the CAE defined the skills and competencies for each level of auditor? And Does the CAE periodically assess individual auditors against the predetermined skills and competencies?			The required skills and competencies are outlined upon recruitment by the job description and person specification appropriate to each post. Each candidate is evaluated against a skills matrix. Skills are regularly formally monitored via the Council's corporate appraisal procedures; and informally during the year during the audit review process.
CONFORMS	PARTIAL	NOT CONFORMING	
5.3.10 Do internal auditors undertake a programme of continuing professional development? And Do internal auditors maintain a record of their professional development and training activities?			All auditors record their training and development needs and achievements on the Ceri system. This is considered during the annual appraisal process, where any further training and development needs are identified and addressed.
CONFORMS	PARTIAL	NOT CONFORMING	
5.4 1300 Quality Assurance and Improvement Programme			
The questions in this section seek to confirm that the CAE has developed and maintained a Quality Assurance and Improvement Programme (QAIP) through which conformance with the PSIAS can be and is properly assessed.			
5.4.1 Has the CAE developed a QAIP that covers all aspects of the internal audit activity and enables conformance with all aspects of the PSIAS to be evaluated? Does the QAIP assess the efficiency and effectiveness of the internal audit activity and identify opportunities for improvement? Does the CAE maintain the QAIP? Are any statutory requirements for review of the internal audit activity satisfied?			IA has a QAIP which is reported upon in the CMIA's Annual (end of year) Report. The QAIP covers all aspects of IA, to include the completion of an annual self-assessment (and 5-yearly external review) which evaluates IA's compliance with the PSIAS. The QAIP includes a suite of PIs determined by the GAC which assess IA's efficiency and effectiveness and also reported in the CMIA's Annual (end of year) Report. The Report also includes the IA's resultant improvement plan following the completion of the QAIP. The QAIP is monitored and maintained by the CMIA. The GAC reviews IA on a regular basis via IA's progress and end of year reports, and the Council's AGS.

			The IA service is assessed by the Council's external auditors annually, as part of their review of controls for their ISA 260 report; and an independent external review of the IA self-assessment is undertaken 5-yearly as required by the PSIAS.
CONFORMS	PARTIAL	NOT CONFORMING	
<i>1310 Requirements of the Quality Assurance and Improvement Programme</i>			
5.4.2 Does the QAIP include both internal and external assessments?			The CMIA undertakes an annual internal self-assessment, which is supported by a 5-yearly external review, as required by PSIAS (last undertaken November 2016. Next assessment by Ynys Môn currently in progress).
CONFORMS	PARTIAL	NOT CONFORMING	
<i>1311 Internal Assessments</i>			
5.4.3 Does the CAE ensure that audit work is allocated to staff with the appropriate skills, experience and competence?			(R3.2) Each IA review is allocated to staff based on each auditor's knowledge, skills and experience. Every member of staff is aware of the PSIAS requirements, as well as the IA Charter and Audit Manual, to ensure services are performed in accordance with set standards; and that advice and guidance is available, and should be sought if necessary from the CMIA, AM, SA, other Auditors, policies or procedures.
CONFORMS	PARTIAL	NOT CONFORMING	
5.4.4 Do internal assessments include ongoing monitoring of the internal audit activity, such as: <ul style="list-style-type: none"> • Routine quality monitoring processes? • Periodic assessments for evaluating conformance with the PSIAS? 			Each audit is reviewed by the CMIA, AM or SA for quality, correctness and completeness; quality control questionnaires are normally sent to clients for feedback on service provided; quarterly progress reports, the annual (end of year) report, the self-assessment results and QAIP are presented to GAC.
CONFORMS	PARTIAL	NOT CONFORMING	

<p>5.4.5 Does ongoing performance monitoring contribute to quality improvement through the effective use of performance targets?</p> <ul style="list-style-type: none"> • Is there a set of comprehensive targets which between them encompass all significant internal audit activities? • Are the performance targets developed in consultation with appropriate parties and included in any service level agreement? • Does the CAE measure, monitor and report on progress against these targets? • Does ongoing performance monitoring include obtaining stakeholder feedback? 	<p>Performance is monitored via the IA's progress against the annual operational audit plan, update of the improvement plan and targets.</p> <p>The PIs used are based on those used by CIPFA's audit benchmarking club and are compared to the all-wales average.</p> <p>The PIs are approved by the GAC as part of the QAIP.</p> <p>Progress, performance and targets are monitored on a regular basis by the CMIA and reported quarterly/annually to GAC.</p> <p>Quality control questionnaires are sent to auditees to request feedback re the service provided. These are normally circulated at year-end. No QCQs despatched in 2021/22 due to the pandemic. However, the Service received positive feedback from some auditees during the year. QCQs will start to be issued and monitored in Pentana for 2022/23 for audits undertaken on the software.</p>		
CONFORMS	PARTIAL	NOT CONFORMING	
<p>5.4.6 Are the periodic self-assessments or assessments carried out by people external to the internal audit activity undertaken by those with a sufficient knowledge of internal audit practices?</p> <p>Sufficiency would require knowledge of the PSIAS and the wider guidance available such as the Local Government Application Note and/or IIA practice advisories, etc.</p>	<p>The annual self-assessment is undertaken by the CMIA and presented to GAC; the last external review was undertaken by an audit manager from Conwy County Council who is familiar with the PSIAS and LGAN requirements. Next assessment by Ynys Môn currently in progress.</p>		
CONFORMS	PARTIAL	NOT CONFORMING	
<p>5.4.7 Does the periodic assessment include a review of the activity against the risk-based plan and the achievement of its aims and objectives?</p>	<p>The audit plan's progress 'to date' is noted in each quarterly progress report, as well as the scope / objective of each review, the assurance provided and number of actions required.</p>		
CONFORMS	PARTIAL	NOT CONFORMING	

<i>1312 External Assessments</i>		
<p>5.4.8 Has an external assessment been carried out, or is one planned to be carried out, at least once every five years?</p> <p>Has the CAE discussed the alternative approaches to external assessment with the board? This should reflect the relative costs of the different approaches, the potential advantages of an external viewpoint, and whether there are factors which might be considered to warrant a demonstrably independent assessment.</p>	<p>Last external review undertaken in November 2016. Next assessment by Ynys Môn currently in progress. CMIA has discussed the alternative approaches to external assessment with the GAC prior to the last review. It was decided to opt for an independent validation of the CMIA's self-assessment (rather than a 'full' assessment) which would avoid the duplication of work, and cost less in time and money.</p> <p>The actual assessor was chosen for the Council by the WCAG auditors administering the collaboration, to ensure independence.</p>	
CONFORMS	PARTIAL	NOT CONFORMING
<p>5.4.9 Has the CAE properly discussed the qualifications and independence of the assessor or assessment team with the board?</p> <p>In doing this, the CAE should consider whether the assessor or assessment team has demonstrated its competence in both the professional practice of internal auditing <i>and</i> the external assessment process. Competence can be demonstrated through both experience and theoretical learning. Experience of similar organisations or sectors is more valuable than less relevant experience. In the case of an assessment team, not all members need to have all the competencies – it is the team as a whole that is qualified. If the capability of the assessor or assessment team is not immediately obvious, the CAE should document how they used professional judgement to decide whether this is sufficient to carry out the external assessment.</p> <p>If the assessor or assessment team has any real or apparent conflicts of interest with the organisation, this should be clearly explained to the board, and safeguards should be put in place to minimise the effect of this on the conduct of the external assessment.</p>	<p>The last external review was undertaken by an audit manager from Conwy County Council who is familiar with the PSIAS and LGAN requirements.</p> <p>The assessor has many years' experience of audit and management and attends the NMWCAG / WCAG on behalf of Conwy CC.</p> <p>The actual assessor was chosen for the Council by the WCAG auditors administering the collaboration, to ensure independence.</p> <p>Other than attending the WCAG and NMWCAG, Conwy and Ceredigion CCs do not have any other joint activities in respect of auditing.</p> <p>No conflict of interest was lodged in respect of this appointment. The same process was in place for the current assessor – WCAG chose Ynys Môn as the external assessor, other than attending WCAG and NMWCAG Ynys Môn and Ceredigion CC do not have any other joint activities in respect of auditing.</p>	

Conflict of interest may include, but is not limited to, being a part of or under the control of the organisation to which the internal audit activity belongs.			
CONFORMS	PARTIAL	NOT CONFORMING	
5.4.10 Has the CAE agreed the scope of the external assessment with an appropriate sponsor, such as the chair of the audit committee, the CFO or the chief executive? The CAE should also agree this scope with the external assessor or assessment team.			CMIA discussed the alternative approaches to external assessment with the GAC prior to the last review. It was decided to opt for an independent validation of the CMIA's self-assessment (rather than a 'full' assessment). This was communicated to the assessor prior to the commencement of the review.
CONFORMS	PARTIAL	NOT CONFORMING	
<i>1320 Reporting on the Quality Assurance and Improvement Programme</i>			
5.4.11 Has the CAE reported the results of the QAIP to senior management and the board? Note that: <ul style="list-style-type: none"> • The results of both external and periodic internal assessments must be communicated upon completion • The results of ongoing monitoring must be communicated at least annually • The results must include the assessor's or assessment team's evaluation with regards to the degree of the internal audit activity's conformance with the PSIAS. 			The results of the completed annual self-assessment, and annual (end of year) report (with QAIP) is presented to GAC annually. The 5-yearly external assessment is presented to GAC upon its completion.
CONFORMS	PARTIAL	NOT CONFORMING	
5.4.12 Has the CAE included the results of the QAIP and progress against any improvement plans in the annual report?			(R5.4.1) IA has a QAIP which is reported upon in the CMIA's Annual (end of year) Report. The QAIP covers all aspects of IA, to include the completion of an annual self-assessment (and 5-yearly external

			review) which evaluates IA's compliance with the PSIAS. The QAIP includes a suite of PIs determined by GAC which assess IA's efficiency and effectiveness and also reported in the CMIA's Annual (end of year) Report. The Report also includes the IA's resultant improvement plan following the completion of the QAIP. The QAIP is monitored and maintained by the CMIA, who reports progress to GAC quarterly.
CONFORMS	PARTIAL	NOT CONFORMING	
<i>1321 Use of 'Conforms with the International Standards for the Professional Practice of Internal Auditing'</i>			
5.4.13 Has the CAE stated that the internal audit activity conforms with the PSIAS only if the results of the QAIP support this?			N/A – statement not currently used in Audit Reports.
CONFORMS	PARTIAL	NOT CONFORMING	
<i>1322 Disclosure of Non-conformance</i>			
5.4.14 Has the CAE reported any instances of non-conformance with the PSIAS to the board?			The results of the self-assessment is reported to the GAC. Any instances of non-conformance or partial will be highlighted and noted in the resultant improvement plan.
CONFORMS	PARTIAL	NOT CONFORMING	
5.4.15 If appropriate, has the CAE considered including any significant deviations from the PSIAS in the governance statement and has this been evidenced?			N/A – no significant deviations detected.
CONFORMS	PARTIAL	NOT CONFORMING	

Questions to Consider	Evidence / Comments
6 Performance Standards	
6.1 2000 Managing the Internal Audit Activity	
<p>The questions in this section seek to confirm that the internal audit activity's work achieves the purposes and responsibility of the activity, as set out in the internal audit charter, and that the internal audit activity adds value to the organisation and its stakeholders by:</p> <ul style="list-style-type: none"> • Providing objective and relevant assurance • Contributing to the effectiveness and efficiency of the governance, risk management and internal control processes. 	
<i>2010 Planning</i>	
<p>6.1.1 Has the CAE determined the priorities of the internal audit activity in a risk-based plan and are these priorities consistent with the organisation's goals? Does the risk-based plan take into account the requirement to produce an annual internal audit opinion? Does the risk-based plan incorporate or is it linked to a strategic or high-level statement of:</p> <ul style="list-style-type: none"> • How the internal audit service will be delivered? • How the internal audit service will be developed in accordance with the internal audit charter? • How the internal audit service links to organisational objectives and priorities? 	<p>The CMIA decides the priorities, scope and methods of the Council's audit activity by establishing a risk-based audit plan, developed in accordance with the Council's Risk Management Framework and Corporate Risk Register.</p> <p>Various corporate documents are referred to during the compilation of the audit plan, to include the Corporate Strategy which contains the Council's corporate vision, priorities and well-being objectives, in order to align them with the service provision.</p> <p>The audit plan stipulates the 'type' of audit to be undertaken for each review. The priority is placed on assurance work, as this is the main objective of IA, which is used to base the CMIA's annual audit opinion.</p> <p>The risk-based audit plan forms part of the Annual Audit Strategy, which notes:</p> <ul style="list-style-type: none"> • How the IA service is delivered and developed in accordance with the IA charter, and • How the IA service links to the Council's corporate vision, priorities and well-being objectives. <p>IA assesses its work on an on-going basis, considering the Council's</p>

			<p>changing needs and priorities regularly. However, for 2021/22, the usual risk assessment was not undertaken as the pandemic introduced new risks to the Council, which continue to constantly change. IA will therefore assess its work on an on-going basis, considering the Council's changing needs and priorities regularly.</p> <p>The new CMIA has used both the risk assessment and input from the Corporate Risk Register when creating the IA plan for 2022/23, in addition to additional work planned such as grants and existing audits that have been rolled over from 2021/22. However, the IA Strategy and Plan does not clearly state the priorities of the audits within the IA plan or how they align to the organisations Corporate Strategy & priorities.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<p>6.1.2 Does the risk-based plan set out how internal audit's work will identify and address local and national issues and risks?</p> <p>In developing the risk-based plan, has the CAE taken into account the organisation's risk management framework and relative risk maturity of the organisation?</p> <p>If such a risk management framework does not exist, has the CAE used their judgement of risks after input from senior management and the board and evidenced this?</p>			<p>Various internal and external documents and correspondence are referred to during the compilation of the risk-based plan. It can only be indicative as it assumes no changes in risk. The Annual Audit Strategy notes how the plan will be reviewed periodically in response to any local and national issues / developments which are deemed relevant.</p> <p>The risk-based audit plan is developed and compiled in accordance with the Council's Risk Management Framework, and has regard to the corporate risk register which is routinely reported to GAC.</p> <p>During 2021/22 and 2022/23 IA will assess its work according to changes in risks on an on-going basis, considering the Council's changing needs and priorities regularly.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<p>6.1.3 Does the risk-based plan set out the:</p> <ul style="list-style-type: none"> • Audit work to be carried out? • Respective priorities of those pieces of audit work? 			<p>The annual audit plan contains the initial risk-based operational plan of work to be performed for the Council, and the scope of each piece of work. The priority is placed on assurance</p>

<ul style="list-style-type: none"> • Estimated resources needed for the work? <p>Does the risk-based plan differentiate between audit and other types of work?</p> <p>Is the risk-based plan sufficiently flexible to reflect the changing risks and priorities of the organisation?</p>			<p>work, although there are other considerations eg WG deadlines. The estimated number of days allocated to each piece of work is entered in the plan, as well as the total number of days required to complete the entire plan, in order to assess the required resources.</p> <p>The plan stipulates the ‘type’ of audit to be undertaken for each review, and other work to be undertaken, eg consultations.</p> <p>The CMIA reviews and adjusts the plan during the year, in response to internal and/or external influences, which is reported to the GAC.</p> <p>During 2022/23 the plan of work will be flexible in accordance with risk. However, the IA Strategy and Plan does not clearly state the priorities of the audits within the IA plan or how they align to the organisations Corporate Strategy & priorities.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<p>6.1.4 Does the CAE review the plan on a regular basis and has he or she adjusted the plan when necessary in response to changes in the organisation’s business, risks, operations, programmes, systems and controls?</p>			<p>The plan’s implementation is monitored by the CMIA on an on-going basis and, inevitably, a number of changes are required during the year for a variety of reasons, necessitating the re-prioritisation of tasks, and revisions to the original work planned, which is detailed in the quarterly Progress Reports to GAC.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<p>6.1.5 Is the internal audit activity’s plan of engagements based on a documented risk assessment?</p> <p>Is the risk assessment used to develop the plan of engagements undertaken at least annually?</p>			<p>The risk assessment used is documented in the Annual Audit Strategy as approved by GAC. The risk assessment of all Council services is undertaken annually by the CMIA. During 2021/22 and 2022/23 the plan of work will be flexible in accordance with risk.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<p>6.1.6 In developing the risk-based plan, has the CAE also given sufficient consideration to:</p> <ul style="list-style-type: none"> • Any declarations of interest (for the avoidance for conflicts of interest)? 			<ul style="list-style-type: none"> • Staff are required to declare any interest that may impact upon their objectivity in an annual written statement to the CMIA who is therefore able to plan the allocation of

<ul style="list-style-type: none"> • The requirement to use specialists, eg IT or contract and procurement auditors? • Allowing contingency time to undertake ad hoc reviews or fraud investigations as necessary? • The time required to carry out the audit planning process effectively as well as regular reporting to and attendance of the board, the development of the annual report and the CAE opinion? 	<p>work to avoid the risk of any conflict of interest.</p> <ul style="list-style-type: none"> • Additional assistance is obtained where specialist skills are required eg complex ICT audits, such as the Financials ICT audit in 2018/19. The CMIA & AM received training and development from Mindgrove to address this requirement during 2019/20. • The plan's resource requirements are calculated and any additional resources available are noted as a contingency for any unforeseen pieces of work. • The CMIA and AM time include allocations for planning and reporting activities, etc. 	
CONFORMS	PARTIAL	NOT CONFORMING
<p>6.1.7 In developing the risk-based plan, has the CAE consulted with senior management and the board to obtain an understanding of the organisation's strategies, key business objectives, associated risks and risk management processes?</p> <p>Does the CAE identify and consider the expectations of senior management, the board and other stakeholders for internal audit opinion and any other conclusions?</p>	<p>The CMIA periodically attends LG and has meetings with CLOs to discuss the audit plan and/or other pieces of work undertaken by the service, where necessary.</p> <p>The CMIA is familiar with the Council's Corporate Strategy which contains the Council's corporate vision, priorities and well-being objectives; and the Risk Management Framework. The corporate risk register is routinely reported to GAC.</p> <p>The objectives of the IA service include understanding and supporting the Council's needs and objectives as a whole, in the service's role in evaluating and reporting on the Council's activities.</p>	
CONFORMS	PARTIAL	NOT CONFORMING
<p>6.1.8 Does the CAE take into consideration any proposed consulting engagement's potential to improve the management of risks, to add value and to improve the organisation's operations before accepting them?</p> <p>Are consulting engagements that have been accepted included in the risk-based plan?</p>	<p>The objectives of the IA service include adding value and assisting the Council in achieving its objectives, by providing appropriate and relevant advice and guidance when new systems and procedures are introduced.</p> <p>The plan is flexible, and is updated in response to any changes in the Council's priorities, business, risks, operations, programs, systems and controls, etc.</p>	
CONFORMS	PARTIAL	NOT CONFORMING

<i>2020 Communication and Approval</i>			
6.1.9 Has the CAE communicated the internal audit activity's plans and resource requirements to senior management and the board for review and approval?			The CMIA periodically attends LG and has meetings with CLOs to discuss the audit plan and/or other pieces of work undertaken by the service, where necessary. The annual audit strategy and plan is presented to GAC for approval, which includes the annual plan and its resource requirement.
CONFORMS	PARTIAL	NOT CONFORMING	
6.1.10 Has the CAE communicated the impact of any resource limitations to senior management and the board?			Any known limitations are reported in the quarterly progress reports when it comes to the CMIA's attention. The resulting impact on the service is also documented eg the need for additional training.
CONFORMS	PARTIAL	NOT CONFORMING	
<i>2030 Resource Management</i>			
6.1.11 Does the risk-based plan explain how internal audit's resource requirements have been assessed?			A breakdown of how the number of days required to complete the operational audit plan (and other functions) are calculated and total is included in the strategy.
CONFORMS	PARTIAL	NOT CONFORMING	
6.1.12 Has the CAE planned the deployment of resources, especially the timing of engagements, in conjunction with management to minimise disruption to the functions being audited, subject to the requirement to obtain sufficient assurance?			Auditors ensure engagements are planned in conjunction with management in order to minimise wasted work and time (other than where unannounced visits are necessary).
CONFORMS	PARTIAL	NOT CONFORMING	
6.1.13 If the CAE believes that the level of agreed resources will impact adversely on the provision of the internal audit opinion, has he or she brought these consequences to the attention of the board? This may include an imbalance between the work plan and resource availability and/or other significant matters that jeopardise the delivery of the plan or require it to be changed.			If a deficiency in resources was highlighted during the compilation of the annual audit plan, it would have an impact on the audit opinion as insufficient reviews would be undertaken in order to provide the audit opinion on assurance. This would be reported to GAC by the CMIA.
CONFORMS	PARTIAL	NOT CONFORMING	

<i>2040 Policies and Procedures</i>			
<p>6.1.14 Has the CAE developed and put into place policies and procedures to guide the internal audit activity? Examples include maintaining an audit manual and/or using electronic management systems to guide staff in performing their duties in a manner that conforms to the PSIAS. Are the policies and procedures regularly reviewed and updated to reflect changes in working practices and standards?</p>			<p>The IA Charter, annual audit strategy and plan, audit manual and audit programs provide guidance to the IA section. IA has also commenced using the Pentana (MKI) audit management software during 2018/19 which was used for all planned audits during 2019/20 (although this was not found to be as useful for recording ad-hoc / reactive work as undertaken during 2020/21 and 2021/22). Pentana was evaluated in early 2022 and full training has been arranged for June 2022 for all IA staff in order for the software to be relaunched and used effectively to add value to the IA service. Appropriate CIPFA policies and guidance are also circulated to members of staff. The policies and procedures are regularly reviewed and updated as necessary. The latest IA Charter was presented to Audit Committee in March 2022 & the Audit Manual was updated in May 2022.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<i>2050 Coordination</i>			
<p>6.1.15 Does the risk-based plan include an adequately developed approach to using other sources of assurance and any work that may be required to place reliance upon those sources?</p> <p>The CAE should generally share information and coordinate activities with other internal and external providers of assurance and consulting services. They may also carry out an assurance mapping exercise, or make use of assurance mapping carried out by other assurance providers.</p> <p>They should also meet regularly with the nominated external audit representative to consult on and coordinate their respective audit plans.</p> <p>Where key organisational risks relate to work undertaken through partnerships, the auditor may be able to take</p>			<p>The objectives of the IA service include understanding its role alongside other sources of assurance within the Council, and to plan its work accordingly. Any direct assurance placed on other sources is noted in the Annual Report. An assurance mapping exercise was commenced in 2018/19, which is also documented in the Annual Report. This has been updated & added to during 2020/21 and 2021/22. The capturing of assurances has been reviewed in May 2022 by the CMIA and SA and areas for improvement have been identified and are in development. The CMIA meets regularly with the external auditors, and both parties present their respective plans to the Audit Committee to ensure no duplication of work.</p>

assurance from work undertaken by others. Or by obtaining assurance directly.			
CONFORMS	PARTIAL	NOT CONFORMING	
<i>2060 Reporting to Senior Management and the Board</i>			
<p>6.1.16 Does the CAE report periodically to senior management and the board on the internal audit activity's purpose, authority, responsibility and performance relative to its plan?</p> <p>Does the periodic reporting also include significant risk exposures and control issues, including fraud risks, governance issues and other matters needed or requested by senior management and the board?</p> <p>Is the frequency and content of such reporting determined in discussion with senior management and the board and are they dependent on the importance of the information to be communicated and the urgency of the related actions to be taken by senior management of the board?</p>			<p>The CMIA reports regularly to GAC on internal audit activity's purpose, authority, responsibility and performance relative to its plan (quarterly progress reports). Presentations are given to LG, management meetings, head teachers training days, transformation workshop, etc on an ad-hoc basis to inform staff across the Council of IA's purpose, authority and responsibility.</p> <p>The progress reports to GAC also include any additional reviews undertaken by IA during the period, to include those undertaken where fraud is suspected, etc. These are reported to LG on a case-by-case basis, where required, in accordance with the agreed remit.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<i>2070 External Service Provider and Organisational Responsibility for Internal Auditing</i>			
6.1.17 Where an external internal audit service provider acts as the internal audit activity, does that provider ensure that the organisation is aware that the responsibility for maintaining and effective internal audit activity remains with the organisation?			N/A – internal audit provided internally.
CONFORMS	PARTIAL	NOT CONFORMING	
6.2 2100 Nature of Work			
The questions in this section seek to confirm that the internal audit activity evaluates and contributes to the improvement of the organisation's			

governance, risk management and internal control processes using a systematic and disciplined approach.		
<i>2110 Governance</i>		
<p>6.2.1 Does the internal audit activity assess and make appropriate recommendations to improve the organisation's governance processes for:</p> <ul style="list-style-type: none"> • Making strategic and operational decisions? • Overseeing risk management and control? • Promoting appropriate ethics and values within the organisation? • Ensuring effective organisational performance management and accountability? • Communicating risk and control information to appropriate areas of the organisation? • Coordinating the activities of and communicating information among the board, external and internal auditors and management? 		
<p>IA evaluates the Council's services, systems and procedures; and recommends actions where weaknesses are identified. The areas audited each year are determined by the results of the risk-based audit plan, or on an on-going risk assessed basis. The AGS Framework is reviewed annually by IA to confirm efficiencies can be evidenced. The corporate risk management framework is regularly reviewed and this was recently undertaken during 2020/21 (previous 2018/19). An audit of ethics was also conducted during 2018/19 (but due to the IA resource situation during the year, this was undertaken by Carmarthenshire CC). Performance management has not been reviewed recently due to the introduction of the new Teifi system, and new appointments, but will be included in IA's forward work plan. An 'Audit Wales Protocol' has recently been approved by LG to facilitate the coordination of activities and communicating information among the board, external and internal auditors and management.</p>		
CONFORMS	PARTIAL	NOT CONFORMING
<p>6.2.2 Has the internal audit activity evaluated the design, implementation and effectiveness of the organisation's ethics-related objectives, programmes and activities? This is an area where the CAE may be able to use other sources of assurance.</p>		
<p>An audit of ethics was conducted during 2018/19 (but due to the IA resource situation during the year, this was undertaken by Carmarthenshire CC). A follow-up has been commenced in-house during 2020/21. This, coupled with the knowledge of processes within the Council concerning ethics has provided high assurance re the Council's ethics-related objectives, programmes and activities eg Ethics & Standards Committee; dedicated</p>		

			<p>corporate complaints officer, mandatory staff training, gifts and hospitality register & reminders, suite of regularly updated policies, recent updating of Code of Conduct, etc.</p> <p>A survey of staff opinions on the Council's ethics culture was undertaken during 2019/20 by IA, which is due to be followed-up once the 2020/21 audit has been finalised. An ethics & counter-fraud training session has been arranged for Managers which will be presented by Zurich to the managers workshop on 28/5/21. IA has contributed to a mandatory ethics e-learning module which is now in development with Learning & development.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<p>6.2.3 Has the internal audit activity assessed whether the organisation's information technology governance supports the organisation's strategies and objectives? This is an area where the CAE may be able to use other sources of assurance.</p>			<p>Reliance is placed on the external assessments required by ICT, as the service is subject to continuous monitoring by various bodies eg the Public Services Network's compliance with the Code of Connection (CoCo). Co-Co requires the Council to demonstrate that the infrastructure is sufficiently secure and would not present an unacceptable risk to the security of the network. It is also necessary to meet PSN's information assurance requirements and to make a number of commitments to ensure the ongoing security of the network. NTA Monitor Ltd (a leading provider of information security consultancy, auditing and penetration testing services) also completed an External Network Test on the Council's systems, and has performed an onsite PSN IT Health Check.</p> <p>A PCI-DSS compliance test is completed annually.</p> <p>Specialist auditors from Carmarthenshire CC undertook an ICT audit of the new Ceri Payroll ICT system during 2017/18, and returned in 2018/19 to audit the Council's Computerised Financials systems.</p>

			<p>This was complemented by IA's general ICT audits of compliance within key systems.</p> <p>The AM received training and development from Mindgrove to address this requirement during 2019/20.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<i>2120 Risk Management</i>			
<p>6.2.4 Has the internal audit activity evaluated the effectiveness of the organisation's risk management processes by determining that:</p> <ul style="list-style-type: none"> • Organisational objectives support and align with the organisation's mission? • Significant risks are identified and assessed? • Appropriate risk responses are selected that align risks with the organisation's risk appetite? • Relevant risk information is captured and communicated in a timely manner across the organisation, thus enabling the staff, management and the board to carry out their responsibilities? 			<p>The Council has clear strategic objectives which support its vision statement, which have been approved by Council (Corporate Strategy). Individual risks are identified and assessed by managers in their business plans which are monitored and reported upon quarterly, and reviewed annually. Significant risks are captured in the corporate risk register which is reviewed quarterly by LG and is a standard agenda item at GAC. Mitigation actions are noted to align risks with the organisation's risk appetite. The risk management framework is regularly reviewed and this was recently undertaken during 2020/21 (and previously in 2018/19).</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<p>6.2.5 Has the internal audit activity evaluated the risks relating to the organisation's governance, operations and information systems regarding the:</p> <ul style="list-style-type: none"> • Achievement of the organisation's strategic objectives? • Reliability and integrity of financial and operational information? • Effectiveness and efficiency of operations and programmes? • Safeguarding of assets? • Compliance with laws, regulations, policies, procedures and contracts? 			<p>IA evaluates the Council's services in accordance with the annual risk-based audit plan, or on an on-going risk assessed basis, and provides appropriate and relevant advice and guidance when new systems and procedures are introduced. Governance, operations and information systems are included in the audit programs. The Governance Framework is reviewed annually.</p> <p>All reviews are undertaken bearing in mind the services' future aims and objectives. The main financial systems are subject to a 3-yearly rolling review (more frequent during the pandemic due to additional risks eg wfh). IA</p>

			assesses the adequacy of procedures to ensure the Council's assets are adequately safeguarded and that services comply with significant policies, plans, procedures, laws and regulations.
CONFORMS	PARTIAL	NOT CONFORMING	
<p>6.2.6 Has the internal audit activity evaluated the potential for fraud and also how the organisation itself manages fraud risk?</p> <p>CIPFA has issued a <i>Code of Practice on Managing the Risk of Fraud and Corruption</i>, and strongly recommends that it is used as the basis for assessment of how an authority manages its fraud risk.</p>			<p>All auditors have an awareness of the possibility of finding errors, fraud or non-compliance within the Council's systems and procedures. The Council is determined to strive for a culture of honesty and integrity, opposing fraud, corruption and malpractice. It has a comprehensive Strategy on Counter-Fraud, Bribery and Corruption (to include Anti-Money Laundering) which includes a response plan, based on CIPFA guidance. This strategy was presented to the GAC for approval on 3/6/21.</p> <p>IA presents an annual counter-fraud report to GAC at year-end.</p> <p>An ethics & counter-fraud training session has been arranged for Managers which will be presented by Zurich to the managers workshop on 28/5/21.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<p>6.2.7 Do internal auditors address risk during consulting engagements consistently with the objectives of the engagement?</p> <p>Are internal auditors alert to other significant risks when undertaking consulting engagements?</p> <p>Do internal auditors incorporate knowledge of risks gained from consulting engagements into their evaluation of the organisation's risk management processes?</p>			<p>Risks form the basis of each audit program, to include consultations. All auditors have an awareness of the possibility of finding errors, fraud or non-compliance within the Council's systems and procedures.</p> <p>Any risks discovered during a consulting engagement is reported to management at that time, with recommended mitigating actions. These are reported further, in accordance with the risk management process, if no action is taken and the risk exceeds the Council's risk appetite.</p>
CONFORMS	PARTIAL	NOT CONFORMING	

6.2.8 Do internal auditors successfully avoid managing risks themselves, which would in effect lead to taking on management responsibility, when assisting management in establishing or improving risk management processes?	Actions to mitigate perceived risks are noted in audit reports, with the name of the officer responsible for implementing the action and a target date for its completion. Auditors are mindful not to get operationally involved in the process (eg grants / direct payments).	
CONFORMS	PARTIAL	NOT CONFORMING
<i>2130 Control</i>		
6.2.9 Has the internal audit activity evaluated the adequacy and effectiveness of controls in the organisation's governance, operations and information systems regarding the: <ul style="list-style-type: none"> • Achievement of the organisation's strategic objectives? • Reliability and integrity of financial and operational information? • Effectiveness and efficiency of operations and programmes? • Safeguarding of assets? • Compliance with laws, regulations, policies, procedures and contracts? 	(R6.2.5) IA evaluates the Council's services in accordance with the annual risk-based audit plan, or on an on-going risk assessed basis, and provides appropriate and relevant advice and guidance when new systems and procedures are introduced. Governance, operations and information systems are included in the audit programs. All reviews are undertaken bearing in mind the services' future aims and objectives. The main financial systems are subject to a 3-yearly rolling review. IA assesses the adequacy of procedures to ensure the Council's assets are adequately safeguarded and that services comply with significant policies, plans, procedures, laws and regulations.	
CONFORMS	PARTIAL	NOT CONFORMING
6.2.10 Do internal auditors utilise knowledge of controls gained during consulting engagements when evaluating the organisation's control processes?	Evaluation of controls form part of each audit program.	
CONFORMS	PARTIAL	NOT CONFORMING
6.3 2200 Engagement Planning		
6.3.1 Do internal auditors develop and document a plan for each engagement? Does the engagement plan include the engagements: <ul style="list-style-type: none"> • Objectives? • Scope? • Timing? • Resource allocations? 	Where requested, an Audit Assignment Brief is produced to support each audit; the objectives and scope of an audit are contained in the audit plan (& report) & each program whilst timing is agreed with the auditee and resource allocation is communicated to each auditor upon allocation of work. Current practices are changing due to the introduction of Pentana (MKI) which will streamline this system.	
CONFORMS	PARTIAL	NOT CONFORMING

<p>6.3.2 Do internal auditors consider the following in planning and engagement, and is this documented:</p> <ul style="list-style-type: none"> • The objectives of the activity being reviewed? • The means by which the activity controls its performance? • The significant risks to the activity being audited? • The activity's resources? • The activity's operations? • The means by which the potential impact of risk is kept to an acceptable level? • The adequacy and effectiveness of the activity's governance, risk management and control processes compared to a relevant framework or model? • The opportunities for making significant improvements to the activity's governance, risk management and control processes? 	<p>The activity's risks and resources are considered during the audit plan stage; the activity's objectives and operations are considered at the planning & engagement stage; whilst means of reducing any perceived risks, the adequacy of the activity's governance, risk management and control processes, and the opportunities for making improvements are evaluated during the review. The review is undertaken by following a set audit program, documenting the tests required and relevant governance, risk & control issues that apply.</p> <p>The means by which the activity monitors its performance is only considered where this forms a part of the audit objective.</p> <p>Recommended actions are provided to the activity if any weaknesses are detected in its governance, risk management and control processes.</p>	
CONFORMS	PARTIAL	NOT CONFORMING
<p>6.3.3 Where an engagement plan has been drawn up for an audit to a party outside of the organisation, have the internal auditors established a written understanding with that party about the following:</p> <ul style="list-style-type: none"> • Objectives? • Scope? • The respective responsibilities and other expectations of the internal auditors and the outside party (including restrictions on distribution of the results of the engagement and access to engagement records)? 	<p>The last external engagement accepted by the CMIA was the peer review of Flintshire CC, for which a clear written agreement was agreed between both parties.</p>	
CONFORMS	PARTIAL	NOT CONFORMING
<p>6.3.4 For consulting engagements, have internal auditors established an understanding with the engagement clients about the following:</p> <ul style="list-style-type: none"> • Objectives? • Scope? • The respective responsibilities of the internal auditors and the client and other client expectations? 	<p>Engagement details are usually received in writing in an email from the client; otherwise, the scope will be documented by IA.</p>	

For significant consulting engagements, has this understanding been documented?			
CONFORMS	PARTIAL	NOT CONFORMING	
<i>2210 Engagement Objectives</i>			
<p>6.3.5 Have objectives been agreed for each engagement? Have internal auditors carried out a preliminary risk assessment of the activity under review? Do the engagement objectives reflect the results of the preliminary risk assessment that has been carried out? Have internal auditors considered the probability of the following when developing the engagement objectives:</p> <ul style="list-style-type: none"> • Significant errors? • Fraud? • Non-compliance? • Any other risks? 			<p>The objectives and scope of an audit are contained in the audit plan. The risk assessment of each activity is undertaken as part of the compilation of the annual risk-based audit plan. Unless the audit is eg a key control audit which is undertaken routinely on a 3-yearly rolling review basis, a reason for the activity's inclusion in the audit plan is documented. Various risks to include errors, fraud, or non-compliance are taken into account as part of the risk assessment in compiling the annual audit plan.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<p>6.3.6 Have internal auditors ascertained whether management and/or the board have established adequate criteria to evaluate and determine whether organisational objectives and goals have been accomplished? If the criteria has been deemed adequate, have the internal auditors used the criteria in their evaluation of governance, risk management and controls?</p>			<p>The Council is subject to continuous reviews. The Governance framework is based on CIPFA guidance and is completed annually with input from management and Members (in a workshop) & approved by LG, GAC & Council as part of the Statement of Accounts. The framework is reviewed annually by IA to confirm efficiencies can be evidenced, and this forms part of IA's evaluation of the Council's governance, risk management and controls.</p>
<p>If the criteria has been deemed inadequate, have the internal auditors worked with management and/or the board to develop appropriate evaluation criteria? If the value for money criteria has been referred to, has the use of all the organisation's main types of resources been considered, including money, people and assets?</p>			<p>N/A – criteria based on CIPFA guidance.</p>
CONFORMS	PARTIAL	NOT CONFORMING	

<p>6.3.7 Do the objectives set for consulting engagements address governance, risk management and control processes as agreed with the client?</p> <p>Are the objectives set for consulting engagements consistent with the organisation's own values, strategies and objectives?</p>	<p>Engagement objectives are set on a case-by-case basis. The majority will cover one or all governance, risk management and control processes, and agreed with the client beforehand. All reviews are undertaken bearing in mind the services' future aims and objectives.</p>	
<p>CONFORMS</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p><i>2220 Engagement Scope</i></p>		
<p>6.3.8 Is the scope that is established for each engagement generally sufficient to satisfy the engagement's objectives? Does the scope for each engagement include consideration of relevant systems, records, personnel and physical properties? Does this consideration include areas under the control of outside parties, where appropriate?</p>	<p>The scope of an engagement is based on its objectives, and is compiled on a case-by-case basis.</p>	
<p>CONFORMS</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p>6.3.9 Where significant consulting opportunities have arisen during an assurance engagement, was a specific written understanding as to the objectives, scope, respective responsibilities and other expectations drawn up?</p> <p>Where significant consulting opportunities have arisen during an assurance engagement, were the results of the subsequent engagement communicated in accordance with the relevant consulting standards?</p>	<p>When consulting opportunities, or further audit scope, is identified during an engagement, the work is usually undertaken by IA alongside the original audit (especially where the additional work is due to a review of risk). This will be communicated in writing to the client. Results are usually communicated in an audit report (which may be a separate report to the one issued following the original assurance work). This is decided on a case-by-case basis, and the most appropriate means used.</p>	
<p>CONFORMS</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>

<p>6.3.10 For each consulting engagement, was the scope of the engagement generally sufficient to address any agreed-upon objectives?</p> <p>If the internal auditors developed any reservations about the scope of a consulting engagement while undertaking that engagement, did they discuss those reservations with the client and therefore determine whether or not to continue with the engagement?</p> <p>During consulting engagements, did internal auditors address the controls that are consistent with the objectives of those engagements?</p>	<p>The scope of an engagement is based on its objectives, and is compiled on a case-by-case basis.</p> <p>Auditors discuss any reservations with the CMIA/AM/SA. A decision is made as to how to continue with the work, and any major variances would be communicated to the client.</p> <p>IA considers the relevant governance, risk & control issues that apply to each engagement.</p>	
CONFORMS	PARTIAL	NOT CONFORMING
<p><i>2230 Engagement Resource Allocation</i></p>		
<p>6.3.11 Have internal auditors decided upon the appropriate and sufficient level of resources required to achieve the objectives of each engagement based on:</p> <p>a) The nature and complexity of the individual engagement?</p> <p>b) Any time constraints?</p> <p>c) The resources available?</p>	<p>All three items: nature and complexity of the individual engagement, time constraints and resources available are taken into account when allocating resources to an engagement as aprt of the audit plan.</p>	
CONFORMS	PARTIAL	NOT CONFORMING
<p><i>2240 Engagement Work Programme</i></p>		
<p>6.3.12 Have internal auditors developed and documented work programmes that achieve the engagement objectives?</p> <p>Do the engagement work programmes include procedures for:</p> <ul style="list-style-type: none"> • Identifying information? • Analysing information? • Evaluating information? • Documenting information? <p>Were work programmes approved prior to implementation for each engagement?</p> <p>Were any adjustments required to work programmes approved promptly?</p>	<p>The IA Section has a suite of internal audit work programs which are continuously updated, in response to any required changes.</p> <p>IA is currently introducing, and using some of the work programmes input onto Pentana (MKI). The programmes note what information is required and how it should be analysed and/or evaluated. The auditors can then document the information collected.</p> <p>All work programmes whether manual or on Pentana (MKI) require approval of the CMIA/AM/SA prior to use.</p> <p>Any adjustments deemed necessary will be made to work programmes promptly, during the approval stage.</p>	
CONFORMS	PARTIAL	NOT CONFORMING

6.4 2300 Performing the Engagement

The questions in this section seek to confirm that internal auditors analyse, evaluate and document sufficient, reliable, relevant and useful information to support engagement results and conclusions.

2310 Identifying Information

6.4.1 Do internal auditors generally identify (sufficient, reliable, relevant and useful) information which supports engagement results and conclusions? Sufficient information is factual, adequate and convincing so that a prudent, informed person would reach the same conclusions as the auditor. Reliable information is the best attainable information through the use of appropriate engagement techniques. Relevant information supports engagement observations and recommendations and is consistent with the objectives for the engagement. Useful information helps the organisation meet its goals.

Clear and concise working papers are required, as noted in the Audit Manual. All audit working papers are reviewed by the CMIA, AM or SA to ensure a consistent quality of work is upheld by the Section at all times and that the required standards are achieved. All findings and conclusions are evidenced by sufficient, reliable, relevant and useful information. If insufficient information is provided, a review sheet is forwarded to the auditor requesting the additional information / work to be undertaken. Unreliable information is discounted (unless it can be evidenced). Irrelevant information and that of no use is disregarded, and auditors are reminded of requirements.

CONFORMS	PARTIAL	NOT CONFORMING
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2320 Analysis and Evaluation

6.4.2 Have internal auditors generally based their conclusions and engagement results on appropriate analyses and evaluations?

The CMIA requires IA working papers to be sufficient, concise and adequately referenced to ensure all findings, recommendations and conclusions, and the overall audit opinion, are supported, and provide a clear record of the work performed. A review sheet is forwarded to the auditor requesting the additional information / work where this requirement is not achieved.

CONFORMS	PARTIAL	NOT CONFORMING
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6.4.3 Have internal auditors generally remained alert to the possibility of the following when performing their individual audits, and has this been documented:

- Intentional wrongdoing?
- Errors or omissions?
- Poor value for money?

Auditors exercise due professional care by having an awareness of the probability of significant errors, fraud or non-compliance. Any serious weaknesses or issues are reported to the CMIA or AM immediately to decide the best course of action; other issues are fully

<ul style="list-style-type: none"> • Failure to comply with management policy? • Conflicts of interest? 	<p>documented to ensure they are addressed as part of the audit. This requirement is noted in the audit manual.</p>	
CONFORMS	PARTIAL	NOT CONFORMING
<p><i>2330 Documenting Information</i></p>		
<p>6.4.4 Have internal auditors documented the relevant information required to support engagement conclusions and results? Are working papers sufficiently complete and detailed to enable another experienced internal auditor with no previous connection with the audit to ascertain what work was performed, to re-perform it if necessary and to support the conclusions reached?</p>	<p>(R6.4.2) The CMIA requires IA working papers to be sufficient, concise and adequately referenced to ensure all findings, recommendations and conclusions, and the overall audit opinion, are supported, and provide a clear record of the work performed. A review sheet is forwarded to the auditor requesting the additional information / work where this requirement is not achieved.</p>	
CONFORMS	PARTIAL	NOT CONFORMING
<p>6.4.5 Does the CAE control access to engagement records? Has the CAE obtained the approval of senior management and/or legal counsel as appropriate before releasing such records to external parties? Has the CAE developed and implemented retention requirements for all types of engagement records?</p>	<p>The IA Section has a shared electronic filing system; only the CMIA can access certain records. No such records have been released to external parties. This would be discussed with the Data Protection Officer / CLO-Legal & Governance / Monitoring Officer / Corporate Complaints and FOI Manager as appropriate if such a request was received. IA has a retention policy which is contained in the Audit Manual.</p>	
CONFORMS	PARTIAL	NOT CONFORMING
<p>6.4.6 Are the retention requirements for engagement records consistent with the organisation's own guidelines as well as any relevant regulatory or other requirements?</p>	<p>IA retention policy has been written in conjunction with the Council's corporate record management policy, and the Record Management Society's guidelines.</p>	
CONFORMS	PARTIAL	NOT CONFORMING

<i>2340 Engagement Supervision</i>			
<p>6.4.7 Are all engagements properly supervised to ensure that objectives are achieved, quality is assured and that staff are developed?</p> <p>Is appropriate evidence of supervision documented and retained for each engagement?</p>			<p>Auditors are supervised by the CMIA, AM or SA throughout an audit. All work is subject to a quality review. All reports are checked by the CMIA prior to issue. Working papers are initialled by the reviewer (this is automatic on reviews conducted on Pentana (MKI)). All final reports are signed by the CMIA (or deputy). Any performance issues are dealt with using the Council's Managing Employee Performance Policy – the CMIA and AM have attended the mandatory management training on Empowering Staff Performance.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
6.5 2400 Communicating Results			
<p>The questions in this section seek to confirm that internal auditors communicate the results of engagements in an appropriate way.</p>			
<i>2410 Criteria for Communicating</i>			
<p>6.5.1 Do the communications of engagement results include the following:</p> <ul style="list-style-type: none"> • The engagement's objectives? • The scope of the engagement? • Applicable conclusions? • Recommendations and action plans, if appropriate? 			<p>An audit report normally outlines the review's objectives, the audit approach (ie scope), a summary of the findings (to include positive outcomes), an assurance opinion (conclusion) and an action plan to document the actions required to address any weaknesses found in the service / system (where required).</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<p>6.5.2 Do internal auditors generally discuss the contents of the draft final reports with the appropriate levels of management to confirm factual accuracy, seek comments and confirm the agreed management actions?</p>			<p>An exit meeting is arranged to discuss each draft audit report prior to its issue, to ensure it is factually correct and: that actions are agreed by management, who takes responsibility for each action with target date for implementation, and whether they wish to include any further comments.</p>
CONFORMS	PARTIAL	NOT CONFORMING	
<p>6.5.3 If recommendations and an action plan have been included, are recommendations prioritised according to risk?</p> <p>If recommendations and an action plan have been included, does the communication also state agreements already reached with management, together with appropriate timescales?</p>			<p>Actions are ranked: merits attention, moderate, significant or fundamental (depending on the financial and operational risk to the service / Council). The action plan stipulates whether actions have been agreed with management (and any comments they wish to enter as relevant), who the responsible officer for implementing</p>

<p>If there are any areas of disagreement between the internal auditor and management, which cannot be resolved by discussion, are these recorded in the action plan and the residual risk highlighted?</p>	<p>each action is, and the target date for implementation. Any disagreement is noted in the action plan, and if the action is deemed fundamental or significant it is highlighted as a risk to senior management and GAC.</p>	
<p>CONFORMS</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p>6.5.4 Subject to confidentiality requirements and other limitations on reporting, do communications disclose all material facts known to them in their audit reports which, if not disclosed, could distort their reports or conceal unlawful practice? When an opinion or conclusion is issued, are the expectations of senior management, the board and other stakeholders taken into account?</p>	<p>All material findings and conclusions are recorded in reports. Each audit report contains the auditor's opinion which is ranked: high, substantial, moderate or low (depending on the number of actions required and their risk ranking).</p>	
<p>CONFORMS</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p>6.5.5 Opinions should be supported by sufficient, reliable, relevant and useful information (in line with responses to questions for PSIAS 2300). Where appropriate, do engagement communications acknowledge satisfactory performance of the activity in question?</p>	<p>See point 6.4.1 A satisfactory review resulting in 'no actions required' is issued a memo providing a 'high' assurance opinion. It also contains the scope of work to highlight any limitations to the review.</p>	
<p>CONFORMS</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p>6.5.6 When engagement results have been released to parties outside of the organisation, does the communication include limitations on the distribution and use of the results?</p>	<p>N/A – reports are not released to external parties.</p>	
<p>CONFORMS</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p>6.5.7 Where the CAE has been required to provide assurance to other partnership organisations, or arm's length bodies such as trading companies, have the risks of doing so been managed effectively, having regard to the CAE's primary responsibility to the management of the organisation for which they are engaged to provide internal audit services?</p>	<p>N/A – no such work undertaken. (Harbour a/c is part of Council's activities).</p>	
<p>CONFORMS</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>

<i>2420 Quality of Communications</i>			
6.5.8 Are internal audit communications generally accurate, objective, clear, concise, constructive, complete and timely?			Accuracy of reports are confirmed prior to issue; all findings have to be supported by evidence, and are therefore objective; reports are clear and concise as they do not contain any superfluous information; the action plan is meant to be constructive as it offers actions to improve any weaknesses discovered. It is aimed to issue reports within 10 days of the end of the audit field work. On average, this is achieved, as per PIs.
CONFORMS	PARTIAL	NOT CONFORMING	
<i>2421 Errors and Omissions</i>			
6.5.9 If a final communication has contained a significant error or omission, did the CAE communicate the corrected information to all parties who received the original communication?			If a draft audit report is amended, the updated version is issued to all recipients on the original distribution list.
CONFORMS	PARTIAL	NOT CONFORMING	
<i>2430 Use of 'Conducted in Conformance with the International Standards for the Professional Practice of Internal Auditing'</i>			
6.5.10 Do internal auditors report that engagements are 'conducted in conformance with the PSIAS' only if the results of the QAIP support such a statement?			N/A – statement is not currently used.
CONFORMS	PARTIAL	NOT CONFORMING	
<i>2431 Engagement Disclosure of Non-conformance</i>			
6.5.11 Where any non-conformance with the PSIAS has impacted on a specific engagement, do the communication of the results disclose the following: <ul style="list-style-type: none"> • The principle or rule of conduct of the Code of Ethics or Standard(s) with which full conformance was not achieved? • The reason(s) for non-conformance? • The impact of non-conformance on the engagement and the engagement results? 			N/A – no such incident recorded.
CONFORMS	PARTIAL	NOT CONFORMING	

<i>2440 Disseminating Results</i>			
6.5.12 Has the CAE determined the circulation of audit reports within the organisation, bearing in mind confidentiality and legislative requirements?			Reports are usually restricted to the manager of the service audited (who is normally responsible for instigating the required actions), as well as the appropriate CLO.
CONFORMS	PARTIAL	NOT CONFORMING	
6.5.13 Has the CAE communicated engagement results to all appropriate parties?			The distribution list is checked during the exit meeting, and entered in the report, so any omissions are usually detected.
CONFORMS	PARTIAL	NOT CONFORMING	
6.5.14 Before releasing engagement results to parties outside the organisation, did the CAE: <ul style="list-style-type: none"> • Assess the potential risk to the organisation • Consult with senior management and/or legal counsel as appropriate? • Control dissemination by restricting the use of the results? 			N/A – no reports released to external parties.
CONFORMS	PARTIAL	NOT CONFORMING	
6.5.15 Where any significant governance, risk management and control issues were identified during consulting engagements, were these communicated to senior management and the board?			Any fundamental and significant actions required are reported quarterly in the CMIA's progress report to GAC.
CONFORMS	PARTIAL	NOT CONFORMING	
<i>2450 Overall Opinion</i>			
6.5.16 Has the CAE delivered an annual internal audit opinion?			The opinion is included in the CMIA's Annual Report to GAC.
Does the annual internal audit opinion conclude on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and control?			Opinion is based on the work undertaken and assurances provided during the year, on the Council's framework of governance, risk management and control. The opinion is supported by sufficient, reliable, relevant and useful information – see point 6.4.1.
Does the annual internal audit opinion take into account the expectations of senior management, the board and other stakeholders?			The Annual Report also includes an assurance map, noting other sources of assurances which support the opinion.
Is the annual internal audit opinion supported by sufficient, reliable, relevant			

and useful information (having regard to the answers to questions on PSIAS 2300)?		
CONFORMS	PARTIAL	NOT CONFORMING
<p>6.5.17 Does the communication identify the following:</p> <ul style="list-style-type: none"> • The scope of the opinion, including the time period to which the opinion relates? • Any scope limitations? • The consideration of all related projects including the reliance on other assurance providers? • The risk or control framework or other criteria used as a basis for the overall opinion? <p>Where a qualified or unfavourable annual internal audit opinion is given, are the reasons for that opinion stated? Has the CAE delivered an annual report that can be used by the organisation to inform its governance statement?</p>	<p>The CMIA’s Annual Report concludes with the opinion. The opinion is provided for each financial year, and is based on the number and scope of reviews and follow-ups undertaken, assurances provided (to include any other providers’ assurance relied upon), and the acceptance of actions by management (especially those actions deemed fundamental and significant). The opinion informs the Council’s AGS.</p>	
CONFORMS	PARTIAL	NOT CONFORMING
<p>6.5.18 Does the annual report incorporate the following:</p> <ul style="list-style-type: none"> • The annual internal audit opinion? • A summary of the work that supports the opinion? • A disclosure of any qualifications to the opinion? • The reasons for any qualifications to the opinion? • A disclosure of any impairments or restrictions in scope? • A comparison or work actually carried out with the work planned? • A statement on conformance with the PSIAS? • The results of the QAIP? • Progress against any improvement plans resulting from the QAIP? • A summary of the performance of the internal audit activity against its performance measures and targets? 	<p>The annual IA opinion is included in the CMIA’s Annual Report to GAC. A summary of the work undertaken during the year which supports the annual opinion is included in the quarterly progress reports and Annual Report to GAC. No qualification was provided during 2020/21. Any impairments or restrictions re scope are brought to the GAC’s attention eg resource limitations. A comparison or work actually carried out against the original plan is included. The results of the self-assessment against PSIAS is included with resulting improvement plan. The percentage of the audit plan completed is included along with other PIs, as used by CIPFA’s audit</p>	

<ul style="list-style-type: none"> Any other issues that the CAE judges is relevant to the preparation of the governance statement? 			benchmarking group, and other quality measures making-up the QAIP. Progress against the year's s/a improvement plan is noted quarterly & annually. Any other issues the CMIA deems relevant is noted.
CONFORMS	PARTIAL	NOT CONFORMING	
6.6 2500 Monitoring Progress			
The questions in this section seek to confirm that a system is in place to monitor effectiveness of audit communications results to management, including appropriate follow up when no action is taken by management. Has the CAE established a process to monitor and follow up management actions to ensure that agreed actions have been effectively implemented or that senior management have accepted the risk of not taking action?			
6.6.1 Where issues have arisen during the follow-up process (for example, where agreed actions have not been implemented), has the CAE considered revising the internal audit opinion? Do the results of monitoring management actions inform the risk-based planning of future audit work?			The Section has a follow-up process and where possible, follow-up audits are undertaken once all target dates have been reached (otherwise, during the following financial year). This will be easier to monitor on Pentana (MKI). The IA opinion is re-assessed in accordance with the results of follow-up audits. These results inform future risk-based audit plans. However, due to the pandemic, it hasn't been possible to conduct follow-ups. These will be carried forward to 2022/23.
CONFORMS	PARTIAL	NOT CONFORMING	
6.6.2 Does the internal audit activity monitor the results of consulting engagements as agreed with the client?			If IA is consulted upon eg the implementation of a new system, it is usually agreed with clients that an audit is later planned once the system is up and running.
CONFORMS	PARTIAL	NOT CONFORMING	

6.7 2600 Communicating the Acceptance of Risks

<p>This section considers the arrangements which apply if the CAE has concluded that management has accepted a level of risk that may be unacceptable to the organisation. Situations of this kind are expected to be rare. PSIAS 2600 sets out communication requirements for the CAE. It is not the responsibility of the CAE to resolve the risk.</p>		
<p>6.7.1 If the CAE has concluded that management has accepted a level of risk that may be unacceptable to the organisation, has he or she discussed the matter with senior management? If, after discussion with senior management, the CAE continues to conclude that the level of risk may be unacceptable to the organisation, has he or she communicated the situation to the board?</p>	<p>Any disagreement re the acceptance of risk between and auditor and management is noted in the report action plan; and if the recommended action is deemed fundamental or significant it is highlighted to senior management and GAC.</p>	
<p>CONFORMS</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>

Resulting Conformance with Standards:

Conformance with the Standards	Conformance 2021/22			Total
	Y	P	N	
1. Mission of Internal Audit	1			1
2. Definition of Internal Audit	2			2
3. Core Principles	10			10
4. Code of Ethics	5			5
5. Attribute Standards				
1000 Purpose, Authority and Responsibility	4			4
1100 Independence & Objectivity	21			21
1200 Proficiency and Due Professional Care	9	1		10
1300 Quality Assurance and Improvement	14	1		15
6. Performance Standards				
2000 Managing the Internal Audit Activity	14	3		17
2100 Nature of Work	10			10
2200 Engagement Planning	12			12
2300 Performing the Engagement	7			7
2400 Communicating Results	18			18
2500 Monitoring Progress	1	1		2
2600 Communicating the Acceptance of Risks	1			1
Total	229 97%	6 3%	0 -	235 100%

Resulting Improvement Plan (2022/23):

Ref	Conformance with Standard	Action Required	Target Date
Std 1210	<p>5.3.1 Does the CAE hold a professional qualification, such as CMIIA/CCAB or equivalent? The CMIA in post up to 31/12/21 held the Chartered Institute of Public Finance and Accountancy's qualification, CIPFA, which is a CCAB body. The CMIA in post from 1/1/22 is currently studying for the IIA's Certificate in Internal Audit.</p>	CMIA to achieve CMIIA professional qualification.	Within 3 years of appointment
Std 1311	<p>5.4.5 Does ongoing performance monitoring include obtaining stakeholder feedback? No QCQs issued during pandemic. QCQs to be issued in Q2 for work undertaken in Q1. QCQ template also being setup on Pentana.</p>	QCQs to be issued to auditees. Upcoming audits will have QCQ's issued to auditees via Pentana.	During 2022/23
2010	<p>6.1.1 Has the CAE determined the priorities of the internal audit activity in a risk-based plan and are these priorities consistent with the organisation's goals? The IA Strategy & Plan does not set out the priorities of IA activity nor how they align to the organisation's goals.</p>	Produce risk-based audit plan in accordance with services' road plans which clearly sets out the priorities of audits consistent to the Council's priorities.	During 2022/23
2050	<p>6.1.15 Using other sources of assurance. Assurance mapping system in place and is discussed at weekly team meetings, currently being reviewed and developed in using the IIA's 'Three Lines Model' – this</p>	Assurance mapping system to be updated and monitored at weekly Team meetings.	Throughout 2022/23

	will be input onto Pentana for monitoring and updating.		
2500	6.6.1 Where issues have arisen during the follow-up process has the CAE considered revising the internal audit opinion? Due to the pandemic, no follow-ups were conducted in 2021/22. Follow-ups for ongoing audits will be monitored on Pentana.	The follow-up audits due will be carried forward to 2022/23. Recommendation tracking for future audits will be monitored in Pentana.	31 March 23
AJ	Pentana (MKI) system not found as useful when working reactively. Pentana (MKI) will be implemented fully for planned audits, but some reactive work will continue to be conducted & recorded using shared electronic folders.	The system has been evaluated and IA team have undertaken training on the system. IA plan to be input for Q3&Q4.	Throughout 2022/23

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Cyngor Sir CEREDIGION County Council

REPORT TO:	Governance and Audit Committee
DATE:	27 September 2022
LOCATION:	Remotely via Video-conference
TITLE:	Report on progress of Annual Governance Statement 2021-22 and Annual Governance Statement 2022-23
PURPOSE OF REPORT:	To present an update on the progress of the Annual Governance Statement 2021-2022, as well as an update regarding progress with the 2022-2023 Annual Governance Statement.
For:	Information

Background

The Governance and Audit Committee considered a Report on the Draft Annual Governance Statement 2021-2022 and Governance Framework Document and current year action plan at its meeting on 6th June 2022.

(see Report to the Governance and Audit Committee at

<https://council.ceredigion.gov.uk/documents/s3103/Item%2013%20Draft%20AGS%20s.pdf?LLL=0> and Meeting Minutes at <https://council.ceredigion.gov.uk/ieListDocuments.aspx?CId=147&MId=351&Ver=4&LLL=0>).

At this meeting the committee agreed to recommend that Council endorses the Draft Annual Governance Statement 2021-22.

At its 8th July 2022 Meeting Council resolved to:

- Note the contents of the updated 2021-2022 Governance Framework Document; and
- Approve the Draft Annual Governance Statement 2021-2022.

(see Report to Council at <https://council.ceredigion.gov.uk/documents/s3417/Report%20-%20Draft%20Annual%20Governance%20Statement.pdf?LLL=0> and Draft Meeting Minutes at: <https://council.ceredigion.gov.uk/ieListDocuments.aspx?CId=149&MId=274&Ver=4&LLL=0>)

Current Position

The approved Draft Annual Governance Statement 2021-2022 is now being considered by Audit Wales prior to being presented again as a final version to the Governance and Audit Committee on the 17th November 2022 and Council on the 24th November 2022 alongside the Annual Statement of Accounts.

Governance Framework 2022-23 & Current Year Action Plan

A workshop will be held on 28 November 2022 for relevant Officers and committee Members to consider progress on the actions set out in the 2021-2022 Annual Governance Statement. During this workshop, the Governance Framework Document will be updated to reflect progress which has been made towards completing these actions. This updated document will then be presented to this committee at its meeting in January.

This workshop will also provide an opportunity to consider any new actions which need to be added to the Governance Framework Document, which will then be considered in the 2022-23 Annual Governance Statement.

Local Code of Corporate Governance

The Local Code of Corporate Governance 2022-23 was approved by council on 3rd March 2022. Some preliminary work has taken place in reviewing this code to ensure that it effectively sets out how the Council's governance arrangements work towards meeting the seven principles of good governance, as set out in the CIPFA/SOLACE Delivering Good Governance in Local Government Framework (2016 Edition).

RECOMMENDATION(S):

The Governance and Audit Committee is requested to:

i) Note the contents of this report

REASON FOR RECOMMENDATIONS: To keep the committee informed as to the progress of the Annual Governance Statement 2021-22 and the next steps for the Governance Framework Document, Annual Governance Statement 2022-23 and Local Code of Corporate Governance.

Appendices: None – Status update only

Head of Service: Elin Prysor, Corporate Lead Officer – Legal & Governance Services / Monitoring Officer

Reporting Officer: Harry Dimmack, Governance Officer

Date: 30/8/2022

Cyngor Sir CEREDIGION County Council

REPORT TO:	Governance and Audit Committee
DATE:	27 September 2022
LOCATION:	Remotely via Video Conference
TITLE:	Annual Report of Compliments, Complaints and Freedom of Information (2021-2022)
PURPOSE OF REPORT:	To provide the Governance and Audit Committee with a comprehensive overview of the Compliments, Complaints and Freedom of Information (FOI) activity (including Environmental Information Regulations - EIR) received by the Authority during 2021 - 2022. This report also provides information about complaints referred to the Public Services Ombudsman for Wales during the reporting period. A copy of the Ombudsman's Annual Letter, dated 9th August 2022, is included as an appendix.
For:	Decision
CABINET PORTFOLIO AND CABINET MEMBER:	Councillor Bryan Davies, Leader

Introduction

This report provides information relating to the work of the Council's Complaints and FOI Service between 1st April 2021 and 31st March 2022. The report itself (accompanying this cover report) is contained within **Appendix 1**, which includes specific information on the number and type of compliments received, the different complaints stages, performance and outcomes relating to these and information on compliance with FOI and EIR legislation. There is also a section regarding the contact received by the Public Services Ombudsman for Wales ("the Ombudsman") during the reporting period. The Ombudsman's Annual Letter to the Council is included as **Appendix 2**, which provides further details in relation to all Ombudsman activity for Ceredigion, as well as for other Council's across Wales.

This is the third consecutive report where there have been no Ombudsman investigations commenced or formal reports issued in relation to complaints made against the Council. However, it is acknowledged that there has been a significant rise in complaints referred to the Ombudsman, as well as cases that were closed following the Ombudsman's intervention (i.e. 'Early Resolution' agreements)

This report reflects several challenges experienced during the reporting period i.e.. the complexity of complaints received, a general increase in activity following the pandemic in complaints, FOI, Ombudsman referrals and referrals to the Information Commissioner's Office (ICO), as well as the challenges associated with the delivery of the Complaints and FOI Service itself. These challenges have inevitably had an impact on the Council's ability to

meet its performance objectives in relation to prescribed timescales, which has subsequently resulted in a greater level of contact from the Ombudsman and the ICO.

Brief overview of all activity managed by the Complaints and FOI Service during 2021 - 2022:

- ↓ 224 Compliments were received
- ↓ 357 Enquiries were processed by the Complaints & FOI Service
- ↑ 133 Complaints were received: **Stage 1 = 73 Stage 2 = 60**
- ↑ 52 'Contacts' received via the Public Services Ombudsman for Wales
- ↑ 780 FOI & EIR requests processed by the Complaints & FOI Service

Summary

- There were significantly fewer Compliments received during this reporting period (down by 72%). This reduction can be mitigated, in part, by the vast influx of compliments received in 2019-2020 (a 50% increase on the year before). Several factors may have affected the Council's ability to capture compliments including the lack of resource to prioritise this activity. Further, work will be undertaken by the Complaints and FOI Service to streamline the way compliments are processed, so good practice can be capitalised upon, and accurate figures recorded.
- Fewer Enquiries were managed by the Complaints and FOI Service but there was a 29% rise in complaints. This suggests that it was not possible to pro-actively resolve concerns without needing to engage in formal complaints procedures. In addition, unplanned absences and vacancies within the Complaints and FOI Service will have contributed to the inability to manage cases as effectively as in previous years.
- Stage 1 complaints rose by 16% and the Council saw an increase of 30% in complaints that were investigated at Stage 2 (formal stage). Compliance with prescribed timescales was also lower than expected, though it is acknowledged that Stage 2 complaints often require additional time to investigate thoroughly. This is entirely acceptable providing complainants are regularly updated on any developments.
- As acknowledged above, the Ombudsman received 63% more complaints about Ceredigion County Council than in previous years, and 13 of these were resolved by way of Early Resolution agreements. However, **the Ombudsman did not refer any complaints for formal investigation** and as such, no formal reports were issued by them.
- Two complaints were received in relation to the Council's compliance with the Welsh Language Measures, both of which were resolved at the informal stage.
- Refuse Collection and Household Waste Sites continues to be the main reason for complaints received at Stage 1; closely followed by Planning (including Planning Enforcement) and Council Tax and Housing Benefit. These three services account for 40% of all Stage 1 complaints received, but as previously reported, these services are predisposed to attracting complaints.
- 49% of all complaints were upheld; 32% of cases were not upheld and the remainder were either ongoing or had been discontinued by the complainant. It is acknowledged

that further work is needed to improve on learning the lessons arising from complaints, this will be taken forward by the Complaints and FOI Service.

- Compliance with Freedom of Information (FOI) and Environmental Information Regulations (EIR) timescales were at the lowest level reported, at 67% and it is acknowledged that vast improvements are required in this regard. A rise in referrals to the ICO was also evident, up from 4 cases to 9, during 2021-2022. It is most likely that the poor performance with meeting the statutory timescales was the main contributing factor, but the increase equates to only 1% of all requests received.

Areas to focus on

- Improving corporate adherence with timescales prescribed in complaints and FOI/EIR policies/legislation
- Improving system for capturing compliments and data surrounding lessons learned
- Continuing with open, transparent, and citizen-centred approach to resolving concerns

Recommendation(s): Review assess and endorse the contents of the Annual Report of Compliments, Complaints and Freedom of Information Activity – 2021/2022 and note the Ombudsman’s Annual Letter for 2021-2022.

Reason(s) for Recommendation(s): To inform the Governance and Audit Committee of the work being undertaken by the Complaints and FOI Service

Appendices:

Appendix 1
Annual Report for Compliments, Complaints and Freedom of Information Activity – 2021/2022

Appendix 2
Public Services Ombudsman for Wales’ Annual Letter: 2021 – 2022.

Corporate Lead Officer: Alun Williams, Corporate Lead Officer for Policy, Performance & Public Protection

Reporting Officer: Marie-Neige Hadfield, Complaints & FOI Manager

Date: 31st August 2022

Cyngor Sir CEREDIGION County Council

Annual Compliments, Complaints and Freedom of Information Report
1st April 2021 – 31st March 2022

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8 Complaints Data (inc. Ombudsman 'Early Resolution' reports – pages 19 – 23)	17 – 23

1. INTRODUCTION

- 1.1 This report will provide information relating to the numbers of compliments, complaints and requests made under the Freedom of Information (FOI) Act 2000 that were received by the Council during the period 1st April 2021 to 31st March 2022. **This section** will provide an overview of how compliments, complaints and FOI requests are managed within the Council. **Section 2** provides information about the Compliments received and **Section 3** shows some trends, themes and performance regarding the numbers, timescales and outcomes of Complaints received during the reporting period. **Section 4** gives details of the Lessons Learned. **Section 5** relates to all cases involving the Public Services Ombudsman for Wales (*“the Ombudsman”*) and **Section 6** looks at FOI activity and any cases referred to the Information Commissioner’s Office (*“ICO”*). **Section 7** provides a Summary and Conclusions of the data provided in the report and a breakdown of the complaints data is given in **Section 8**. Due to the significant increase in Ombudsman activity, particularly cases that were resolved as a consequence of Ombudsman involvement, all cases resulting in ‘Early Resolution’ are also included in Section 8 – including the Summary Reports issued by the Ombudsman in relation to these complaints.
- 1.2 The recording systems in place for compliments, complaints and FOI requests have been updated to reflect the organisational structure, which has simplified the reporting process.
- 1.3 The Complaints and FOI Service is a small team (3.8 staff members) who follow three different complaints policies and two branches of information access legislation:
 - Model Concerns and Complaints Policy (corporate)
 - Social Services Complaints Procedure (Wales) Regulations 2014
 - Complaints procedures for school governing bodies in Wales (Circular 011/2012)
 - Freedom of Information Act 2000 (FOIA)
 - Environmental Information Regulations 2004 (EIR)
- 1.4 Whilst school governing bodies are responsible for their own complaints and FOI activity, the Complaints and FOI Team provides advice and assistance when required and will occasionally assist in more complex cases, where procedures allow.
- 1.5 As a consequence of recent changes in legislation the Concerns and Complaints Policy (corporate) was reviewed and ratified by the Council committee of elected members on 23rd September 2021.
- 1.6 Following the formation of the Complaints Standards Authority (CSA) under the Public Services Ombudsman (Wales) 2019 Act, all public authorities across Wales were required to report their complaints activity to the Ombudsman’s office on a quarterly basis. This information is available on the Ombudsman’s [Complaints Standards Authority webpage](#)
- 1.7 The Council continues to work positively with the Ombudsman and a section of this report provides an analysis of all Ombudsman activity, including the outcomes of Early Resolutions (at the end of this report). This includes the outcomes reached by the Ombudsman’s office following their assessment of all complaints made to them in relation to Ceredigion County Council. It must be noted that this is the third consecutive reporting period whereby there have been no formal investigations launched by the Ombudsman’s office into complaints made against the Council.

- 1.8 Pro-active resolution of all complaints remains a high priority within the Council and every effort is made to achieve satisfactory outcomes for the citizens and service-users that bring their concerns to our attention. Due to the continued efforts and positive collaboration between staff and managers across the Council and the Complaints and FOI Team, it is far more effective to resolve concerns at 'enquiry' stage, without needing to initiate the formal complaints procedure. As a consequence, a total of **357** enquiries were received during this reporting period.
- 1.9 Complaints being considered under Stages 1 and 2 of the respective complaints policies continue to be managed in accordance with the underpinning ethos for corporate complaints: *'Investigate once, investigate well'*. It is recognised, particularly in respect of Stage 2 complaints, that complex cases may take longer than outlined in the policy (i.e. 20 working days); however, in such circumstances, the complainant is usually notified of any delays and kept updated as to the status of their complaint. Information concerning the Council's performance with regard to compliance with timescales is provided within this report, but the priority remains to ensure a robust and meaningful investigation is undertaken – even if this takes longer than the prescribed timescales. It is accepted that challenges associated with service provision have resulted in the Complaints and FOI Service being unable to maintain effective communication with complainants in some instances.
- 1.10 The Corporate Lead Officer (CLO) for Policy, Performance & Public Protection is responsible for all complaints and FOI activity within the Council and will escalate matters of concern to the relevant member(s) of the Leadership Group. In addition, the CLO is the Council's nominated Senior Officer for the offices of the Ombudsman and the Information Commissioner in relation to complaints and FOI activity, respectively.
- 1.11 The Council's Complaints and FOI Service is responsible for the design and delivery of all complaints training as well as the monitoring of all complaints and FOI activity. This includes liaising with the Ombudsman's office and the Information Commissioner's Office ("ICO") when cases are referred to them by service-users. Unfortunately, due to the challenges associated with the pandemic, no in-house complaints training was delivered during this reporting period. However, the Ombudsman's Complaints Standards Authority delivered Complaints Investigation Training to the majority of Corporate Managers in February 2021.
- 1.12 As expected, the coronavirus pandemic continued to have an impact on service provision across the Council, with many services undertaking additional duties compared with pre-pandemic times. As reported previously, as a consequence, the Council's priorities and resilience has been tested but despite this, officers remained committed to ensuring service improvement as a direct consequence of complaints.

2. COMPLIMENTS RECEIVED

2.1 Compliments

All compliments received from service-users are recorded and monitored on a regular basis and should be viewed as an opportunity to share good practice wherever possible. Compliments should be responded to individually and shared with the people directly involved.

2.2 An opportunity also exists to share compliments far wider within the Council when positive working practices are identified that could be adopted in other areas.

2.3 The table below shows the number of compliments that were recorded by each Service during 2021/22.

Service	2021/22
Policy, Performance & Public Protection	5
Schools	4
Economy & Regeneration	14
Finance & Procurement	5
Highways & Environmental Services	25
Customer Contact	29
Porth Cynnal	27
Corporate	6
Porth Gofal	77
Porth Cymorth Cynnar	29
Democratic Services	2
Legal & Governance	1
Total	224

2.4 Examples of compliments received

“I can honestly say that the work carried out is a massive improvement on what it was like before the work was undertaken. This is a fantastic outcome, and I would like to say a big “Thank you”.” – Economy & Regeneration

“Thank you to the traffic wardens who keep the traffic clear and the refuse gang who keep our bins emptied.” – Highways & Environmental Services

“The staff were so friendly and professional made our day very special. Thank you so much!” – Customer Contact

"I just wanted to say a huge and heartfelt thank you to you personally for taking care of [service user]. I wasn't able to visit much but it was very reassuring to know that they were in the best possible place thanks to you and your colleagues." – Porth Gofal

"I wanted to share with you how grateful for all the help this last year. Felt very supported. Thanks again." – Schools Service

"You are brilliant in the way you are supporting Service User." – Porth Cynnal

"Thank you for your kindness and patience." – Finance & Procurement

"Please convey my thanks to all the people involved in resolving my concerns." – Policy, Performance & Public

"With thanks for your generous work throughout the year." – Porth Cymorth Cynnar

"I'd like to extend thanks to you and the members of staff in Ceredigion." – Corporate

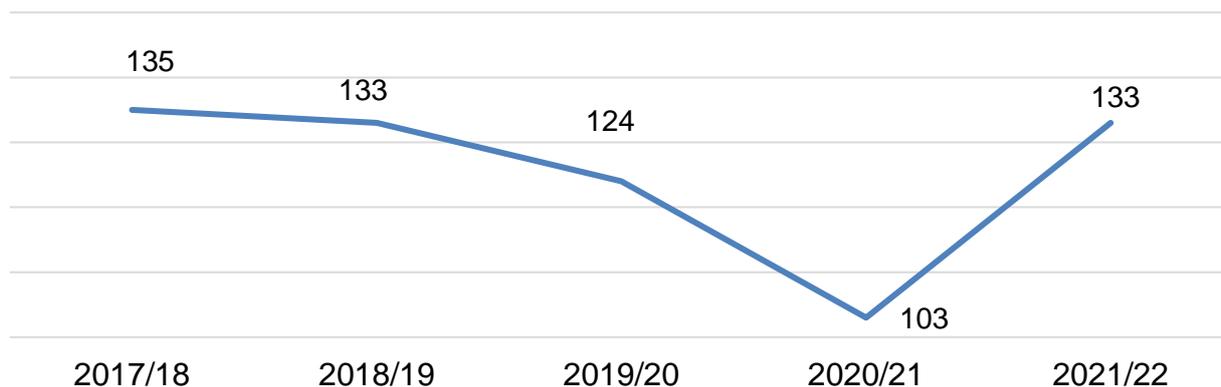
- 2.5 Compliments received from care homes and day centres are included within the current reporting system, which is well established across the Council's Social Services.
- 2.6 The process for collecting, recording and monitoring compliments was due to be reviewed during this reporting period; however, as a consequence of the pressures within the small Complaints and FOI Service, this work will be undertaken in the forthcoming year (2022-2023). The benefit of such work would ensure that Council officers are aware of the clear and defined processes in place for dealing with compliments and championing good practice across the organisation.

3. COMPLAINTS RECEIVED

3.1 Total number of complaints received

The chart below shows the total number of complaints received during 2021/22 that were processed in accordance with the two-stage complaints policies. Comparisons are given in respect of previous years. This does not include the number of enquiries or service requests that were received by the Complaints and FOI Service, which were directed to the relevant service(s).

Total Number of Complaints Received



3.2 Number of complaints made by stage

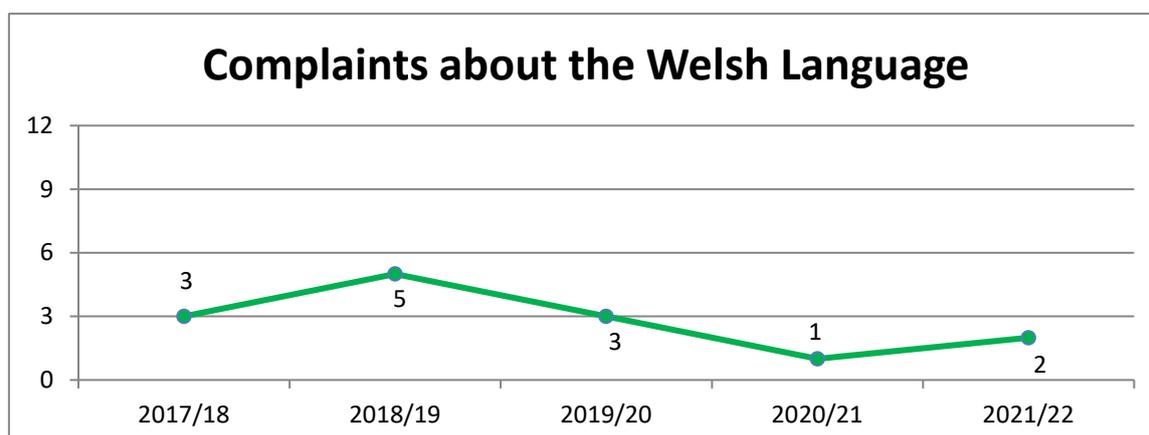
The number of complaints made against the Council under each stage of the Complaints Policy for the last five years is shown in the table below. These figures include complaints made in relation to Welsh Language provision.

Year	Stage 1	Stage 2	Total
2017/18	96	39	135
2018/19	92	40	133
2019/20	85	39	124
2020/21	61	42	103
2021/22	73	60	133

3.3 Welsh Language Complaints

During 2020/21 the Council received two complaints specifically relating to the provision (or lack thereof) of Welsh Language services across the Council. One complaint was referred to the Council by the Welsh Language Commissioner.

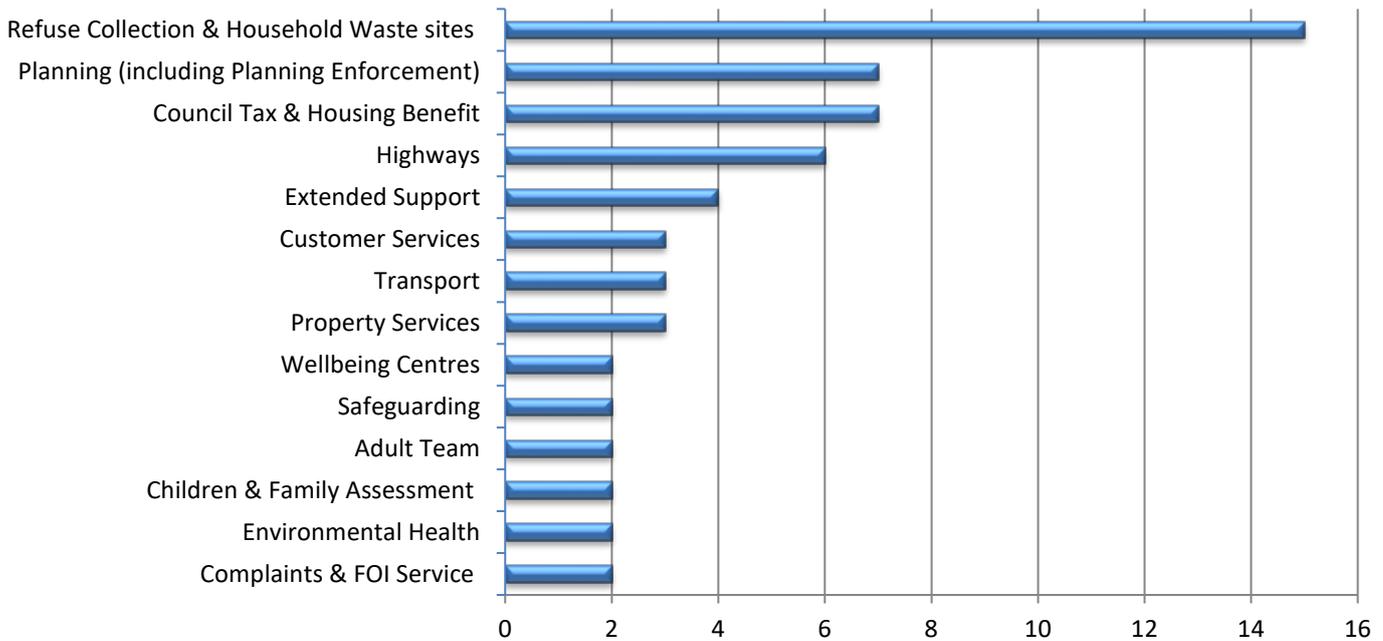
3.4 The number of complaints received during the reporting period is shown below, along with comparison data for previous years. The Council has fully implemented its requirements under the Welsh Language Standards.



3.5 Top Ten Sections with highest number of complaints in 2021/22

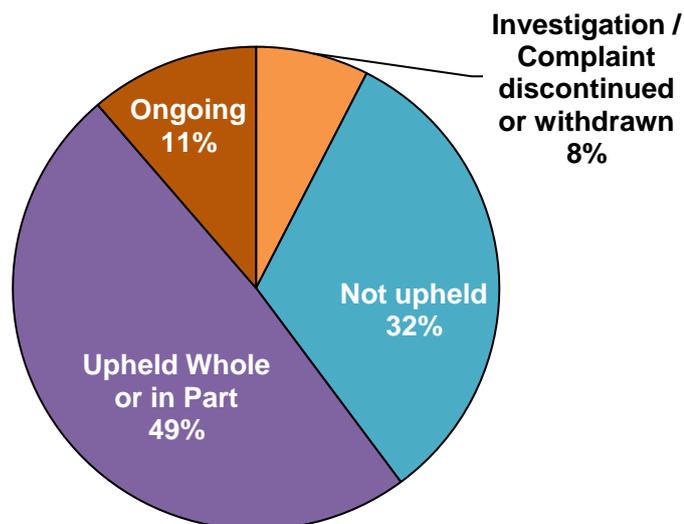
The chart below shows the top ten sections of the Council that receive the highest number of complaints at Stage 1. In accordance with Welsh Government guidance, ascertaining the subject areas complained about the most enables identification of trends – both internally and for national comparison.

Top 10 Stage 1 Complaints by Section



3.6 Complaint Outcomes

See below the outcomes recorded against all complaints for the reporting period.

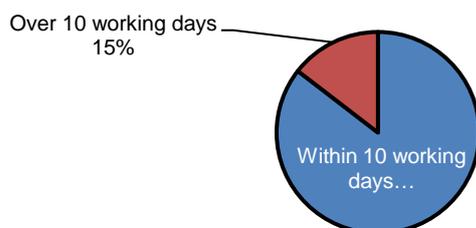


3.7 Timescales

The Council is required to respond to all complaints in a timely manner and in any event, within the timescales stipulated by policy. The charts below demonstrate the Council's performance with regard to meeting **Stage 1 (10 working days)** and **Stage 2 timescales (20 working days)** under the corporate policy. It is important to note that there is a degree of flexibility afforded under Stage 2, particularly in the interests of ensuring thorough and robust investigations are undertaken, which often take longer to complete.

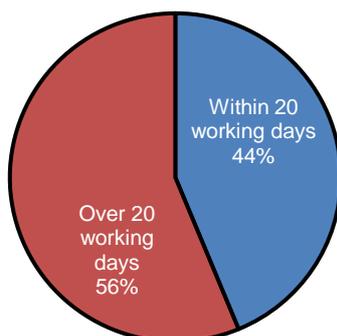
3.8 Stage 1 – A total of **73** Stage 1 complaints were received during the reporting period. Under the corporate policy, Stage 1 complaints should be completed within **10 working days**, and under the Social Services complaints procedures complaints should be completed within **15 working days** which includes the offer of a meeting / discussion with the relevant service manager. A total of **53** of the **62** corporate complaints at this stage were addressed within the prescribed timescales. As per the Concerns and Complaints policy, Stage 1 complaints were immediately escalated to Stage 2 if the ten-working-day timescale was exceeded.

Stage 1 Performance with Stage 1 Timescales (corporate policy)



3.9 Stage 2 – A total of **60** complaints were received at Stage 2. Of these, **12** were managed under the statutory Social Services Policy, which allows 25 working days from the 'Start Date' as opposed to **20 working days** under the corporate Concerns and Complaints procedure. Performance in respect of the corporate policy is provided below. With regard to the 12 Social Services complaints, **three** remained open beyond the end of the reporting period (i.e. these cases were closed after 31st March 2022) and all but one of the remaining **9** took longer than the allotted time to conclude, which is permitted, providing the Statutory Director of Social Services provides written approval for an extension to be given.

Performance with Stage 2 Timescales (corporate policy)



4. LEARNING LESSONS FROM COMPLAINTS

4.1 The table below consists of a sample of some of the lessons learned from complaints during 2021/22.

Service Area	Issue	Lessons Learned
Highways & Environmental Services	Complaint regarding accessibility at Household Waste Sites.	Household Waste Sites implemented accessible 'drop off' areas for those who are unable to access the skips directly.
Porth Cynnal	Concerns raised regarding Children Services	All Social Workers working with children and families were reminded of their responsibility to share the outcomes of a Section 47 enquiry with parents, in line with the National Safeguarding Procedures for Wales.
Public Protection	Lack of response from the Service regarding a food safety issue	Further training provided to staff regarding the use of the information system.
Complaints and FOI Service	Failure to maintain communication with complainants	Ensure service users receive regular updates if there is a problem resolving their complaint within prescribed timescales.

5. COMPLAINTS MADE TO THE PUBLIC SERVICES OMBUDSMAN FOR WALES

- 5.1 The Ombudsman's Annual Letter for 2021/22 was received on 9th August 2022 and is included as an appendix to this report.
- 5.2 The Ombudsman's expectation is that complainants will exhaust the Council's own complaints procedures before contacting their office for independent consideration of their complaint. However, in exceptional circumstances the Ombudsman does have discretion to undertake a direct investigation. Usually, complaints which have not yet been considered by the Council will be recorded by the Ombudsman's office as '**Premature**' contacts and these will be referred back to the Council to investigate under its own complaints procedures.
- 5.3 As a matter of course, all formal responses issued at Stage 2 of the Council's complaints procedures (corporate and Social Services policies) include advice that complainants can refer their case to the Ombudsman if they remain dissatisfied with the Council's findings, or the handling of their complaint.
- 5.4 The Council has limited control over service-users contacting the Ombudsman directly, though this would normally be addressed during staff training (i.e. advising people about how they can complain if they are unhappy with the service provided).

5.5 It is useful to note that the Ombudsman provides data according to the number of ‘contacts’ received by service-users as well as the number of ‘cases closed’ during the reporting period. This method will account for any discrepancies in the number of cases being reported on (particularly if some straddle multiple reporting periods).

5.6 Number of complaints made to the Ombudsman in 2021/22 by primary subject (as categorised by the Ombudsman)

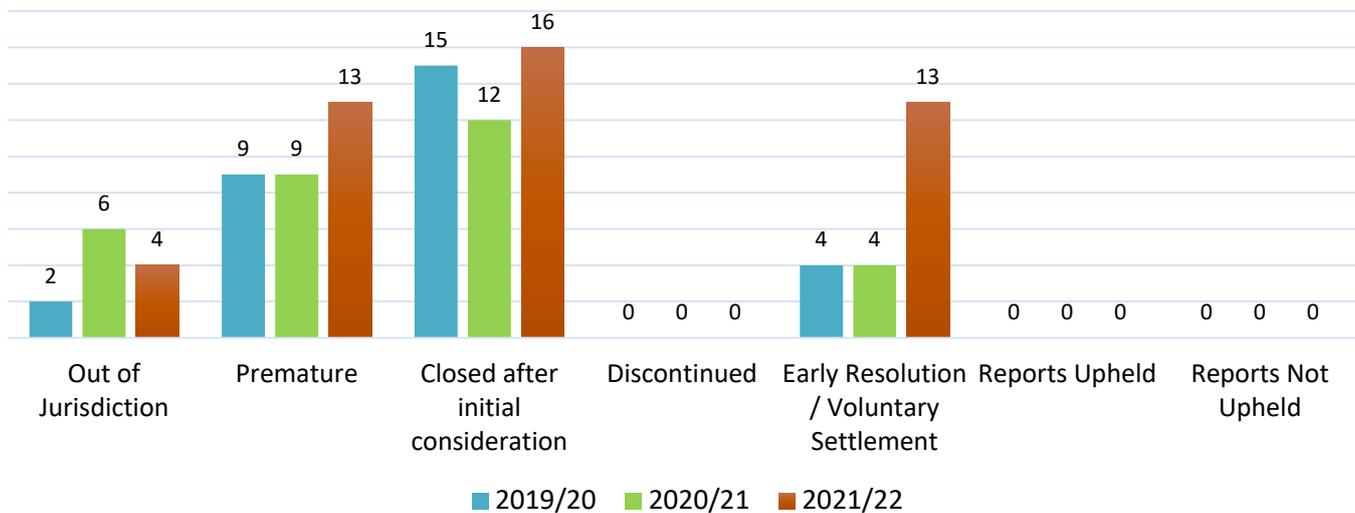
The chart below shows the number of complaints made by members of the public to the Ombudsman, which is demonstrated in the Ombudsman’s Annual Letter.

Subject	No. of Ombudsman complaints 2019/20	No. of Ombudsman complaints 2020/21	No. of Ombudsman complaints 2021/22
Complaints Handling	4	5	14
Planning & building control	6	8	10
Adult Social Services	4	5	6
Environment & Environmental Health	4	1	5
Roads & transport	1	2	5
Children's Social Services	5	3	3
COVID-19	-	3	3
Education	1	0	2
Finance and Taxation	2	2	2
Communities, facilities, recreation and leisure	1	0	1
Multi-Service Complaints	0	0	1
Benefits Administration	1	1	0
Licencing	2	0	0
Housing	0	2	0
TOTAL	31	32	52

5.7 The Ombudsman received **52** complaints about the Council during the course of 2021-2022, which is 20 more cases than the previous year. Despite this, the Ombudsman has not commenced an investigation into any of these cases. However, **13** Early Resolution agreements were reached, in order for the Council to be able to resolve the complaint to the Ombudsman’s satisfaction. More information on these complaints can be found at the end of this report (pages 19 – 23) including the official summary reports compiled by the Ombudsman.

5.8 This chart provides comparison data for the outcomes of all cases closed by the Ombudsman during the period covered in this report and the two previous years:

PSOW Complaint Outcomes



5.9 Ombudsman Cases resulting in Early Resolution

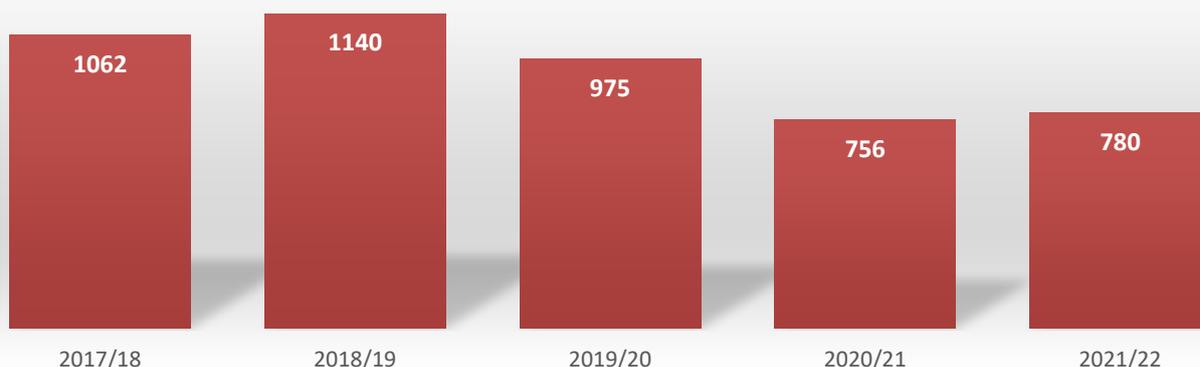
As referred to above, whilst there were no formal investigations undertaken by the Ombudsman for a **third** consecutive term, the number of complaints requiring additional action following consideration by the Ombudsman rose significantly to **thirteen** (compared with only **four** in 2020-2021). In these instances, the Ombudsman provides the Council with an opportunity to review its management of the case and agree to a course of action that should resolve the complaint.

5.10 The exponential rise in Early Resolution cases is as a consequence in the general increase in complaints received during the reporting period and the significant challenges faced by Council services during this time. In addition, the Complaints and FOI Service, which sits within the Policy, Performance & Public Protection Service, has faced several challenges during this reporting period as a result of unplanned absences, as well as vacancies within the Service. This was a significant contributory factor to the shortcomings in complaints handling referred to in the Ombudsman’s letter.

6. FREEDOM OF INFORMATION ACTIVITY

- 6.1 The Council's compliance with the Freedom of Information Act 2000 (FOI) and Environmental Information Regulations 2004 (EIR) falls within the remit of the Policy, Performance and Public Protection Service. As with compliments and complaints activity, the FOI (and EIR) service was also centralised and makes up the Council's Complaints & FOI Service.
- 6.2 The Corporate Lead Officer for Policy, Performance & Public Protection is responsible for undertaking all Internal Reviews, which is essentially the complaints mechanism for FOI and EIR activity. Following the Internal Review stage, applicants have the right to refer their request to the Information Commissioner's Office (ICO) for further consideration.
- 6.3 Information requests received under FOI and EIR may be refused for various reasons providing there are lawful exemptions or exceptions (respectively) preventing disclosure. In such situations, the Council issues a Refusal Notice which provides clear information to explain the decision not to disclose the information being requested. It must be noted here that FOI and EIR relate to **recorded** information held by the Council and as such, there is no right to receive answers to questions which would require the creation of new information or records.
- 6.4 During this reporting period the Council received a total of **780** requests for information under the Freedom of Information Act 2000 (FOIA) or Environmental Information Regulations 2004 (EIR). Of these, **eight** cases were escalated to the Corporate Lead Officer (CLO) for Policy, Performance & Public Protection requiring Internal Review. Four of the cases related to complaints that a response had not been provided within the 20-working-day timescale. With these cases, the information requested was provided as part of the Internal Review response. The exemption applied was maintained in two of the cases, and the remaining two cases remained open at the end of the reporting period.
- 6.5 The number of FOI and EIR requests (combined) that were received during 2020/2021 is demonstrated below along with comparison data for earlier reporting terms.

FOI & EIR Activity



6.6 The chart below shows the number of requests received by each service and what percentage this equates to in respect of the total number of requests received by the Council.

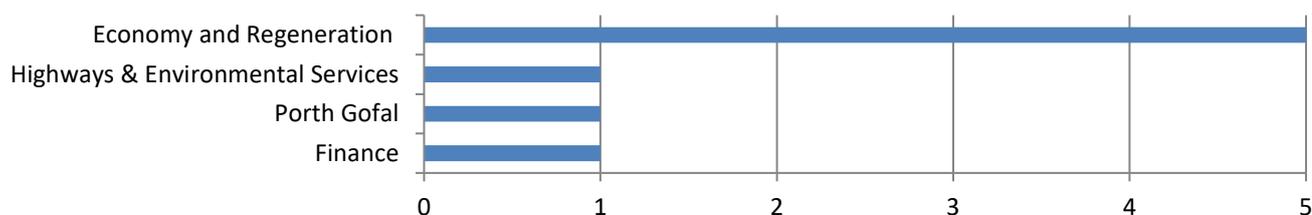
FOI & EIR Activity by Service

Service	FOI		EIR	
	Number of Requests Received	% of Total Requests Received	Number of Requests Received	% of Total Requests Received
Schools	57	7%	-	-
Finance & Procurement	132	17%	-	-
Democratic Services	13	2%	-	-
People & Organisation	40	5%	-	-
Porth Cymorth Cynnar	8	1%	-	-
Porth Cynnal	70	9%	-	-
Porth Gofal	79	10%	-	-
Policy, Performance & Public Protection	99	13%	4	20%
Highways & Environmental Services	117	15%	6	30%
Economy & Regeneration	70	9%	10	50%
Customer Contact	55	7%	-	-
Legal & Governance Services	6	>1%	-	-
Multiple Services	14	2%	-	-

6.7 The Council has a statutory responsibility to respond to all FOI's within 20 working days. The Council's overall compliance with this timescale for 2020/21 was **67%**.

6.8 A total of **eight** Internal Reviews were requested in 2021/22, all of which are shown below grouped according to service. This is an increase on the 7 received during 2020-2021.

Requests for Internal Review by Service



6.9 A total of 9 referrals were made to the Information Commissioner's Office (ICO) during the reporting period, the majority of which related to the Council's delay in providing information within the statutory timescale.

7. SUMMARY & CONCLUSIONS

- 7.1 This report demonstrates that the Council continues to face significant challenges since the emergence of the coronavirus pandemic, which stem from a variety of factors. Service continuity, the introduction of additional functions since the pandemic and the general pressures associated with the way services needed to be delivered during this period have all had an impact. It is evident that there has been a rise in complaints and FOI activity, including referrals to the Information Commissioner's Office; however, of most significance is the substantial increase in complaints received via the Ombudsman. This section will provide some analysis in respect of the data referred to within this report.
- 7.2 In summary, the main headlines of this report are as follows:
- ↓ **224** Compliments were received
 - ↓ **357** Enquiries were processed by the Complaints & FOI Service
 - ↑ **133** Complaints were received: **Stage 1 = 73** **Stage 2 = 60**
 - ↑ **52** 'Contacts' received via the Public Services Ombudsman for Wales
 - ↑ **780** FOI & EIR requests processed by the Complaints & FOI Service
- 7.3 There were significantly fewer compliments recorded during 2021-2022 compared with the previous reporting period (down by 72%). However, this cannot be interpreted in isolation, because there was almost a 50% increase in compliments recorded during 2020-2021 (in comparison with 2019-2020). This may be due to services being unable to prioritise passing any compliments to the Complaints and FOI Service to be recorded. A more likely explanation, however, is that the Complaints and FOI Service was unable to undertake its planned review of the management of compliments across the Council during this reporting year (see para. 2.6 above), as a consequence of the pressures experienced by the Complaints and FOI Service throughout the year.
- 7.4 Although the Enquiries managed by the Complaints and FOI Service had decreased slightly, there was a 29% rise in complaints received by the Council. This could be attributed to the lack of capacity within the Complaints and FOI Service to drive forwards a pro-active approach to resolving concerns at the earliest opportunity. It is also recognised that the absences and vacancies encountered within the Complaints and FOI Service will have been a significant contributory factor to the inability to manage cases as effectively as in previous years.
- 7.5 Stage 1 complaints rose by 16% and the Council saw an increase of 30% in complaints that were investigated at Stage 2 (formal stage). Compliance with prescribed timescales was also lower than expected, though it is acknowledged that Stage 2 complaints often require additional time to investigate thoroughly – providing complainants receive communication about any delays. Regrettably, the capacity to communicate with complainants and provide regular updates was beset by difficulties due to the pressures on the services, as referred to above.
- 7.6 Consequently, this resulted in complainants escalating their complaints to the Ombudsman far earlier, which ultimately led to the increase in general activity referred to the Ombudsman, as well as the substantial number of Early Resolution agreements.

- 7.7 It must also be noted that the complexity of the contact received by the Complaints and FOI Service during 2021-2022 was far greater than experienced in previous years. For instance, a number of Enquiries received, required substantial input from the Complaints and FOI Service, because they did not necessarily fall under the scope of the complaints policies. Such cases still generated a considerable amount of work (i.e. to explain why the complaints process could not be engaged, for whatever reason) as well as attempts to liaise with colleagues to resolve the issues being raised. For example, complaints about actions taken by the Council entirely legitimately (i.e. in accordance with policy and legislation) cannot be considered under the complaints policies, because they are considered to be a 'properly made decision'. In addition, a number of complaints were received whereby the complainant did not have the consent of the service-user, or their complaint related to the actions of third parties, as opposed to the Council. Such cases still require resolution of some sort and, in some instances, investigations will be undertaken, albeit outside of the complaints processes.
- 7.8 Two complaints were received in relation to the Welsh Language during 2021-2022, both of which related to instances whereby the service-users' preferred language of choice (Welsh) was not observed. Both complaints were promptly and satisfactorily resolved at Stage 1 and the relevant services involved in these cases had implemented measures to raise staff awareness and ensure future compliance with the Welsh Language Measures.
- 7.9 As referred to previously, the number of complaints referred to the Ombudsman was unprecedented, as was the number of Early Resolution agreements, demonstrating an increase of 63% and 70%, respectively. On a more positive note however, 35% (16 complaints) of cases referred to the Ombudsman were closed following initial consideration, supporting the actions that were taken by the Council during its management of the complaint. A further 13 cases were premature (28%) meaning that the complainant(s) had not yet exhausted the Council's complaints process, and 4 cases (9%) were out of the Ombudsman's jurisdiction.
- 7.10 Further analysis of all Ombudsman activity shows that 72% of cases did not require any intervention at all by the Ombudsman. Whilst it is acknowledged that there were far more cases resulting in Early Resolution agreements during 2021-2022 (13 in total); considering the additional 20 Ombudsman cases received over the course of the year, and the Council's ability to fulfil the agreements without invoking a formal investigation demonstrates the determination of officers to put things right.
- 7.11 Refuse Collection and Household Waste Sites continues to occupy the top of the list in terms of the service which received the highest number of Stage 1 complaints, closely followed by Planning (including Planning Enforcement) and Council Tax and Housing Benefit, having received 7 Stage 1 complaints each. The top three services share 40% of all Stage 1 complaints received by the Council. As previously reported however, the nature of these services predisposes them to attract high numbers of complaints.
- 7.12 A smaller proportion of complaints were upheld during 2021-2022; 49% compared with 54% in 2020-2021. This is positive and indicates that despite the increase in the number of complaints during the year, fewer were justified. That being said, fewer complaints were not upheld too, mainly due to 11% of cases remaining open at the end of the reporting year, and a further 8% having been discontinued by complainants during the process.

- 7.13 It is acknowledged that further work is needed to capitalise on the opportunities arising from complaints, in particular, with regard to learning lessons and sharing good practice across the organisation. This will be further explored in the forthcoming reporting year and it is anticipated that this will be evidenced within next year's annual report.
- 7.14 There is always room for improvement with regard to compliance with prescribed timescales – both in complaints and FOI/EIR. The number of FOI/EIR responses issued within the 20 working-day timescale has dipped to the lowest level recorded in recent times. As with last year, it is believed that this is due to a combination of factors including the lack of capacity on the part of services to be able to prioritise FOI above existing work commitments; being unable to obtain hard-copies of some documents; lack of capacity within the Complaints and FOI Service (which undertakes the majority of the administrative task surrounding FOI activity; i.e. recording, acknowledging and distributing new requests and issuing all responses and applying any exemptions/exceptions and/or redactions as required).
- 7.15 Combined with a slight increase in the number of FOI/EIR requests received, there was also a rise in cases that were referred to the Information Commissioner's Office (ICO). A total of 9 cases were referred to the ICO, which equates to 1% of all requests received. However, there is still room for improvement in this regard, particularly in terms of compliance – as referred to above.
- 7.16 In conclusion, compliance with the statutory timescales for complaints and FOI must be prioritised moving forwards, and as a consequence, FOI compliance and Ombudsman activity are both included in the Complaints and FOI Service's performance measures for 2022-2023.
- 7.17 The content of this report is less positive when compared with the Council's performance in relation to complaints and FOI over recent years. The increase in activity, across both services, is consistent with what other Local Authorities are experiencing – as acknowledged in the Ombudsman's Annual Letter. However, resources and effective working practices will be reviewed, to deliver a more efficient and transparent service to our citizens and service-users. This will be a priority for the Complaints and FOI Service for the forthcoming year.

Marie-Neige Hadfield
Complains and FOI Manager

31st August 2022

8. DATA

ITEM 1: BREAKDOWN OF COMPLAINTS BY SERVICE

Service and Departments	Stage 1	Stage 2	TOTAL
Schools			
➤ Schools	0	3	5
➤ ALN	0	1	
➤ Childcare Offer	1	0	
Finance & Procurement			
➤ Council Tax & Housing Benefit	7	3	10
Democratic Services			
➤ Corporate Service Support	1	0	3
➤ Electoral Services	2	0	
People & Organisation			
➤ Payroll	0	1	1
Porth Cymorth Cynnar			
➤ Wellbeing Centres	2	1	3
Porth Cynnal			
➤ Adult Team	2	1	24
➤ Children & Family Assessment	2	2	
➤ Safeguarding	2	6	
➤ Extended Support	4	5	
Porth Gofal			
➤ Fostering	1	0	5
➤ Porth Gofal Triage	1	0	
➤ Homelessness / Housing (Inc. DFG, Eco Flex)	1	2	
Policy, Performance & Public Protection			
➤ Food Safety	1	0	11
➤ Trading Standards	0	1	
➤ Environmental Health	2	2	
➤ Complaints & FOI Service	2	2	
➤ Licensing	1	0	
Highways & Environmental Services			
➤ Highway Maintenance / Improvements	6	2	36
➤ Mooring	0	1	

Service and Departments	Stage 1	Stage 2	TOTAL
➤ Refuse Collection & Household Waste Sites	15	9	
➤ Transport	3	0	
Economy & Regeneration			
➤ Coast and Countryside	0	1	
➤ Planning (including Enforcement)	7	7	
➤ Complaint against Staff	0	1	
➤ Property Services	3	0	
➤ Covid-19 – Misc.	0	1	
➤ TPO	1	0	
➤ Estates	1	1	
Customer Contact			
➤ Customer Services	3	0	
➤ Registration	1	0	
➤ ICT & Information Management	1	0	
Legal and Governance services			
	0	0	0
Multiple Service / Corporate			
	0	7	7
TOTAL NUMBER OF COMPLAINTS RECEIVED	73	60	133

ITEM 2: COMPLAINT OUTCOMES

Outcome	2021/22
> Investigation / Complaint discontinued or withdrawn	10
> Not upheld	43
> Upheld Whole or in Part	65
> Open / Ongoing	15
TOTAL	133

ITEM 3 – OMBUDSMAN CASES RESULTING IN EARLY RESOLUTION AGREEMENTS

Report Issued	Case Ref.	Service(s)	Ombudsman Report Details
28/04/21	202005090	Porth Cynnal	<p>Mr X complained that his computer equipment, which had previously been provided following the Council's assessment of his needs, was no longer fit for purpose. The Ombudsman noted that Mr X had mentioned that he was also homeless and no longer resident in the Council's area due to his safeguarding concerns about them but was seeking a reassessment of his needs.</p> <p>The Ombudsman was concerned that there was a lack of clarity around whether Mr X intended to return to the Council's area and correspondingly whether there was a duty to assess him and consider his homelessness. The Ombudsman considered that it was reasonable for Mr X to confirm his intention about returning to the Council's area, before considering whether there had been maladministration by the Council.</p> <p>The Ombudsman considered that the matter was open to early resolution, once this had been confirmed by Mr X. This would confirm whether the Council had a duty towards Mr X. If it did, the Ombudsman was pleased to note that the Council agreed within 8 weeks to commence a reassessment of Mr X's needs (including communication needs) and as part of this, consider his homelessness status.</p>
13/05/21	2020006242	Porth Cynnal	<p>Ms X complained that the Council had not responded to her concerns regarding the care she had been providing to her friends. Ms X said that support she had requested had not been supplied.</p> <p>The assessment found that the Council had not formally responded to Ms X's complaint. The Council agreed to do so but would first contact the complainant, within 10 working days, to clarify her complaint. The Council agreed to provide an update to this office on its progress with formal consideration of the complaint within 20 working days. The Council also agreed to identify any social care needs that the complainant or her friends had (subject to the necessary consents) and to take steps to put in place any appropriate support services as soon as possible.</p>
22/06/21	202100516	Porth Cynnal	<p>Miss X complained that Ceredigion County Council ("the Council") failed to address her complaint about Social Services in a timely manner.</p> <p>In considering Miss X's complaint, the Ombudsman was concerned about the significant delays in responding to her complaint, that she had not received a response, and was inconvenienced by the Council's actions. He decided to settle the complaint without an investigation.</p> <p>The Ombudsman sought and gained the Council's agreement to:</p> <ul style="list-style-type: none"> • Offer Miss X a 'time and trouble' payment of £150.

			<ul style="list-style-type: none"> • Provide Miss X with a formal apology for the failures identified in relation to the handling of her complaint. • Investigate her complaint in accordance with the Social Services complaints procedure. <p>The Council agreed to carry out these actions within 4 weeks.</p>
28/07/21	202102361	Policy, Performance & Public Protection (Complaint Handling)	<p>Mr X complained about the delay in the Council responding to his complaint and Freedom of Information request ("FOI"), submitted to it in March and April 2021 respectively.</p> <p>The Ombudsman decided that within 20 working days the Council should provide a response to Mr X's complaint and an update in respect of his FOI request.</p> <p>The Ombudsman considered this to be an appropriate resolution to the complaint.</p>
09/08/21	202101675	Economy & Regeneration	<p>Mrs A complained about Ceredigion County Council's actions in relation to planning and enforcement issues in relation a housing development on land adjacent to her home and in particular, that the ground levels had been raised. Mrs A further complained about delays in complaint handling, the Council's poor communication and that questions raised were not fully answered.</p> <p>The Ombudsman found that there was insufficient evidence of maladministration in the planning or enforcement process to warrant investigation. There appeared to be unexplained delay in the complaints handling process, but an apology had already been provided by the Council. However, the complaint response lacked detail and explanation about how the decision had been reached and the Council had not responded to additional questions raised by Mrs A.</p> <p>The Ombudsman decided to settle the complaint without an investigation. He sought and gained the Council's agreement to provide Mrs A, within 20 working days, with a fuller complaint response, addressing the specific concerns raised with the planning department including a better explanation as how the ground levels were calculated, a written response to the queries raised with the Complaints Department by and an apology for the Council's failure to address the supplementary questions raised.</p>

20/08/21	202102036	Porth Cynnal and Policy, Performance & Public Protection (Complaint Handling)	<p>Miss X complained that the Council had not provided her with a response to her Social Services complaint which had been submitted to it in November 2020.</p> <p>The Ombudsman was concerned that Miss X had not received a formal response to her complaint and that she had been inconvenienced by the Council's actions. He decided to settle the complaint without an investigation.</p> <p>The Ombudsman sought and gained the Council's agreement to:</p> <ul style="list-style-type: none"> • Provide Miss X with an apology for the delay in responding to her complaint • Provide Miss X with an explanation for the delay • Provide Miss X with a complaint response • Offer Miss X £200 in recognition for the time and trouble in making her complaint <p>The Council agreed to complete the recommendations within 2 weeks.</p>
17/09/21	202102202	Economy & Regeneration and Policy, Performance & Public Protection (Complaint Handling)	<p>Mr X complained that Ceredigion County Council ("the Council"), acting as planning authority, had failed to take enforcement action regarding an unauthorised development on neighbouring land, which he reported in 2019. The Council had then (in 2020), granted retrospective planning consent which it later confirmed to be an error on its part (as it had intended to refuse the application). Since, Mr X said that the landowner had been allowed additional time by the Council to acquire further land to meet the terms of the permission granted but had seemingly not done so within the time permitted. Mr X further complained that the Council had failed to keep him informed and had failed to explain to him why it had not taken further action against the developer for failing to acquire the land or what it proposed to do.</p> <p>In considering the complaint, the Ombudsman acknowledged the error that the Council accepted had happened. He was concerned about the delay that had since occurred as well as the lack of update information provided to Mr X. He considered this to amount to maladministration and to be a serious injustice to Mr X, given he had first raised concerns in 2019. Recognising his jurisdictional limitations in planning matters (in that he cannot question professional judgement, or direct the Council to take enforcement action), the Ombudsman considered the complaint capable of being resolved on the basis of the following action, as an alternative to investigation.</p> <p>The Council agreed, within 1 month to:</p> <ol style="list-style-type: none"> (a) Apologise in writing to Mr X (through a Senior Officer) for the maladministration that had occurred. (b) Provide Mr X (separately or combined within the above) with a detailed explanation as to what had happened since the Council's decision to allow time for land acquisition, and how the issue is to be determined and brought to a conclusion. (c) Offer Mr X redress in the total sum of £1,500 for the injustice caused to him by the maladministration, as well as his time and trouble in pursuing his complaints with both the Council and the Ombudsman.

21/09/21	202102648	Economy & Regeneration	<p>Mr X complained that Ceredigion County Council (“the Council”) had failed to undertake a timely assessment of an alleged planning breach and to, if appropriate, take enforcement action.</p> <p>The Ombudsman contacted the Council and secured its agreement to, by no later than 1 November 2021, both respond to the complainant about its findings in respect of the alleged breach, and to offer both an explanation of and apology for the delay in doing so.</p>
06/10/21	202104213	Finance & Procurement and Policy, Performance & Public Protection (Complaint Handling)	<p>Mr X complained that the Council had not responded to his complaint submitted to it in April 2021 regarding issues with his council tax payments.</p> <p>The Ombudsman decided that the Council should provide Mr X with a stage two response (within 3 weeks) which should include an explanation for the delay. The Council will also perform an assessment to determine whether Mr X has lost out financially because of the delay. It will also consider a time and trouble payment for having to follow up on this matter and for contacting the Ombudsman.</p> <p>The Ombudsman considered this to be an appropriate resolution to the complaint instead of conducting an investigation.</p>
21/10/21	202104158	Economy & Regeneration	<p>Mr X complained that the Council failed to communicate progress about enforcement action in a timely manner. Mr X also complained about a lack of response to his complaint letter sent to the Council in June 2021.</p> <p>The Ombudsman decided that the Council should contact Mr X to discuss his complaint and obtain as necessary a copy of his complaint letter. It will then issue its formal (“stage two”) response in line with its internal complaint process within 20 working days.</p> <p>The Ombudsman considered this to be an appropriate resolution to the complaint instead of conducting an investigation.</p>
25/01/22	202106308	Porth Cynnal and Policy, Performance & Public Protection (Complaint Handling)	<p>Miss X complained that the Council failed to meet her son and her child’s needs. Miss X was also unhappy that a stage 2 investigation was not carried out in a timely manner after a request was put to the Council.</p> <p>The Ombudsman was concerned that the Council had not escalated Miss X’s complaint to a stage 2 investigation (under the Social Services Complaints Regulations) when requested and contacted the Council to resolve this. The Ombudsman therefore asked the Council to issue Miss X with an apology for not escalating her complaint on request, and to appoint an Independent Investigation Officer to undertake a stage 2 investigation.</p> <p>The Council agreed by 28 February to:</p> <ul style="list-style-type: none"> (i) apologise to Miss X for failing to escalate her complaint and (ii) to escalate Miss X’s complaint to stage 2 and to appoint an Independent Investigation Officer to undertake the investigation.

07/02/22	202106906	Policy, Performance & Public Protection (Complaint Handling)	<p>Miss X complained that the Council failed to respond to her complaint about social services, and further failed to respond to her letters.</p> <p>The Ombudsman decided that the Council should contact Miss X (within 5 days) to establish if she would like her complaint dealt with at stage 1 or 2 of the social services complaints procedure. Thereafter, it should handle Miss X's complaint in accordance with the statutory timeframes. It should also apologise to Miss X for failing to respond to her letters.</p> <p>The Ombudsman considered this to be an appropriate resolution to the complaint instead of conducting an investigation.</p>
23/03/22	202107539	Policy, Performance & Public Protection (Complaint Handling)	<p>Ms X complained that the Council had failed to investigate and respond to her complaint about an increase in nursing home fees.</p> <p>In considering the complaint, the Ombudsman was concerned that the Council had not responded to Ms X despite informing her in August 2021 that enquiries were being made. As an alternative to an investigation, the Ombudsman asked the</p> <p>Council to complete the following in settlement of Ms X's complaint:</p> <p>By 21 April 2022,</p> <ol style="list-style-type: none"> a) Provide Ms X with an apology for failing to respond b) Provide Ms X with a full response to her email

Ask for: Communications

 01656 641150

Date: August 2022

 communications@ombudsman.wales

Cllr. Bryan Davies
Ceredigion County Council
By Email only: bryan.davies@ceredigion.go.uk

Annual Letter 2021/22

Dear Councillor Davies

I am pleased to provide you with the Annual letter (2021/22) for Ceredigion County Council which deals with complaints relating to maladministration and service failure, complaints relating to alleged breaches of the Code of Conduct for Councillors and the actions being taken to improve public services

This is my first annual letter since taking up the role of Public Services Ombudsman in April 2022, and I appreciate that the effects of the pandemic are still being felt by all public bodies in Wales. Our office has not been immune from this, with records numbers of cases being referred to us over the last two years. The strong working relationships between my Office and local authorities continues to deliver improvements in how we are dealing with complaints and ensuring that, when things go wrong, we are learning from that and building stronger public services.

Complaints relating to Maladministration & Service Failure

Last year the number of complaints referred to us regarding Local Authorities increased by 47% (compared to 20/21 figures) and are now well above pre-pandemic levels. It is likely that complaints to my office, and public services in general, were suppressed during the pandemic, and we are now starting to see the expected 'rebound' effect.

During this period, we intervened in (upheld, settled or resolved at an early stage) a similar proportion of complaints about public bodies, 18%, when compared with recent years. Intervention rates (where we have investigated complaints) for Local Authorities also remained at a similar level – 14% compared to 13% in recent years.

Page 1 of 9

Complaints relating to the Code of Conduct for Councillors

We also received a high number of Code of Conduct complaints last year, relating to both Principal Councils and Town and Community Councils. A record number (20) were referred to either the Adjudication Panel for Wales or local standards committees, due to evidence of a breach of the Code.

Supporting improvement of public services

In addition to managing record levels of complaints, we also continued our work using our proactive powers in the Public Services Ombudsman (Wales) Act 2019. Specifically undertaking our first Own Initiative Investigation and continuing our work on the Complaints Standards Authority.

October 2021 saw the publication of the first own initiative investigation in Wales: [Homelessness Reviewed](#). The investigation featured three Local Authorities and sought to scrutinise the way Homelessness assessments were conducted. The report made specific recommendations to the investigated authorities, as well as suggestions to all other Local Authorities in Wales and Welsh Government. Some of these recommendations will bring about immediate change – updating factsheets and letter and assessment templates to ensure that key equality and human rights considerations are routinely embedded into processes for example – all the recommendations were designed to bring about tangible change to people using homelessness services in Wales.

The Complaints Standards Authority (CSA) continued its work with public bodies in Wales last year. The model complaints policy has already been adopted by local authorities and health boards in Wales, we have now extended this to an initial tranche of Housing Associations and Natural Resources Wales. The aim being to implement this work across the Welsh public sector.

In addition to this, the CSA published information on complaints handled by local authorities for the [first time](#) – a key achievement for this work. The data for 21/22 showed:

- Over 15,000 complaints were recorded by Local Authorities
- 4.88 for every 1000 residents.
- Nearly half (46%) of those complaints were upheld.
- About 75% were investigated within 20 working days.
- About 8% of all complaints closed ended up being referred to PSOW.

The CSA has now implemented a model complaints policy with nearly 50 public bodies, and delivered 140 training sessions, completely free of charge, during the last financial year. The feedback has been excellent, and the training has been very popular - so I would encourage Ceredigion County Council to engage as fully as possible.

Complaints made to the Ombudsman

A summary of the complaints of maladministration/service failure received relating to your Council is attached, along with a summary of the Code of Conduct complaints relating to members of the Council and the Town & Community Councils in your area.

In light of the new duties on political leaders and standards committees to promote and maintain high standards of conduct of their members, we look forward to working with you, your Monitoring Officer and standards committees to share any learning from the complaints we receive and to support your authority's work.

I would also welcome feedback on your Governance & Audit Committee's review of your authority's ability to handle complaints effectively so that we can take this into account in our work and support its work on the handling of complaints.

Finally, can I thank you and your officials for the positive way that local authorities have engaged with my Office to enable us to deliver these achievements during what has been a challenging year for everyone. I very much look forward to continuing this work and collaboration to ensure we further improve public services across Wales.

Further to this letter can I ask that your Council takes the following actions:

- Present my Annual Letter to the Cabinet and to the Governance & Audit Committee to assist members in their scrutiny of the Council's performance and share any feedback from the Cabinet and the Governance & Audit Committee with my office.
- Continue to engage with our Complaints Standards work, accessing training for your staff, fully implementing the model policy, and providing complaints data.
- Inform me of the outcome of the Council's considerations and proposed actions on the above matters by 30 September.

This correspondence is copied to the Chief Executive of your Council and to your Contact Officer. Finally, a copy of all Annual Letters will be published on my website.

Yours sincerely,



Michelle Morris

Public Services Ombudsman

cc. Eifion Evans, Chief Executive, Ceredigion County Council.

By Email only: Eifion.evans@ceredigion.gov.uk

Factsheet

Appendix A - Complaints Received

Local Authority	Complaints Received	Received per 1000 residents
Blaenau Gwent County Borough Council	14	0.20
Bridgend County Borough Council	55	0.37
Caerphilly County Borough Council	60	0.33
Cardiff Council*	182	0.50
Carmarthenshire County Council	54	0.29
Ceredigion County Council	52	0.72
Conwy County Borough Council	27	0.23
Denbighshire County Council	34	0.36
Flintshire County Council	99	0.63
Gwynedd Council	39	0.31
Isle of Anglesey County Council	29	0.41
Merthyr Tydfil County Borough Council	27	0.45
Monmouthshire County Council	20	0.21
Neath Port Talbot Council	45	0.31
Newport City Council	40	0.26
Pembrokeshire County Council	39	0.31
Powys County Council	55	0.42
Rhondda Cynon Taf County Borough Council	51	0.21
Swansea Council	71	0.29
Torfaen County Borough Council	18	0.19
Vale of Glamorgan Council	61	0.46
Wrexham County Borough Council	71	0.52
Total	1143	0.36

* inc 17 Rent Smart Wales

Appendix B - Received by Subject

Ceredigion County Council	Complaints Received	% Share
Adult Social Services	6	12%
Benefits Administration	0	0%
Children's Social Services	3	6%
Community Facilities, Recreation and Leisure	1	2%
Complaints Handling	14	27%
Covid19	3	6%
Education	2	4%
Environment and Environmental Health	5	10%
Finance and Taxation	2	4%
Housing	0	0%
Licensing	0	0%
Planning and Building Control	10	19%
Roads and Transport	5	10%
Various Other	1	2%
Total	52	

Appendix C - Complaint Outcomes (* denotes intervention)

County/County Borough Councils	Out of Jurisdiction	Premature	Other cases closed after initial consideration	Early Resolution/ voluntary settlement*	Discontinued	Other Reports- Not Upheld	Other Reports Upheld*	Public Interest Report*	Total
Ceredigion County Council	4	13	16	13	0	0	0	0	46
% Share	9%	28%	35%	28%	0%	0%	0%	0%	

Appendix D - Cases with PSOW Intervention

	No. of interventions	No. of closures	% of interventions
Blaenau Gwent County Borough Council	0	13	0%
Bridgend County Borough Council	7	54	13%
Caerphilly County Borough Council	7	58	12%
Cardiff Council	45	159	28%
Cardiff Council - Rent Smart Wales	1	16	6%
Carmarthenshire County Council	7	49	14%
Ceredigion County Council	13	46	28%
Conwy County Borough Council	2	24	8%
Denbighshire County Council	4	33	12%
Flintshire County Council	15	94	16%
Gwynedd Council	6	41	15%
Isle of Anglesey County Council	3	28	11%
Merthyr Tydfil County Borough Council	2	26	8%
Monmouthshire County Council	2	21	10%
Neath Port Talbot Council	5	45	11%
Newport City Council	4	36	11%
Pembrokeshire County Council	2	40	5%
Powys County Council	7	55	13%
Rhondda Cynon Taf County Borough Council	3	45	7%
Swansea Council	10	76	13%
Torfaen County Borough Council	2	20	10%
Vale of Glamorgan Council	9	62	15%
Wrexham County Borough Council	4	67	6%
Total	160	1108	14%

Appendix E - Code of Conduct Complaints

County/County Borough Councils	Discontinued	No evidence of breach	No action necessary	Refer to Adjudication Panel	Refer to Standards Committee	Withdrawn	Total
Ceredigion County Council	2	2	0	0	0	0	4

Appendix F - Town/Community Council Code of Complaints

Town/Community Council	Discontinued	No evidence of breach	No action necessary	Refer to Adjudication Panel	Refer to Standards Committee	Withdrawn	Total
Llanfair Clydogau Community Council	-	-	-	-	-	-	0
Llangoedmor Community Council	0	1	0	0	0	0	1
Llansantffraed Community Council	0	0	0	1	0	0	1
New Quay Town Council	0	1	0	0	0	0	1
Trefeurig Community Council	-	-	-	-	-	-	0

Information Sheet

Appendix A shows the number of complaints received by PSOW for all Local Authorities in 2021/2022. These complaints are contextualised by the number of people each health board reportedly serves.

Appendix B shows the categorisation of each complaint received, and what proportion of received complaints represents for the Local Authority.

Appendix C shows outcomes of the complaints which PSOW closed for the Local Authority in 2021/2022. This table shows both the volume, and the proportion that each outcome represents for the Local Authority.

Appendix D shows Intervention Rates for all Local Authorities in 2021/2022. An intervention is categorised by either an upheld complaint (either public interest or non-public interest), an early resolution, or a voluntary settlement.

Appendix E shows the outcomes of Code Of Conduct complaints closed by PSOW related to Local Authority in 2021/2022. This table shows both the volume, and the proportion that each outcome represents for the Local Authority.

Appendix F shows the outcomes of Code of Conduct complaints closed by PSOW related to Town and Community Councils in the Local Authority's area. This table shows both the volume, and the proportion that each outcome represents for each Town or Community Council.

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Cyngor Sir CEREDIGION County Council

Report to:	Governance and Audit Committee
Date of meeting:	27 September 2022
Title:	Corporate Risk Register
Purpose of the report:	To update the Governance and Audit Committee on the Corporate Risk Register
Cabinet Portfolio and Cabinet Member	Councillor Bryan Davies, Leader of the Council and Cabinet Member for Policy, Performance, Partnerships and Democratic Services

Regular reports are provided to the Governance and Audit Committee regarding the Council's Corporate Risk Register to provide on-going information and assurance that risks identified by senior managers are managed appropriately. This reinforces the Governance and Audit Committee role of providing independent assurance to Council of the appropriate management of the Corporate Risk Register.

Appendix A contains the latest Corporate Risk Register.

All risks have been reviewed and include updated commentary. The scores remain unchanged for all risks. However, several risks have had changes to mitigating actions to reflect the changing response. These are:

R003: Corporate Improvement and Performance
R006: Through Age & Well-being Programme
R009: Information Management & Cyber Security Resilience
R015: Support Local Food Business, Maintain Safety
R017: Safeguarding
R019: Climate Change and Coastal Erosion / Flooding
R020: Ash Dieback
R021: Phosphates

Recommendations (s): That Governance and Audit Committee note the updated Corporate Risk Register

Reason for decision: To ensure that the Council manages Corporate Risks appropriately in line with the Corporate Risk Strategy and Framework

Appendices: Appendix A – Corporate Risk Register

Corporate Lead Officer: Alun Williams (Corporate Leader Officer Policy,
Performance and Public Protection)

Reporting Officer: Alun Williams (Corporate Leader Officer Policy,
Performance and Public Protection)

Date: **31st August 2022**

Corporate Risk Register



Cyngor Sir
CEREDIGION
County Council

Governance and Audit Committee

Reviewed and updated by Leadership Group	31/08/2022
Last Monitored by Governance and Audit Committee	06/06/2022
Next Audit Committee	21/09/2022

Corporate Risk Register

Contents and Summary

Risk Name	Owner	Risk Rating		
		Score	Status	Trend
R003: Corporate Improvement and Performance Management Arrangements	Diana Davies	6		
R004: Business Continuity and Civil Contingency	Diana Davies	15		
R005: Medium Term Financial Plan	Duncan Hall	20		
R006: Through Age & Well-being Programme	James Starbuck	15		
R009: Information Management & Cyber Security Resilience	Arwyn Morris	8		
R015: Supporting Local Food Businesses, Maintain Safety	Carwen Evans	16		
R017: Safeguarding	Sian Howys	15		
R018: Covid-19	Alun Williams	12		
R019: Climate Change and Coastal Erosion/Flooding	Russell Hughes-Pickering / Rhodri Llwyd	25		
R020: Ash Dieback	Rhodri Llwyd	20		
R021: Phosphates	Russell Hughes-Pickering	20		

Risk Key		
	Red	High Risk
	Amber	Medium Risk
	Green	Low Risk

Trend Key	
	Risk score has increased
	No change to risk score
	Risk score has decreased

Corporate Risk R003 Corporate Improvement & Performance

Owner: CM Diana Davies

Description

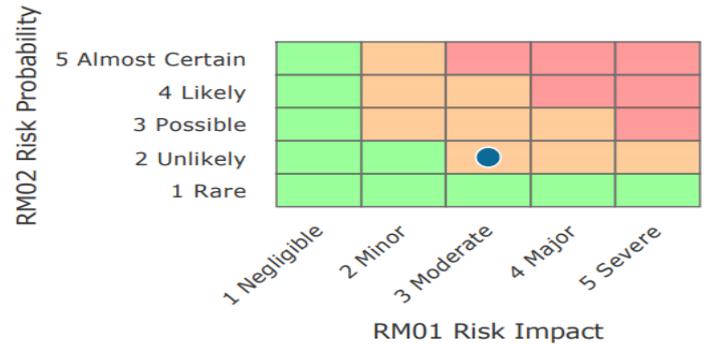
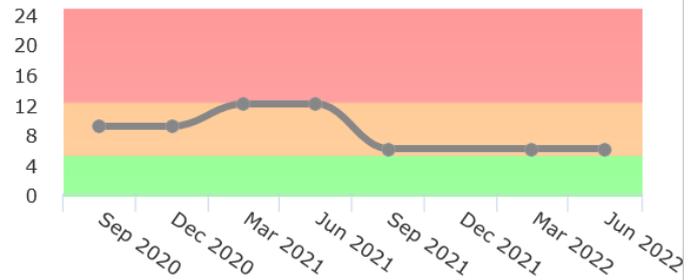
Failure to ensure that Performance Management arrangements are fit for purpose to meet our future priority needs and failure to support the implementation of a new Corporate Performance Management System as required by the new Local Government Act will impact on our ability to use effective business intelligence in future decision-making processes.

Potential Consequence

The main consequences for the Council are reputational, political and poorer service delivery for citizens of the County. This could lead to poor regulatory reports, intervention, as well as a reduction in budget.

Evidence of Risk

Potential risks remain in terms of delivery and poorer service for customers, as services make savings. Good financial planning and corporate performance management arrangements are in place to mitigate those risks. The introduction of the new performance regime for principal councils increases the risk in terms of meeting the legislative requirements and the expectations of Welsh Government, particularly in the first year. This includes the need to focus on delivering and evidencing improved outcomes, and ensuring the Council undertakes robust engagement and consultation to ensure the voices of all of the statutory consultees are considered. However, considerable work has taken place across the organization to set up a robust process for conducting self-assessment and producing the Self-Assessment Report.



Mitigation Action	Due Date	Sep	Dec	Mar	Jun
R003T01: Ensure business and service plans are up to date	31 Mar 2023	★	★	★	★
R003T04: Develop and implement the Teifi performance system to prepare for the new self-assessment legislation	31 Dec 2022	●	●	●	●
R003T06: Implement self-assessment arrangements – Local Government & Elections (Wales) Act 2021	31 Dec 2022	●	●	●	●
R003T07: Re-introduce and continually review Performance Board arrangements	31 Mar 2023	★	★	★	★
R003T08: Publish updated Performance Management Policy Statement and Performance	31 Mar 2023				●

Comments (eg progress to date)

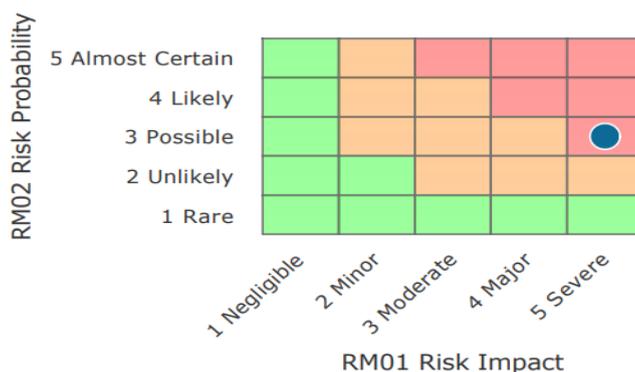
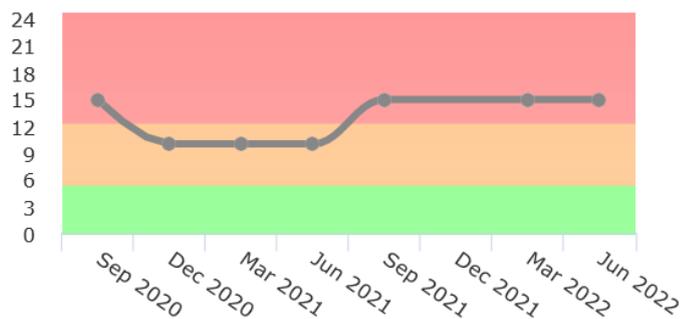
The Council's Business Planning and Performance processes are now fully operational following a period of suspension during 2020/21 as Covid recovery work took priority. The new Business Planning Process that went live in 2021, which features a more streamlined approach to setting objectives, tasks and measures and a centralised approach to recording the linkages between objectives and priorities is working well. Three Performance Board meetings have been held to consider performance during the 2021/22 financial year with the most recent in June. Training materials have been developed to support the use of the Teifi Performance System and ongoing support is provided by Performance and Research officers. A process and approach have been developed and agreed for the new self-assessment based performance regime for Principal Authorities (Part 6 of the Local Government and Elections Act). The work on the Annual Self-assessment has commenced with Leadership Group and Scrutiny workshops held to inform and populate a Key Lines of Enquiries evidence and scoring document that will form the basis of the report. The Annual Self-Assessment Report will be taken through the democratic process in the Autumn. Work is also underway on preparing the new Corporate Strategy for the Council. The strategy is due to be consulted upon from mid- August to mid-September with a view to taking it through the democratic process in the Autumn.

Corporate Risk R004 Business Continuity

Owner: CM Diana Davies

Description
Failure to have business resilience or dealing with emergency events is likely to significantly impact on the delivery of essential services and the lives of people in our communities.
Potential Consequence
There are several organisational and citizen risks associated with poor business continuity and civil contingency planning as services could be affected during incidents, and major incidents may have both immediate and long-term consequences including failure to deliver essential services, injury/fatalities, claims for compensation, property damage, negative media, and public inquiries.

Evidence of Risk
Ransomware attacks can be massively disruptive, requiring a significant amount of recovery time to re-enable critical services. These events can also be high profile in nature, with wide public and media interest. With most council services now being delivered digitally and remotely (as a consequence of Covid), this would have catastrophic consequence on our ability to operate. We have well-rehearsed and tested business continuity plans for scenarios such as building outages, floods, boiler or power failures, fuel shortages and other geographically limited incidents, such as for individual services and fairly limited timescales. Ransomware poses a special challenge, as all ICT would be disrupted for indefinite periods.



Mitigation Action	Due Date	Sep	Dec	Mar	Jun
R004T03: Ensure the internal authority wide business continuity planning meetings are effective	31 Mar 2023	●	●	★	★
R004T04: Develop, refine and test Business Continuity plans	31 Mar 2023	●	●	●	●
R004T05: Participate and contribute to Dyfed Powys LRF coordination groups & update Emergency Plans	31 Mar 2023	★	★	★	★
R004T06: Ensure the internal Cyber Resilience meetings are effective	31 Mar 2023	★	★	★	★
R004T07: Review Emergency Plans to ensure a response to Ransomware attack is incorporated	31 Mar 2023	●	●	●	●

Comments (e.g. Progress to Date)

All services have current and up to date Business Continuity Plans. A revision of the Corporate Business Continuity Plan is also underway using the information provided by each Service.

The Local Authority was fully involved in the Local Resilience Forum COVID 19 strategic/recovery coordination groups. The other, more regular LRF Groups such as the Coordination & Training, Risk Group and Severe Weather Group are now being arranged again following a period of suspension due to the pandemic. Officers from across the Council attended (and Chaired two of the Groups). These meetings and have assisted in updating the LRF Severe Weather Arrangements Plan.

The internal Emergency Business Continuity Management group (EBCMG) is meeting quarterly and is currently chaired by the Council Leader. The group have recently reviewed the Ceredigion Major Incident Plan that has been approved by Leadership Group.

Following consideration of a report from Silverthorn Associates to the Cyber-attack exercise in March officers have put together some examples of mitigating actions for services to assist in developing their own planned response to a Cyber threat/incident in their Business Continuity Plans.

Corporate Risk R005 Medium Term Financial Plan

Owner: CLO Duncan Hall

Description

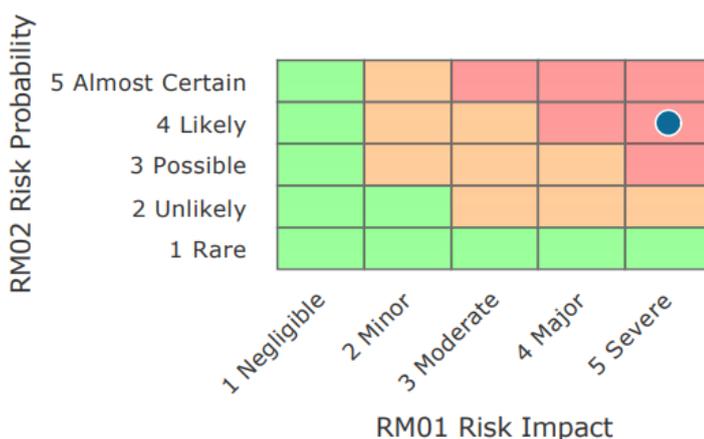
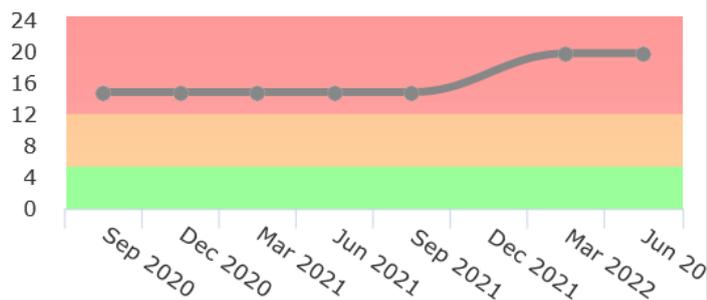
The reduction of core and external funding will lead to the reduction in service provision in some areas. Failure to adapt, implement identified savings and consider alternative models of service provision in line with the Medium-Term Financial Plan will affect future service delivery and the financial responsibilities of the Council.

Potential Consequence

- Risk of failing to meet statutory budget setting deadlines.
- Risk of service delivery impacted due to decreasing resources, short lead in times to service changes or failure to effectively prioritise spend in line with corporate priorities.
- Risk that savings plans identified are not achieved as planned.
- Risk that annual budget setting frustrates longer term planning

Evidence of Risk

The Medium-Term Financial Strategy (MTFS) and WG indicate high level funding indications for 2023/24 and 2024/25. The level of WG AEF funding has reduced over the years from c80% down to just above 70% of the revenue budget, placing a greater burden on funding raised through Council Tax. Latest MTFS update (March 2022) indicates a potential requirement to save c£15m by March 2025. Despite large amounts of additional one-off funding being received in 2020/21 and 2021/22 during COVID and a headline 8.9% settlement increase for 2022/23, the public sector outlook looks challenging based on indicative future WG funding levels announced at the time of the 2022/23 Local government Settlement. Cost pressure risks are growing, linked partly to current levels of Inflation (e.g., Staff pay awards for 2022/23 and beyond, Fuel, Energy & Food costs and associated Contractor / Provider inflation). The impact of the Cost of Living is now a key factor, which was given very close attention by Members during the 2022/23 Budget and Council Tax setting deliberations. A corporate Transformation Savings Programme remains in place to deliver savings to contribute towards the financial challenge and the new Through Age and Wellbeing Strategy is also now in the early stages of its implementation journey. These Programmes will need to deliver across the medium term, as well as continuing to take advantage of Invest to Save opportunities when they arise and using funds set aside for Boosting the Economy wisely. A solid track record exists of delivering Budgets and a positive year end Outturn position within the last few years. The Council's Balance sheet at 31/03/2022 is strong which contributes towards strong financial resilience. The risk was reduced during 2017/18 from 20 to 15 as the scale of budget savings required was decreasing, however the cost pressures now being forecast are higher than in the past.



Mitigation Action	Due Date	Sep	Dec	Mar	Jun
R005T01: Continue arrangements for financial management	31 Mar 2023	★	★	★	★
R005T03: Ensure that Transformation and service efficiency savings are developed and implemented	31 Mar 2023	●	●	★	●

Comments (e.g. Progress to Date)

The current year has a forecasted service underspend as well as a Council Tax surplus, the hardship and lost income fund continues being claimed and covered by WG. The budget has been set for the 2022/23 year with service inflation and cost pressures being fully met at the time of the budget preparation. Since then, high inflation and global factors including the war in Ukraine have created high oil and other goods prices to increase. This if continued may lead to budget pressures in the coming year which need to be managed. There is already a risk that pay awards will be higher than that budgeted and inflation indices affecting contracts will impact on next and the following years budget.

Corporate Risk R006 Through Age & Well-being Programme

Owner: Corporate Director James Starbuck

Description

The Through Age & Well-being Programme has been established and developed to transform the way the Council will deliver Social Care services. This aligns with the requirements of the Social Services and Wellbeing Act SSWBA. SSWBA provides the legal framework for improving the well-being of people who need care and support, and carers who need support, and for transforming social services in Wales.

The programme will therefore oversee the development of services and transformation of Social care. Failure to achieve this will risk that the authority will fail to meet its statutory and legislative requirements and the challenges faced with the increasing pressure on social care budgets.

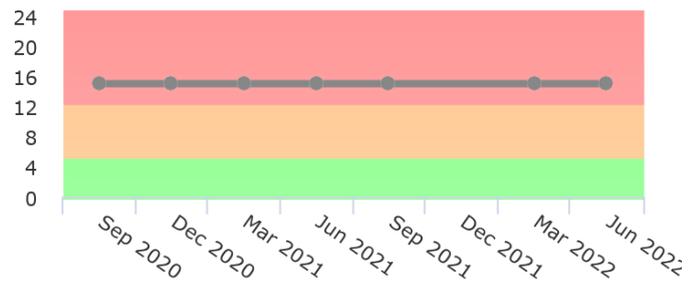
The Through Age & Wellbeing Programme is progressing to develop and implement service arrangements and staffing structure to support the emphasis on early intervention and prevention services. Risks and opportunities that may arise from the rebalancing of services will need to be managed.

Potential Consequence

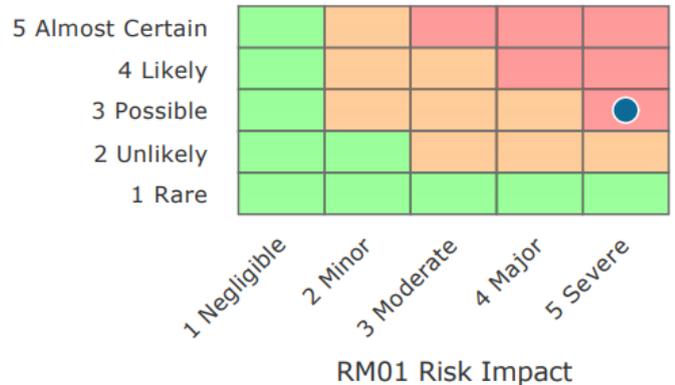
- Inability to deliver safe and effective services across all ages
- Missed opportunities to develop resilient and caring communities
- Continued increase in expenditure in delivering high cost services
- Inability to meet rising demand for services
- Not meeting statutory duties and legislative requirements

Evidence of Risk

- Continued pressure on social care budgets
- Increase in numbers of individuals in receipt of statutory services for planned care and support
- Need to provide prevention and early intervention services in line with legislation
- Prolonged period of 'Managing change process' impacting on the workforce
- Difficulties in retaining and recruitment of staff



RM02 Risk Probability



RM01 Risk Impact

Mitigation Action	Due Date	Sep	Dec	Mar	Jun
R006T01: Progress to be reported on the implementation of new service model to the project board.	31 Mar 2023	★	★	★	★
R006T03: Ensure HR/workforce programs in place in line with managing change	31 Mar 2023	★	★	★	★
R006T05: Regular scrutiny of budgets and financial implications to implementation of the new model.	31 Mar 2023	★	★	★	★
R006T07: TAW Communications to be agreed and implemented	30 Sep 2022				★

Comments (eg progress to date)

Progress continues in accordance with the TAW Action Plan as does the specific work streams. The restructuring of teams has progressed well following the consultation and all are now in place. The remaining Direct Services consultation is due to be completed in the first quarter of 2022/2023. Workshops have now completed for Corporate Managers and Corporate Lead Officers with IPC that support the change management and give examples of new models of care. Additional needs will be assessed against the 2022/2023 Action Plan and Business Plans to identify further/future needs. Maintaining critical frontline services has continued and there remains an increased demand on services, and challenges with recruitment and retention of staff across teams with the number of vacancies adding further pressure. This is a national picture across social care services. All key officers continue to meet weekly to progress the implementation, with the transfer of all social care calls and the implementation of the single referral form planned for Q1 of 2022/2023.

Corporate Risk R009 Information Management & Cyber Security Resilience

Owner: CLO Arwyn Morris

Description

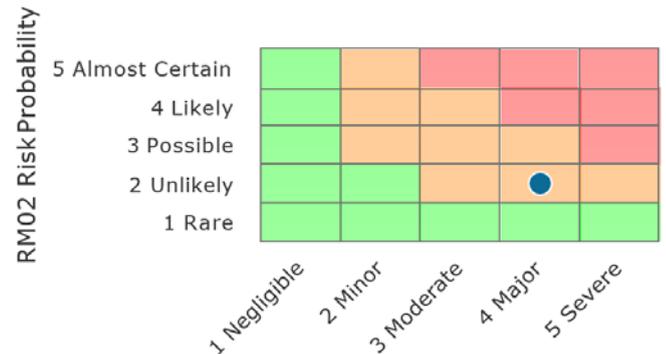
Failure to ensure that we have effective information and ICT, security and compliance in place, will impact on the Authorities ability to adapt to change, improve services and communicate effectively with citizens and other users of Council services.

Potential Consequence

Not having robust Cyber Security will impact on all service delivery with limited or no access to information systems that are key for business delivery. Inadequate Information Management processes and staffing awareness to manage personal data could result in data misuse/loss that could result in not complying with the General Data Protection Regulation and can cause distress to the person(s) data that has been mismanaged. Failure to manage all data within the law will result in a potential large fine from the ICO and reputational damage to the Authority. Digital services delivery will increase the demand for ICT services and potential cyber-attacks and must be sufficiently resourced in both staffing and infrastructure costs.

Evidence of Risk

- No major incidents from external cyber threats have been reported and minor attacks have been managed with no loss of service
- Continue to patch all ICT infrastructures to the required level and achieved PSN accreditation.
- No major data loss reported to the ICO.
- Continue to provide information awareness courses and proactively working with service areas to ensure that their data is appropriate and saved securely.
- Staffs have attended Cyber training to ensure that we maintain good level of security against increased levels of external attack risks.
- Compliance to GDPR is achieved and maintaining Privacy Notices and ensuring consent where required.



Mitigation Action	Due Date	Sep	Dec	Mar	Jun
R009T04: Continue with Data Audit across all service areas	31 Mar 2023				★
R009T05: Implement approved record retention schedule	31 Mar 2023				★
R009T06: Support all Service areas in developing Cyber Security Business continuity plans	31 Mar 2023				★

Comments (eg progress to date)

The Authority has undertaken a cyber exercise arranged by Welsh Government called "Bos's Phishing". Of the users that took part in the exercise, 77% acted appropriately on a suspicious email sent to them by not opening and deleting, 13% of users opened the email but did not click on the link and only 10% of the staff clicked on the link. Ceredigion was in the top quartile when benchmarked against all other Authorities. The staff that clicked on the link have undertaken additional cyber security training.

The rollout of O365 and Windows 10 is almost complete, and this provides additional security for the Authority through a secure cloud service.

The Schools' network has experienced disruption during Q1 due to a new web filtering service from PSBA. All Wales fixes are being applied and expect the service to be stable from September 2022 onwards.

Corporate Risk R015 Support Local Food Business, Maintain Safety

Owner: CM Carwen Evans

Description

Failure to make adequate frequent high risk premises inspections and timely inspections of new premises may provide inadequate support for businesses leading to poorer standards, impact on the business itself and the local economy. There is also a reputational risk if the Council does not meet its statutory responsibilities under the Food Safety Act 1990.

Potential Consequence

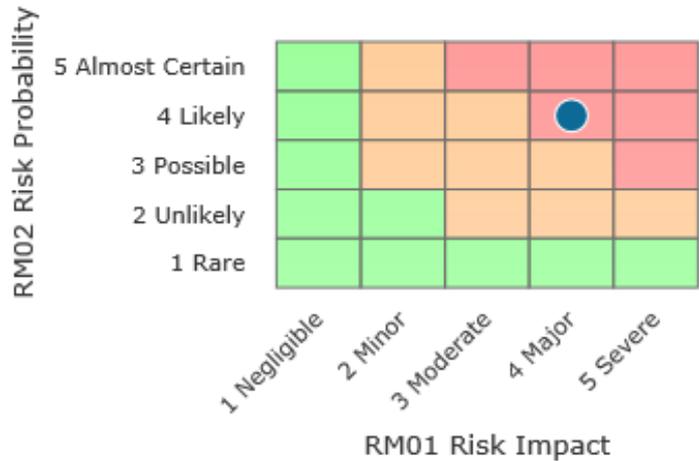
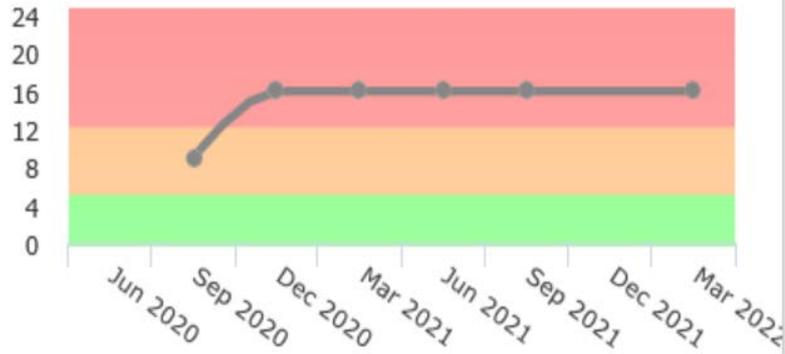
The main consequences for the Council are reputational, political and poorer service delivery for businesses and impact on citizens of the County. Food poisoning is the main risk which could potentially have a serious impact on citizens. This could lead to poor regulatory reports, intervention as well as loss of confidence in an important business sector impacting on the vitality and viability of the local economy.

Evidence of Risk

Inspections of food outlets were suspended during the initial phase of the pandemic, and whilst the inspection of high risk and new premises has recommenced, there is a significant backlog of inspections to be undertaken. The recruitment of food competent staff is also a considerable challenge. The Covid-19 pandemic compromised the ability of the Council to maintain its normal inspection programme. Experienced Environmental Health officers have been redeployed to undertake Covid related work such as advising residential care homes on infection control and contact tracing. Consequently, only new and high-risk businesses are being visited and those businesses where there are complaints or concerning intelligence about poor food safety standards. This situation is replicated across Wales, and the Food Standards Authority has published a recovery plan which sets out a phased return for all local authorities to return to a full inspection programme. The Council is working to meet the milestones set out in the recovery plan.

Mitigation

- R015T02: To prioritise food establishments that are deemed high risk and/or non-compliant
- R015T06: Upskill existing staff to become competent in undertaking food safety inspections
- R015T07: Undertake a procurement exercise to employ specialist contractors to provide extra resource
- R015T09: Develop & implement a service delivery plan to take account of demand & existing resources
- R015T10: Inspect all food establishments in accordance with the FSA recovery plan milestones



Comments (eg progress to date)

Two experienced Environmental Health staff continue to be redeployed to concentrate on the control and transmission of Covid-19 in Ceredigion. This has left fewer staff available within the Public Protection team to undertake food premises inspections. However, Category A, B and non-compliant premises (those deemed higher risk) as well as new food businesses are prioritised for inspection. A bid for additional funding for 2022/23 to strengthen the Public Protection team was not accepted by Council. The prioritisation of new businesses continues to be undertaken to ensure that resources are focused upon the higher risk premises. The authority continues to receive a high number of monthly new businesses registrations, which means this is an ongoing task. As high risk premises are prioritised this means that lower risk new premises are not being inspected. The Food Standards Agency recently undertook a remote assurance assessment which confirmed existing good practice, but also highlighted the need for Ceredigion to meet the milestones set out in the FSA recovery plan. A service delivery plan is being developed to accomplish this task. The service has 2 officers currently studying to become food competent officers (this can take up to two years to achieve). A further 2 are also being trained currently with a view of authorising them to undertake food inspections in due course. A procurement exercise was partially successful in employing contractors who supported the service in meeting the FSA recovery plan targets.

Corporate Risk R017 Safeguarding

Owner: CLO Sian Howys

Description

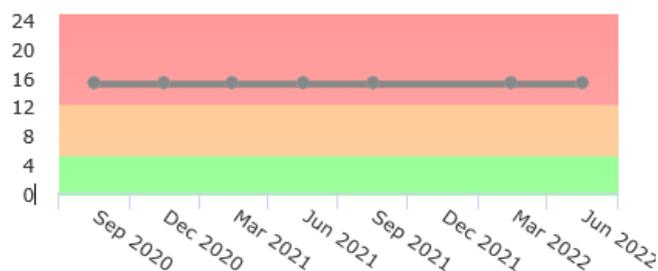
Risk of failure to maintain the organisation's statutory duties in relation to safeguarding children, young people and adults during the period of transition to the Integrated Service Delivery Model.

Potential Consequence

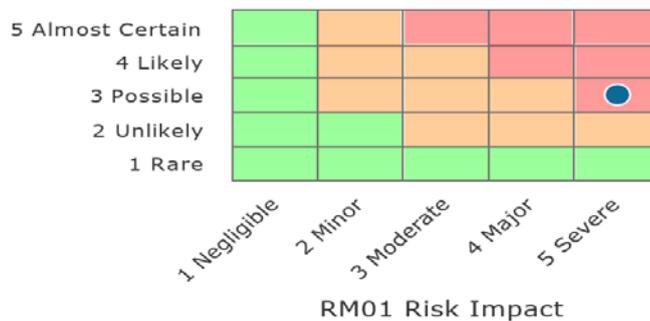
There is a risk that children, young people and adults may suffer significant harm which may result in a reputational, legal, and financial impact on the corporate body.

Evidence of Risk

• Increase in referrals due to legislative changes (SSWBA, VAWDASV) and impact of Covid-19 on individuals' and groups vulnerable to abuse and neglect • Increase in demand and complexity specifically in relation to children and families and young people • It is acknowledged this is a high risk area of work



RM02 Risk Probability



Mitigation Action	Due Date	Sep	Dec	Mar	Jun
R017T06: Maintain a fully Integrated Through Age Safeguarding Team	31 Mar 2023				●
R017T07: Ensure that safeguarding training and skills development is rolled out to all staff	31 Mar 2023				●
R017T08: Implement The Wales Safeguarding Procedures & Regional Practice Guidance across all teams	31 Mar 2023				●
R017T09: Regular monitoring/ reporting of safeguarding concerns/ activities to safeguarding forums	31 Mar 2023				★
R017T10: Active participation in Regional Safeguarding Board's activities from across the model	31 Mar 2023				★

Comments (eg progress to date)

Regular quarterly reporting on safeguarding activity continues on a fortnightly and quarterly basis to operational managers and in Welsh government returns along with Local Operations Group and Regional Safeguarding Board and Scrutiny and Cabinet and Leadership Group. The number of safeguarding reports regarding children at risk is at a higher rate than the previous year and the rate of reports regarding adult at risk remains high. The Safeguarding Procedures training programme for all staff has concluded with 2,000 staff trained. Compliance rates across services with the standards and expectations set in the Wales Safeguarding Procedures is monitored closely in the safeguarding performance reports. Representatives from across the TAW model and partner agencies actively participate in the Safeguarding Board's activities and will make safeguarding reports when necessary. The Corporate and Team Manager are in post in the Safeguarding Service. There are recruitment and retention challenges at Social Worker and Senior Social Worker level across all teams. Safeguarding processes have been aligned where possible for children and adults at risk and professional concerns in accordance with procedures.

Corporate Risk R018 Covid-19

Owner: CLO Alun Williams

Description

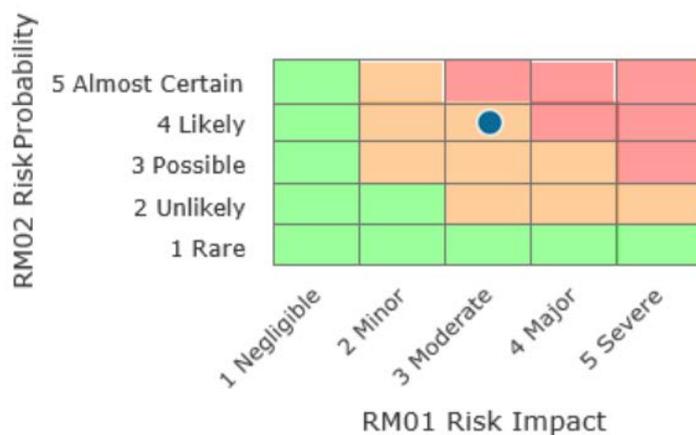
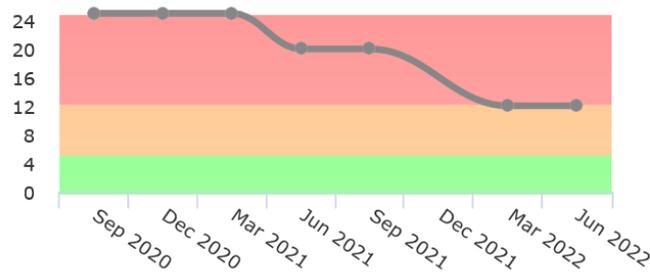
The effect of the spread of the Global Pandemic Covid-19 on the health of citizens including the increased demands on the Council's services, the effects of Lockdowns and relaxations as Government policy changes on a regular basis, the wider

Potential Consequence

High levels of infection, serious illness and excess deaths to the population, as well as a significant economic downturn, widespread disruption of service provision, and detriment to personal wellbeing. In addition, there may be an inability to fully assess or meet the needs of all our service users plus significant financial loss and increased costs, in the short and medium term, to the Council. This will impact on the delivery and sustainability of services by the Council and the ability to respond to the economic crisis and other challenges created as a result of the pandemic and indirect impacts of being able to respond to non-Covid emergencies. There is also the risk of safeguarding concerns not being reported or disclosed as well as increased levels of mental health issues. There is an increased conflict between restrictions to protect the population

Evidence of Risk

The UK went into lockdown on the 23rd March 2020 and twice thereafter. The Council shut down its offices, schools, and facilities. Services have restarted following the ending of restrictions. The residential care sector has seen measures relaxed and incidents of infection have diminished in seriousness as a result of regular immunisation and a less severe strain of Covid. Our school pupils have faced significant disruption to their education. Although pupils have returned to school there are still many logistical challenges in keeping them safe and healthy. So far, a high level of fatalities has been avoided and seems increasingly unlikely, however the arrival of new variants has complicated matters and is a cause of concern and the greatest risk facing us. Increased costs and reduced income arising from Covid19 including increased claimants (and associated cost) on Council Tax Support Scheme, Protective Equipment, IT equipment, additional pay and commissioned services, lost car park and leisure income and reduced Council Tax collection rates. WG have reimbursed the great majority of costs up until March 2022. Whilst staff absences are relatively low due to some extent to staff working from home, there has been an inevitable increase in workloads as we are in the recovery phase. The high level of vaccination in Ceredigion appears to have mitigated the impact of serious ill health. At the moment, it appears that the omicron waves of infection are receding, and Wales is in a "stable state", which means that many services are back to business as usual and the majority of restrictions ended. The risk of further variants remains high.



Mitigation Action	Due Date	Sep	Dec	Mar	Jun
R018T01: Comply and fully support National and Local Lockdown arrangements	31 Mar 2023	★	★	★	★
R018T03: To fully engage in regional emergency response and recovery arrangements	31 Mar 2023	★	★	★	★
R018T04: Effective communication with the Ceredigion public and stakeholders	31 Mar 2023	★	★	★	★
R018T07: Support the local economy and businesses through all phases of the pandemic	31 Mar 2023	★	★	★	★
R018T08: Work with others to implement testing, contact tracing and mass vaccinations	31 Mar 2023	★	★	★	★
R018T09: Implement an effective programme of staff well-being support and training	31 Mar 2023	★	★	★	★

Comments (eg progress to date)

Covid remains risk to the community and to the Authority. Although the Omicron virus is less serious than some of its predecessors, it has proved to be more transmissible, and rates have been at their highest levels in Ceredigion. The most recent indications are that the latest Omicron wave is gradually subsiding. The mitigations undertaken by the Authority and its partners have had positive effects in lessening the impact of the pandemic, with the roll out of periodic vaccination being particularly effective. Both UKG and WG have rolled back regulation and all restrictions have been lifted, resulting in Council services being reintroduced. Government funding has been significantly curtailed e.g. our contact tracing team has reduced from eighty members of staff to seven. Government policy has recognised that the Coronovirus has moved from a pandemic to an endemic stage, where we have to live with the virus circulating in our communities and workplaces. Nevertheless, there remains a risk and an expectation that a new variant will appear which could pose a serious threat to public health.

Corporate Risk R019 Climate Change and Coastal Erosion / Flooding

Owner: CLO Russell Hughes-Pickering / Rhodri Llwyd

Description

Climate change is one of the biggest environmental challenges we face. Although failure to meet carbon emission and energy reduction targets will have both financial and environmental impacts for the Authority, there are wider implications for the County as a whole e.g. increased instances of flooding, drought and storms, which carry a huge potential impact on our communities and the Council's Estate, which includes our buildings, schools, Nature Reserves, Parks, allotments and also other holdings which are not actively managed.

It is recognized that we must lead by example and do all we can to reduce future climate change and address and mitigate the risks associated with it. Policy initiatives and strategies to include for ecosystem resilience, biodiversity enhancements and flood reduction schemes must be developed and implemented if we are to succeed in reducing our carbon footprint and reducing the risk to our major infrastructure, assets, residents and communities and landscape.

Potential Consequence

Climate change means we may face more frequent or severe weather events like flooding, droughts and storms. These events bring 'physical risks' that directly impact communities and have the potential to affect the economy. Parts of Ceredigion's coastline are susceptible to coastal erosion and flooding, and some inland communities are at risk of flooding and loss of land from watercourses. The impacts could be far reaching, with stakeholders facing life-threatening or life changing consequences, and the effects impacting on large sectors of the County/Council.

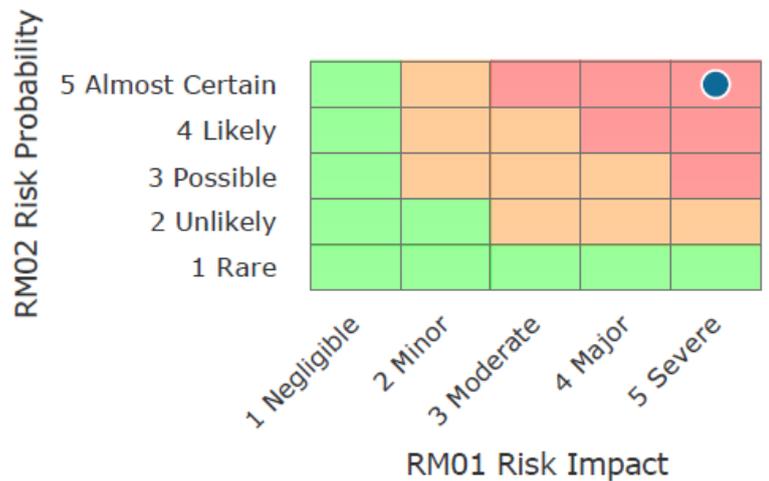
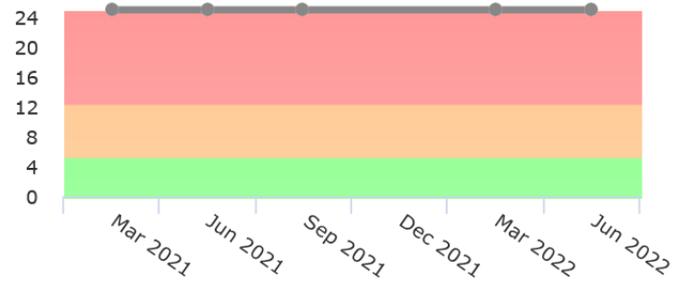
In addition, failure to reduce the effects of climate change could have reputational, financial and environmental consequences for the Council including in the form of financial penalties for failing to meet Welsh Government targets for carbon management and for biodiversity.

Indirect impacts will include changes to the insects, pests and diseases which will colonise and affect our environment. As well as immediate impacts of these, the impacts on staff time and other costs dealing with these will be significant.

Loss of canopy cover from Ash Dieback already has consequences for local microclimates and will exacerbate climate change impacts as well as contribute to them.

Evidence of Risk

Climate change is real and is happening across the world; it is impacting on local communities in Ceredigion. The West of Wales Shoreline Management Plan and Ceredigion's Flood and Coastal Erosion Risk Management Strategy has identified locations within the County which are at current and future risk from coastal erosion and flooding, and from main river/watercourse/surface water flooding. There is scientific evidence showing that in order to halt climate change, carbon emissions have to stop – reducing them is not sufficient, we need to go further and work towards becoming a net-zero local authority.



Mitigation Action	Due Date	Sep	Dec	Mar	June
R019T01: Develop a Corporate Climate Change Strategy	31 Mar 2023	●	●	●	●
R019T03: Increase the amount of energy generated from renewable sources.	31 Mar 2023	★	★	●	★
R019T04: Identify and manage the corporate estate	31 Mar 2023	●	●	★	★
R019T05: Develop Flood Alleviation Schemes	31 Mar 2023	★	★	●	●
R019T06: Monitor the coastline with the Wales Coastal Monitoring Centre, develop Coastal Defence	31 Mar 2023	●	●	●	★

R019T08: Apply for funding to implement projects which mitigate the effect of climate change	31 Mar 2023	
R019T09: Develop a Corporate ULEV Strategy, Action Plan and capital delivery programme	31 Mar 2023	
R019T10: Review and publish Active Travel Network Maps and associated capital delivery programme	31 Mar 2023	

Comments (eg progress to date)

The resources for developing a Corporate Climate Change Strategy have not yet been identified, although there are already a number of workstreams that will contribute to this/a future piece of work. e.g. Regional Energy Strategy and Energy Action Plan (in development), and also Local Area Energy Plans which will be undertaken in 2022/23. The 2021/22 Emissions are currently being calculated as there was a slight delay in the release of the new WG reporting guidance, so it is anticipated that annual emission figures will be ready by end of August/early September. An updated Net Zero Action Plan is being prepared and will be presented to Cabinet in November, this will include overall emissions (scope 1, 2 & 3), as well as providing an update on progress to date.

A draft Ceredigion Ultra Low Emission Vehicle (ULEV) Strategy has been developed with consultancy support and is scheduled to be presented to Carbon Management and Climate Change Group (20/06/2022) followed by Thriving Communities Overview and Scrutiny Committee considered (27/07/2022) seeking recommendation to Cabinet (06/09/2022) for adoption.

Phase 1 of the public charge-point installation delivery programme - funded through Welsh Government grant with installation in public car parks is scheduled to be completed by August 2022.

A successful application has been made for Phase 2 of the programme to the Office for Zero Emissions (OZEV) for grant funding, and we are currently awaiting confirmation of Welsh Government match-funding (25% of total scheme cost).

Funding of £300k secured during this Financial Year via a WLGA-administered Welsh Government capital grant to support transformation of Council's own vehicle fleet and associated infrastructure requirements – but this is clearly insufficient to bring about the required changes.

Active Travel Network Maps (ATNMs) were submitted on 31/03/2022 following a review of existing maps and public consultation, and which are currently awaiting Ministerial approval. Ceredigion County Council has been awarded £500k Active Travel Fund grant by Welsh Government/Transport for Wales in the 2022/23 Financial Year for scheme development and small scale projects. Safe Routes in Communities capital grant secured to fund development of a scheme in Llanrhystud to enable children to safely walk, cycle and scoot to school.

An application is being prepared for submission to UK Government for 'Cylch y Cardi Trail' under Levelling Up Fund 2 to upgrade and provide new sections for Ystwyth Trail (Aberystwyth to Tregaron) and Aeron Trail (Aberaeron to Felinfach) upgrade and new sections. Following on from the regional energy strategy work undertaken previously, work has been undertaken by Growing Mid Wales to develop a regional energy action plan, which is now in draft format and waiting feedback/comment from both Ceredigion and Powys. Work to develop a Local Area Energy Plans (LAEP) has commenced, with an initial stakeholder workshop being held in July. Further work will continue with the aim of a Ceredigion LAEP hopefully being in draft format by the end of the 2022/23 financial year.

Ceredigion are still working closely with Welsh Government Energy Service (WGES) to develop potential emission reduction schemes, this currently includes an additional PV array at Ysgol Bro Teifi, and also a potential replacement for the Penmorfa district heating scheme, as the current installation is nearing 20 years old. Also an EOI was submitted to WG for potential funding specifically for decarbonisation of heat in buildings, 33 buildings were put forward in all and it is anticipated that the grant application window will open towards the end of August. It is not currently known what the requirements will be, how much the funding will be for, or whether match funding will be required – we will assess once the application process opens.

A scheme to install PV over the car park in CR has been developed and was submitted for planning permission at the end of 2021/22, this scheme has the potential to reduce the site's electricity costs by up to £25,000pa at current prices, if electricity prices continue to rise, the savings could be significantly more.

The PSB Climate Change Working Group is looking at decarbonisation of heat in Aberystwyth and a potential district heating scheme which would provide heating and hot water to buildings at the University, Bronglais Hospital and Penglais Secondary School is progressing. Draft document should be received by September 2022.

Energy prices are rising significantly, we have been somewhat protected from electricity and gas prices thus far, however we are anticipating significant rises on 1st October at the time of the contract's annual price increase. These price increases mean that the business case for energy efficiency and emission reduction is better than ever, however the increased costs have the potential to have a knock-on effect on service delivery.

Flood and Coastal Erosion Risk Management (FCERM) grant has been approved for a programme for 2022/23 Financial Year, with schemes being developed for Llandre Village Flood Alleviation Scheme – Business Justification Case; Borth Leat Flood Alleviation Scheme – Business Justification Case; Capel Bangor Outline Business Case; and Talybont Outline Business Case.

Planning permission and a marine licence have been applied for in relation to the Aberaeron CDS, and a construction tender exercise completed, with construction expected to commence in late Autumn of 2022, whilst business cases are being developed for the potential schemes at Aberystwyth, Borth and Llangrannog.

WCMC continue to survey the defended coastline on behalf of CCC, and their use of technology is increasing the volume and accuracy of data than can be captured.

Corporate Risk R020 Ash Dieback

Owner: CLO Rhodri Llwyd

Description

Ash Dieback is the most significant tree disease to affect the UK since Dutch elm disease and will lead to the decline and death of an estimated 90% to 95% of Ash trees in the UK, with the Ash being widespread across Ceredigion. This includes outside of woodlands in the form of hedgerow and specimen trees along roads, other public rights of way (PRoWs) and in public spaces. Infection with ADB causes trees to become brittle, shed limbs, and subsequently they may fail. The structural changes to the timber in dying ash significantly increase the risk of failure.

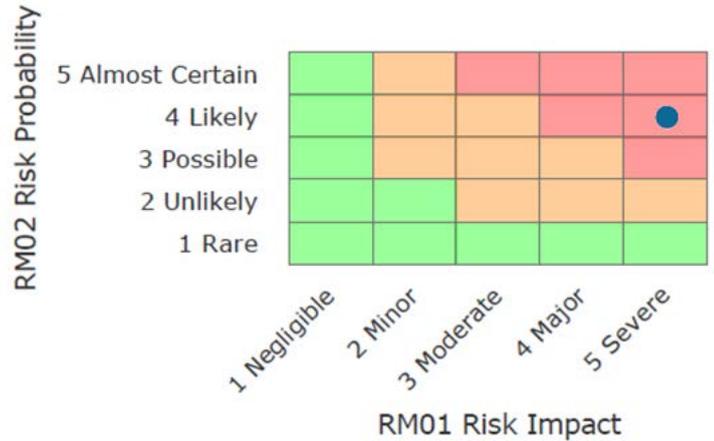
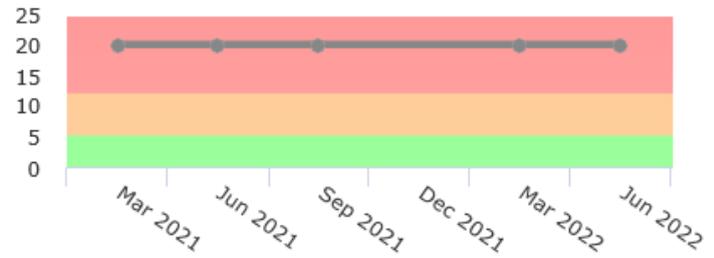
Ash Dieback is already having an impact on canopy cover across the county. It is estimated that there are 42,000 mature Ash trees along the county roads alone and a further 10,000 on the Council's Corporate Estate. Assuming a similar Ash tree density across all other public and private land including woodland and hedgerows, the impact of the loss of trees from Ash Dieback over the last 5 years and into the next 5 years on Ceredigion's carbon footprint, micro-climate and local impacts on climate change is significant.

Potential Consequence

There is the ongoing potential for death or injury as a result of Ash Dieback related accidents, to include risks to statutory functions or service delivery, with increased health and safety issues due to declining ash trees on roads, county parks, housing estates, schools, cycle ways, bridle paths and footpaths. Increased expenditure from direct and indirect costs as a result of Ash Dieback. Carbon emission from trees that fail/need to be removed will impact the Council's net zero carbon 2030 target, and a significant planting programme will be required over the next decade to compensate for the loss of ash trees. The loss of ecosystems provided by ash e.g. air quality, flood reduction, urban shading, increased noise levels and the loss of visual screens adjacent highways, carbon storage, carbon sequestration and habitat for biodiversity, and risks to protected species / sites through alteration and loss of habitat structure, stability and composition.

Evidence of Risk

Ash Dieback is already widespread and visible across the County. A national guide for the assessment of diseased trees using a system based on the percentage of live canopy cover has been established and is used to determine when action is necessary to address the risks posed by a tree's decline. It is recommended to take action when approximately 50% of the crown remains. Due to the scale of completing a survey across all council owned trees, a prioritised approach has been developed to ensure that the high-risk areas are principally surveyed first. To achieve this a qualitative risk analysis has been carried out which considers the likelihood of injury and severity for each service in the authority identified to likely be affected by ash dieback. Consideration has been given to variables such as the estimated quantity of ash trees, estimated number of users who use the service and for highways road speed and visibility. The ADAP estimates that the total cost to the Council of managing its Ash Dieback risk could be of the order of £9.4m over a 10-year period, with a further £20m required to deal with Ash trees on private land.



Mitigation Action	Due Date	Sep	Dec	Mar	Jun
R020T04: Undertake prioritised scheme of work to prune / remove trees as required	31 Mar 2023	★	★	●	★
R020T05: Seek Welsh Government and other funding opportunities to address the risk posed by	31 Mar 2023	●	●	●	●
R020T06: Undertake initial program of works to ADB affected trees in schools	30 Sep 2022				★
R020T07: Undertake in house surveying of prioritised areas for 2022 as set out in the ADAP	30 Sep 2022				★



Comments (eg progress to date)

The new contractor framework is currently with procurement, and options to utilize existing framework contracts already in place with other public sector organizations are being pursued in order that matters are progressed.

Work to trees on school grounds is to commence imminently through the existing NMWTRA framework to take place during the summer school holidays, with completion date of 5th September 2022.

Work is also proceeding in relation to issuing formal notices to landowners/managers responsible for trees on private land where these trees pose a risk to council owned property (e.g., schools) under Section 23 (Miscellaneous Provisions) of the Local Government Act 1976 requiring the owner to address the issues within a stipulated period.

Work to Council owned roadside trees continues and is being prioritized according to risk, with work to high priority trees and those on priority routes to be carried out using the existing NMWTRA framework as soon as possible until the new council framework comes online.

Work is continuing to identify the owners of roadside trees in private ownership, which is followed by the issuing of a formal notice under Section 154 of the Highways Act 1980 requiring the owner to address the issues within a stipulated period. This work is being done alongside that of instructing owners of private trees which are deemed to be a risk to the public/traffic where they overhang the highway.

The same approach is being taken to trees which are brought to our attention by enquiries from members of the public and this work is being carried out in parallel to trees identified surveying.

A surveying contract for A, B, C & Unclassified roads has been awarded to the contractor who conducted the previous ash dieback survey of A & B roads and Schools in 2021 in order to maintain continuity of data/approach.

The commencement of the 2022 survey is imminent.

Organizations such as Welsh Local Government Association and County Surveyors Society Wales continue to lobby Welsh Government for funding/support, but limited progress is being made - further work will be undertaken by the Ash Dieback Officer to identify opportunities to minimize costs and maximize return from tree/branch removal works.

Corporate Risk R021 Phosphates

Owner: CLO Russell Hughes-Pickering

Description

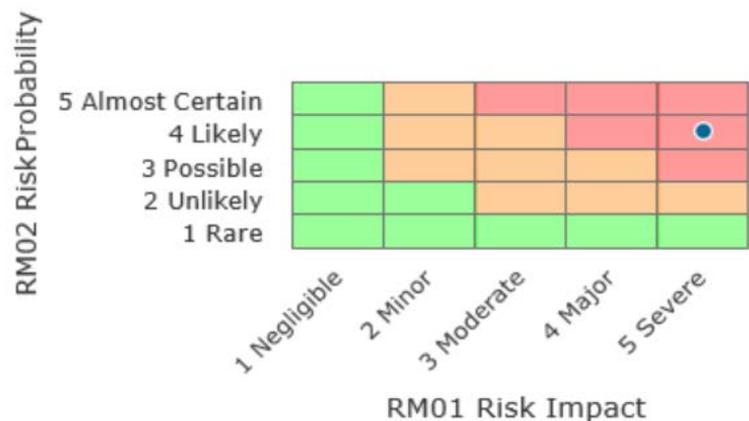
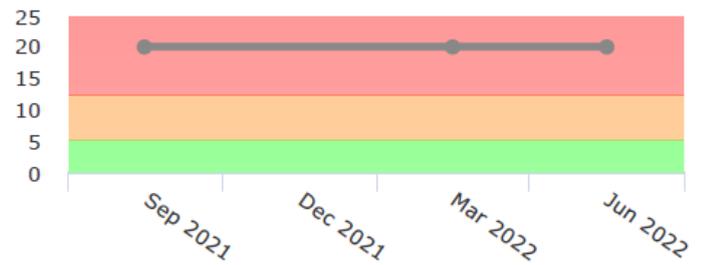
In Jan 21 Natural Resources Wales (NRW) published evidence of phosphate levels for riverine Special Areas of Conservation (SACs) in Wales, (including the Afon Teifi) accompanied by interim planning position guidance (updated May 21). The Council is the competent authority as defined in the Habitats Regulations and is required to have regard for advice when making planning decisions both for developments and the Local Development Plan (LDP). There is a phosphate impact on 50% of Urban Service Centre's and 14% of Local Service Centre's designated in the LDP. The total land affected of Ceredigion equates to 806 km² / 44.6% of the county. 14 allocated housing sites are constrained delivering potentially 572 homes of which 114 were expected to be affordable. There are significant issues relating to bringing development forward in this area. The area affected is expected to increase when further information and guidance is released in relation to the Marine SACs.

Potential Consequence

It is very likely that development across the County will be significantly constrained until measures can be implemented to mitigate the impacts of nutrients on riverine and marine environments. This could restrict the ability of the Council to deliver major elements of its Corporate Strategy, the Economic Strategy, the Local Development Plan, the 21st Century Schools Programme and key health and social care facilities. The situation is expected to worsen when data relating to Marine SAC assessments are released in 2022 which will have significant implications for the rest of the County.

Evidence of Risk

Nutrient monitoring by NRW has established that 8 of the 16 monitoring stations on the Afon Teifi are failing to meet their targets as set by the Joint Nature Conservation Committee (JNCC). Therefore, they are failing to meet the requirements of their conservation favourable status, potentially damaging the delicate eco systems which warranted its designation as a Special Area of Conservation (SAC). Such targets are also being monitored for other nutrients both on the Teifi SAC and on the marine SACs that encompass our coastline.



Mitigation Action	Due Date	Sep	Dec	Mar	Jun
R021T01: Ensure all applications, plans and projects are screened in accordance with NRW guidance	31 Mar 2023	●	●	★	★
R021T02: Raise awareness locally and nationally and identify ways to refine the guidance	31 Mar 2023	●	●	★	★
R021T03: Work at a sub national and national level through the working groups to identify solutions	31 Mar 2023	●	●	★	★
R021T04: Seek local solutions, learning from best practice elsewhere, utilizing council owned assets	31 Mar 2023	●	●	●	★
R021T06: Appoint candidate to regional NMB programme officer role	31 Mar 2023				●
R021T07: Continue to lobby for a 'Team Wales' approach including a national mitigation list and data	31 Mar 2023				●
R021T08: Consider local solutions such as Private Treatment Plants and working with DCWW	31 Mar 2023				●

Comments (eg progress to date)

Ceredigion County Council have been pivotal in steering the discussions around an all-Wales solution approach and are pleased to note a number of lobbied for suggestions have been included in the WG 8-point action plan. So, whilst progress regionally has slowed, this is due to the fact much of the work sub regionally has been adopted at a national level and thus working at this scale will save local resources.

The announcement of much lobbied financial support means it is hoped the Nutrient Management Board Programme Officer post can be advertised shortly and the stakeholder and technical officers group engagement can progress at pace.

Cyngor Sir CEREDIGION County Council

Report to:	Governance and Audit Committee
Date of meeting:	27 September 2022
Location:	Council Chamber / Remotely Via Video Conference
Title:	Ceredigion County Council Draft Self-Assessment Report 2021/22
Purpose of the report:	To review and make recommendations on the Draft Self-Assessment Report
Cabinet Portfolio and Cabinet Member	Leader of the Council - Policy and Performance, Partnerships and Democratic Services

Background

Part 6 of the **Local Government and Elections (Wales) Act 2021** introduced a new Self-Assessment based performance regime for Principal Councils.

The new performance regime is intended to build and support a culture in which councils continuously seek to improve and do better in everything they do, regardless of how well they are performing already. It is the expectation of the Act that councils will always be striving to achieve more and seek to ensure best outcomes for local people and communities. One way of doing this is to continuously challenge the status quo and ask questions about how they are operating.

There are 5 specific duties for Councils introduced by the Act:

- Duty to keep performance under review
- Duty to consult on performance
- Duty to report on performance
- Duty to arrange a Panel Performance Assessment
- Duty to respond to a Panel Performance Assessment

The Act sets also out the integral role that the **Governance and Audit Committee** play in the Self-Assessment Process. This role involves the Committee:

- Receiving the Council's draft Self-Assessment Report
- Reviewing the draft Self-Assessment Report and making recommendations on the conclusions or actions the Council intends to take

- Receiving the final Self-Assessment report when it is published, including commentary on why it accepted or did not accept the recommendations made by the Governance and Audit Committee.

Governance and Audit Committee received a presentation and report on the development of the new Self-Assessment process at its meeting on 6th June 2022.

Current Position

The Draft Self-Assessment Report has now been produced and is attached as Appendix 1 for the Committee’s consideration.

The Report has been developed by assessing a wide variety of evidence including internal reports and reviews, external regulatory and inspection reports and crucially engagement and consultation activities. The Council adopted a set of key questions or “Key Lines of Enquiry” to ensure the process is focused on outcomes, the organisation-wide view of performance and is evidence-based. Workshops were run during June and July with Members and Officers of the Council to identify current performance, the opportunities that exist for improvement and the specific actions we intend to take. The Council’s approach to conducting Self-Assessment is outlined on pages 9-12.

Although the Self-Assessment Report is the key output from the process the work on improving outcomes is an ongoing year-round activity. Throughout the year we conduct consultation in support of self-assessment, we collate evidence to inform the workshops, we deliver the actions in our Self-Assessment action plan and we monitor their progress towards completion.

It is important to note that the Report discharges the requirements of both:

- The Local Government and Elections (Wales) Act 2021 – the duty to report on performance
- The Well-being of Future Generations (Wales) Act 2015 – to set and review progress against our Corporate Well-being Objectives

Next Steps

The Draft Self-Assessment Report will be updated based on the recommendations of the Governance and Audit Committee, and the final version will be reported to its next meeting on 17th November.

Timetable:		
Draft Self-Assessment Report	Governance and Audit Committee	27 September
Self-Assessment Report	Governance and Audit Committee	17 November
Self-Assessment Report	The Auditor General for Wales His Majesty’s Chief Inspector of Education and Training in Wales The Welsh Ministers	17 November
Self-Assessment Report	Cabinet	6 December

Self-Assessment Report	Council	15 December
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Recommendations (s): That Governance and Audit Committee review the Draft Self-Assessment Report and make recommendations on the conclusions or actions the Council intends to take

Reason for decision: To ensure compliance with Part 6 of the Local Government and Elections (Wales) Act 2021

Appendices: Appendix 1 - Draft Self-Assessment Report 2021/22

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Date: 31st August 2022

**Mae'r ddogfen hon hefyd ar gael yn Gymraeg
This document is also available in Welsh**

2021/22

SELF-ASSESSMENT REPORT

Annual Review of Performance and
Well-being Objectives



Cyngor Sir
CEREDIGION
County Council



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INTRODUCTION

From the Leader and Chief Executive of Ceredigion County Council

Welcome to Ceredigion County Council's first Self-Assessment Report. This report reviews our performance and progress towards delivering our Well-being Objectives in 2021/22.

The Local Government and Elections (Wales) Act 2021 introduced a new performance management regime for local authorities based on self-assessment.

Put simply, self-assessment is about local authorities being self-aware of how they are performing, where they need to improve and ensuring services are sustainable in the future. It is an ongoing process of learning and delivering year-on-year improvements.

These principles are not new to Ceredigion County Council. We have long been using self-assessment as a tool to reflect on how we are doing things now, and how we can deliver improvements or provide greater efficiency. Some examples of this are the pioneering Through Age Programme that is transforming the delivery of social care in the County, the innovative use of our resources during COVID-19 to provide an effective

response to the pandemic that saw Ceredigion remain one of the safest parts of Wales, and the transformation of the way we interact with our customers through our contact centre "CLIC" to provide a better customer experience.

We conducted our most recent Self-Assessment in the summer of 2022, looking at a wide range of evidence, regulatory reports and extensive consultation feedback. It confirms that Ceredigion County Council continues to perform above its stature and makes good use of the resources it has available, despite the challenges faced in recent years such as extensive budget cuts and the COVID-19 pandemic.

However, there are always opportunities for improvement and self-assessment has helped us identify key actions over the next year that will help to drive better outcomes for the county and its citizens. We will be conducting further consultation with citizens, businesses, Council Staff and Trade Unions over the coming months to capture further views on how we can improve

performance and we look forward to hearing your thoughts.

A key part of reviewing our performance is the progress in delivering our Well-being Objectives in 2021/22. These Objectives focused on supporting our citizens and businesses during the COVID-19 pandemic. Despite the challenges we have faced, progress has been good and this report highlights a number of key achievements across all eight Objectives.

Following the local elections in May 2022, we are in the process of reviewing our Well-being Objectives to reflect the ambitions of the new administration, the priorities for the County as identified in the Ceredigion Assessment of Local Well-being, and the views of our citizens. The Council's new Corporate Strategy for 2022-27 will set out our new Corporate Well-being Objectives and our ambitions for the future.

We hope you find this report informative and a useful way to keep in touch on our performance improvement journey.



Councillor Bryan Davies
Leader of Ceredigion County Council



Eifion Evans
Chief Executive of Ceredigion County Council

SUMMARY OF 2021-22 PERFORMANCE

We have learnt a great deal from producing our 2021/22 Self-Assessment Report. The exercise has brought together a wide variety of evidence to assess our performance and review our Well-being Objectives. It has also highlighted and focused our attention on the challenges we face. These are important because we need to continue to adapt to meet these challenges in order to ensure our services are sustainable and continue to identify opportunities to raise performance levels, identify efficiency savings, or both.

There are seven themes that we assess ourselves against, which are:

- Exercising our functions effectively
- Using our resources economically, efficiently and effectively
- Ensuring our governance is effective
- Innovation and creativity
- Collaboration
- Involvement
- Risk Management

These themes are derived from a combination of the Statutory Guidance on the Local Government and Elections (Wales) Act 2021 along with the Sustainable Development Principle. They reflect the seven core activities of public bodies as defined in the Well-being of Future Generations (Wales) Act 2015. For each theme we assess whether we have plans and objectives in place, whether those plans and objectives are being delivered and whether they are sustainable over the longer-term.

A summary of the findings and scores from each are shown on the following pages. The scoring system is aligned to the Council's Annual Governance Statement for consistency. It provides a Red-Amber-Green scale to indicate where performance is good and where further action needs to be taken.

Exercising Our Functions Effectively

The Council has many strategies in place to support and help deliver the Council's Corporate Wellbeing Objectives. These include the Medium-Term Financial Strategy, the Through Age Well-being Strategy, the Economic Strategy and the Tackling Hardship Strategy. Progress in delivering these strategies has also been good. One key example from 2021/22 is the signing of the Mid Wales Growth Deal to bring a combined investment of £110m to the Mid Wales region.

Priority setting is also considered to be strong and positive work with the Council's new administration has been taking place to develop a new Corporate Strategy and Corporate Well-being Objectives for 2022-27.

The Council has an ambitious vision for the future, and the overall assessment is that the strategies in place are sustainable and consider the short, medium and long-term context.

However, like all local authorities, there are challenges to delivering these ambitions. There is limited capacity and resources available whilst demand from customers continues to grow. While the Council has a track record of innovation and creativity in service delivery and seeking new ways of working, it is recognised that managing expectations on services is also important as we move forward. We have learnt from previous experience with other projects that developing a Communications Strategy is one way in which this can be managed and we will aim to put this in place over the next year.

Overall, it has been a positive start to our performance journey post COVID-19 when performance management was restarted. However, we recognise there is a lot of work to do around strengthening performance management and realising the benefits that

SUMMARY OF SCORING BY THEME

Does the Council have a set of corporate and service strategies in place which set out the Council's vision and priorities?

Are these strategies delivering their aims and objectives?



Are Service Business Plans delivering their objectives and performance targets?

Are these strategies sustainable in adapting to the future needs of the organisation?

Does the Council have an effective performance management framework and democratic scrutiny in place to support delivery of the Council's vision and priorities?

Are these strategies sustainable in adapting to the future needs of the organisation?

Does the Council have comprehensive strategies in place for Workforce Planning, Financial Management, Procurement and Asset Management?



Are these strategies delivering their stated aims and objectives for Workforce Planning, Financial Management, Procurement and Asset Management?

can bring. The first step is bringing together a new Performance Management Framework that sets out the overall approach and standardised processes for managing performance in the Council, including the new Self-Assessment process.

It is also recognised that access to benchmarking data needs to be improved nationally. The current lack of data could mean opportunities to learn from best practice are missed. We are therefore actively engaged in a collaborative piece of work with Data Cymru and all 22 principal councils nationwide in developing a new set of national performance measures to support the performance requirements of local authorities. This longer-term action will be invaluable in helping to communicate performance and aligns with our long-term aim of becoming more performance and data-driven.

We recognise that we need to monitor the impact of emerging challenges to understand and mitigate their impacts. These challenges include the cost of living crisis, poverty, the war in Ukraine and welcoming refugees, changes to the Northern Ireland Protocol and the longer-term impacts of COVID-19.

Using our Resources Economically, Efficiently and Effectively

The Council has strategies in place for the core activities of the Council - workforce planning, financial management, procurement and asset management. The overall position is assessed as being good particularly in relation to financial management. Regulatory reports are positive, for example Audit Wales issued an unqualified opinion on the Council's accounts.

The financial resilience of the Council is a strength, particularly when assessing the sustainability of services. The Council also has a Medium Term Financial Strategy in place and a balanced budget was delivered in 2021/22.

However, we recognise that further work is required to maximise the expenditure and impact of the capital programme, and we plan to develop this over the next year.

Our learning has also shown that we need to ensure we update key strategies over the coming twelve months. These include the Asset Management Plan setting out how we maintain our property portfolio. This is important in moving forwards in ensuring we make the best use of our physical assets. In the last year the Council has made good and innovative use of its buildings to support new ways of working, and the plan will help in developing opportunities for those buildings no longer needed and in repurposing them for other uses or the delivery of improved services.

Procurement practices have also been strengthened recently through the corporatization of the procurement process, but will be updated to support local businesses and the local economy, and to ensure the Council provides value for money in the use of its financial resources.

The other key challenge is the update of our Workforce Plan. We recognise the challenges around recruitment and retention that are being experienced across the whole of Wales. This is important because recruitment to key posts is essential to delivering our ambitions.

Following the COVID-19 pandemic, the Council has been building on its experiences to change the way it works through a new 'hybrid working' model, which provides more agile and mobile ways of working for staff, a better experience for customers and which is also environmentally and financially sustainable.

As a result, we are planning to review and update our Workforce Plan to ensure we

Does the Council work productivity with its external regulators and demonstrate good compliance?

Does the Council have a comprehensive local code and governance framework in place for maintaining the corporate governance of the organisation?



How effective is the code and governance framework applied and observed?

develop and support an agile but effective workforce to support future needs.

Ensuring our Governance is effective

Overall, the evidence shows that the Council's governance arrangements are robust and supporting the work of the Council in improving outcomes for residents. The Annual Governance Statement, Governance Framework and Code of Local Governance are in place and relationships with regulators are productive.

Internal and external regulator reports evidence this - the most recent review of the Council's Governance Review conducted in March 2022 provides assurance that the procedures are robust, focussed and effective. Further details are available in the Council's Annual Governance Statement.

Key to assessment

- **Good** - overall considered to be good and meets best practice no further action required
- **Acceptable** minor adjustments may be required
- **Satisfactory** - Action required (before end of year 9-12 months)
- **Below satisfactory** - urgent Action required (within 3-6 months)
- **Unacceptable** - Immediate action required

SUMMARY OF 2021-22 PERFORMANCE

Long-term Innovation and Creativity

One of the Council's strengths is its long-term innovation and creativity. The Council has a track record of embracing new ways of working and identifying new ways of delivering services to provide an enhanced customer experience, efficiency savings, or both.

There are many examples of this, the most high profile of which is the Through Age Well-being Programme which is transforming social care in Ceredigion. This is in response to the changing demographics of the County which has seen increased demand and greater financial pressure on services. Providing support for all ages and needs is a significant challenge for the Council with limited resources.

The Through Age Well-being Programme has progressed well and we will continue to push forward with transforming how people's health, wellbeing and safety are supported in Ceredigion. The programme improves outcomes by maximising people's independence and enabling them to remain in their own home and in their own community wherever possible.

There are many examples of innovation from 2021/22, most notably the way in which the Council responded to COVID-19 pandemic, which included the use of new technology to support council staff to work from home and continue providing services, the setting up of the Test Trace and Protect Service which was the first of its kind in Wales, and the emergency command procedures which provided an effective mechanism for the management of the organisation during the pandemic.

More recently is the creative and innovative work in the repurposing of the Council's leisure centres by moving towards Well-being Centres across the County. The Centres will enhance the core offer of leisure provision with areas for meeting, consultation and treatment to contribute to improve the physical, mental and social well-being of the County's residents.

The Council's major restructuring of all service areas is another example of embracing innovation and creativity to provide sustainability over the longer-term. It has taken a number of years to complete the process to create a structure that supports the needs of the organisation moving forward and which has also resulted in £50m of savings since 2012. It is recognised, however, that the Council could do more to promote the transformation of the Council and communicate the benefits of these activities to its customers and stakeholders.

Collaboration

Overall, the Council is proactive in engaging in local, regional and national partnerships. There are good examples of where this collaborative working is improving outcomes such as through Growing Mid Wales, the Mid Wales Education Partnership, the response to COVID-19 and the delivery of the ground-breaking Maes y Môr extra care housing development in Trefechan with Wales and West Housing Association.

However, there is a strategic direction towards focusing on engaging with those partnerships which are beneficial for the people and communities of Ceredigion, where demonstrable benefits are derived. The Council proactively engages in these partnerships and challenges the value of the arrangement if not, pursuing alternative arrangements where necessary. This proactive approach to assessing the value of collaborative working is recognised as essential to maximising the impact of collaborative working and improving outcomes for local people.

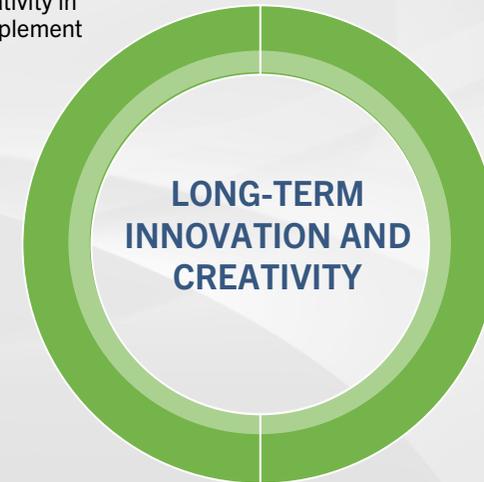
Involvement

The Council has an Engagement Strategy in place but some events over the last two years have been compromised by COVID-19, which has affected our ability to do as much engagement and consultation as we would like.

There are some good examples of engagement

SUMMARY OF SCORING BY THEME

Does the Council embrace innovation and creativity in its activities and implement transformation?



How effective has Council transformation projects been in identifying and implementing creativity and innovation across the organisation?

Does the Council proactively engage in local, regional and national partnerships?



How effective are the partnerships in which the Council is invested in delivering their aims and objectives?

and where the results have been used to drive changes. For example, consultation on the use of the Safe Zones during the COVID-19 pandemic produced over 2,000 responses and changes were made to some of the town layouts in response.

The new Economic Strategy that sets out how we will work together towards achieving strong, sustainable and more resilient economic growth involved targeted consultation with citizens, businesses and specifically younger people who are often under-represented. These produced valuable feedback that was used to help shape the final version of the Strategy that has subsequently been approved and is in the process of being implemented.

The findings of the Regional Well-being Survey during 2021 highlighted the way in which some challenges have come to the fore during the COVID-19 pandemic, such as tackling poverty, housing affordability and digital connectivity. This has been instrumental in helping to develop the Council's new Corporate Well-being Objectives.

Overall, engagement and consultation is considered to be good in some areas, but there are areas where further work is needed. For example, the quality of Integrated Impact Assessments is mixed.

However, our immediate action is the updating of the Engagement and Participation Strategy to add the new decision making and participation elements required by the Local Government and Elections (Wales) Act 2021. The new Strategy will set common standard across the authority and will help ensure that all communities in Ceredigion have a voice, and that we actively seek the views and lived experiences of those groups whose voices are seldom heard.

Risk Management

The management of risk in the Council has been developing well over the last three years and is

considered robust. Delivery of the 44 mitigating actions is good and the Council's Corporate Risk Register is a 'living' and evolving document as risks change and new risks emerge.

We also have a good relationship with our insurers, training has been conducted with all managers and the last review of the Risk Management Policy and Framework was found to be satisfactory.

The next step in our risk management journey is to conduct the three yearly review of the process in the final quarter of 2022/23. This involves looking at best practice to ensure our arrangements remain up to date and fit for purpose.

The Action Plan

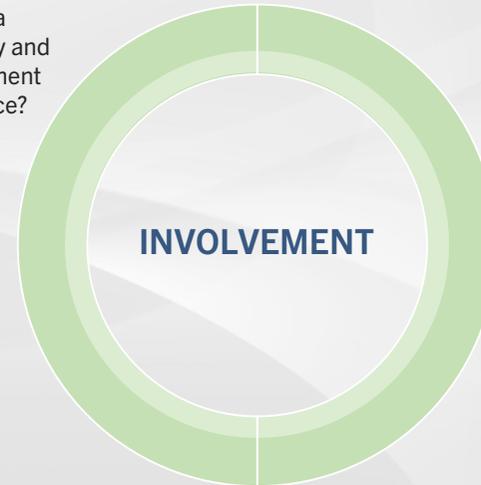
In response to these findings, we have identified a number of opportunities for improvement. Through consultation with Council services and elected Members, the actions we propose to take in response to this learning are contained in the action plan overleaf and in services' business plans where they are more operational in nature.

Most of these actions will be delivered over the next twelve months and progress reported in the 2022/23 Self-Assessment Report. Some are longer-term actions and will extend beyond the next year, but all actions will continue to be monitored through to completion.

We have prioritised the actions in order to lay the foundations for future work across the seven themes by ensuring the essential building blocks of our key lines of enquiry are met before developing further. We have already identified a list of emerging actions that we will reassess during the coming year and move into the live action plan if and when appropriate.

SUMMARY OF SCORING BY THEME

Does the Council have a comprehensive strategy and action plan for engagement and consultation in place?



How effectively does the Council use engagement and consultation feedback to review and improve its services?

Does the Council have a comprehensive strategy and framework in place for managing risk?



Are these strategies delivering their aims and objectives?

Are these strategies sustainable in adapting to the future needs of the organisation?

OPPORTUNITIES FOR IMPROVEMENT - OUR ACTION PLAN

Action	Description	Timescales	Rationale/How this will improve outcomes
Exercising its functions effectively - how well is the Council delivering improved outcomes for people in the local area?			
Deliver Workforce Plan to ensure the Council has a sustainable and qualified workforce	Update the Workforce Plan to address key issues including recruitment, retention and succession planning to ensure stable staffing levels, a sustainable workforce and that vacant posts are filled with appropriately qualified staff. The Workforce Plan to be aligned with the Council's new Corporate Strategy for 2022-27.	2022/23	<ul style="list-style-type: none"> • Ensures vacant roles are filled by appropriately qualified and experienced staff to provide a high quality customer experience and level of service • Ensures that capacity exists in services to provide quality services • Ensures the sustainability of services over the longer-term • Allow us to identify and respond to changing customer needs • Improves employee recruitment and retention • Improves productivity and quality of service
Using its resources economically, efficiently and effectively - How well does the Council use and manage its resources? Is it delivering economy, efficiency and effectiveness?			
Deliver Asset Management Strategy that implements new ways of working for the staff of Ceredigion County Council and improves the customer experience	Update the Asset Management Strategy to reflect current issues, in particular supporting new ways of working and taking advantage of the opportunities that exist post COVID-19 to ensure sustainable and high quality services	2023/24	<ul style="list-style-type: none"> • Provides an updated and long-term strategy to manage the Council's physical assets • Ensures efficient and effective use of council assets (funds, land, buildings, staff and information communication technology) • Supports new ways of working post COVID-19 including the rationalisation of assets • Provides a strategy to release efficiency savings and potential new income streams • Ensures the Council's approach to asset management is fit for purpose and that services are sustainable • Supports more joined-up and high quality services
Ensure capital expenditure is maximised and utilised	Develop monitoring system to enable the Council to make full use of its capital resources and increase the proportion of capital expenditure in each year	2023/24	<ul style="list-style-type: none"> • Ensures the Council's Capital Programme is delivered and spend maximised • Supports partnership working with the Welsh Government on capital projects • Supports the delivery of the Council's vision and Corporate Well-being Objectives • Supports the reduction of long-term costs and increases in productivity • Along with the revenue budget provides the resources to meet the delivery of the services' business plans

Action	Description	Timescales	Rationale/How this will improve outcomes
Support local businesses and the local economy through implementing the updated Procurement Strategy	Update the Council's Procurement Strategy to support local businesses and the local economy, and to ensure the Council provides value for money in the use of its financial resources	2023/24	<ul style="list-style-type: none"> • Ensures procurement practices are up to date and fit for purpose • Helps to achieve value for money by ensuring the Council spends its financial resources economically, efficiently and effectively • Supports the identification of efficiency savings and eliminates waste • Delivers savings by capitalising on the savings achievable through greater buying capacity of Local, Regional and National Frameworks • Maintains high ethical standards of investment and purchasing • Maximises the contribution towards sustainable development through the procurement of sustainable solutions • Supports the delivery of the Council's vision and Corporate Well-being Objectives • Supports local businesses, supply chains and development of the local economy
Deliver Phase 2 of the Through Age Well-being Programme to transform social care in Ceredigion	Monitor and review progress of the Through Age Well-being Programme to ensure delivery of services that will deliver the outcomes of the programme and enhance the social, economic, environmental and cultural well-being of the people of Ceredigion	2022/23	<ul style="list-style-type: none"> • Manages the increased demand and financial pressures on services to provide sustainable services in the future • Ensures people get the right level and type of support at the right time • Promotes positive health and Well-being and support people to self-support • Strengthens families so that children and young people remain with their family • Enables individual to live independently in their own community • Provides proportionate approaches to managed care and support • Protects individuals and keep them safe from abuse, harm and neglect
Involvement			
Provide a standardised and effective method of engagement and participation across the Council and ensure the Council engages with the people of Ceredigion in the best and most appropriate way	Publish the new Engagement and Participation Strategy to improve engagement and participation opportunities for Ceredigion's citizens and stakeholders	2022/23	<ul style="list-style-type: none"> • Provides a standardised and effective method of engagement and participation across the Council • Ensures the Council engages with the people of Ceredigion in the best and most appropriate way • Keep up to date with best practice in the field of engagement and consultation • Citizens and stakeholders are involved in the decision making process and in shaping Council services • Ensures Council resources are directed to priority areas, such as the current cost of living crisis, as identified through engagement and consultation. • Ensures that the voices of all those in Ceredigion are heard

WHAT IS SELF-ASSESSMENT?

The Local Government and Elections (Wales) Act 2021 introduced a new process for monitoring the performance of all local authorities, based on self-assessment.

The new performance regime defines principal councils as 'self-improving organisations' through a system based on self-assessment and panel performance assessment. The new approach is intended to build on, and support, a culture in which councils continuously challenge the status quo and ask questions about how they are operating and how they can learn from best practice. A transparent and open self-assessment of a council will form a fundamental part of this approach.

Effective self-assessment provides reliable assurance both internally and externally to regulators and inspectorates and above all helps councils to continually learn and achieve sustainable improvement and better outcomes for citizens, service users and their own workforce.

There are five specific duties introduced by the Act:

- 1. Duty to keep performance under review**
Ceredigion County Council has a duty to keep under review the extent to which it is fulfilling its 'performance requirements by determining the extent to which it is:
 - Exercising its functions effectively
 - Using its resources economically, efficiently and effectively
 - Ensuring its governance is effective for securing the above
- 2. Duty to consult on performance**
Councils must consult a range of people at least once in every financial year about the

extent to which they are meeting their performance requirements. The statutory consultees are:

- Local people
 - Other persons carrying on a business in the County
 - The staff of the Council
 - Every Trade Union which is recognised by the Council
- 3. Duty to report on performance**
The Council must produce a self-assessment report each financial year. The report must set out its conclusions on the extent to which it met the performance requirements, and any actions it intends to take, or has already taken to further improve.
 - 4. Duty to arrange a panel performance assessment**
At least once in each election period, the Council must arrange for an independent panel to undertake an assessment of the extent to which the council is meeting the performance requirements and report its results.
 - 5. Duty to respond to a panel performance assessment**
The Council must prepare a response to a Panel Assessment Report setting out
 - The extent to which it accepts the conclusions in the report
 - How it intends to follow any recommendations
 - Any further actions the Council intends to take to improve performance

The purpose of the performance and governance provisions in the Act is to build on and support a developing culture in which councils actively seek and embrace challenge, whether presented from within the council, for example through scrutiny procedures, or externally. The provisions are designed to develop a framework which supports councils, through an ongoing process of review, to think about their performance and effectiveness now and for the future; to encourage more inquisitive organisations willing to challenge themselves to do more; and to be more innovative and more ambitious in what they do.

Reflective Practice

For Ceredigion, the principles of self-assessment already form an integral part of its ongoing strategic and corporate governance arrangements.

We recognise the opportunity for self-reflection and constructive challenge. For example, this form of reflective practice is already an integral part of the Council's Business Planning and Annual Governance Statement, and already well-established in the Council. Reflective practice is a core element of the Council's overall performance management process, and focuses on evaluating *how we do things* and not just *what we do*.

We have taken a similar approach with Self-Assessment - reflective practice forms a key part of our Self-Assessment Workshops where we reflect on how we are currently operating, the challenges we face in the future and how we build sustainability into our activities moving forward.

The Local Government and Elections (Wales) Act came into force in 2021

The Five Duties on Principal Councils are:

KEEP PERFORMANCE UNDER REVIEW

CONSULT ON PERFORMANCE

REPORT ON PERFORMANCE

ARRANGE A PANEL PERFORMANCE ASSESSMENT

RESPOND TO A PANEL PERFORMANCE ASSESSMENT

HOW WE CONDUCT SELF-ASSESSMENT

Our Approach to Self-Assessment

Our approach to Self-Assessment is based on assessing ourselves against a set of Key Lines of Enquiry. "KLOEs" as they are sometimes referred to, are a series of relevant key questions that we ask ourselves as we work through the Self-Assessment.

The Key Lines of Enquiry approach is a tried and tested approach to conducting self-assessments in Local Government and across the wider public sector. It ensures we remain focused on the corporate or 'holistic' view of the Council's performance as required by the Act. It also provides the clarity of self-evaluation needed to help us identify opportunities for improvement, and in doing so, provides a strong audit trail to explain the actions we have undertaken in response.

The findings are recorded in our Self-Assessment Matrix document. The Matrix records the evidence demonstrating how we are currently performing, our ambitions for the future and the actions we need to take in order to achieve those ambitions. This document is used to identify the opportunities that exist for improvement and is used to develop our Self-Assessment Action plan. The Self-Assessment Matrix is available on request.

Continuous Cycle

Self-Assessment is an ongoing process of improvement - throughout the year we conduct consultation in support of self-assessment, we collate evidence to inform our workshops, we deliver the actions in our Self-Assessment action plan and we monitor their progress towards completion. The Self-Assessment Report is the key output from the process but the work on improving outcomes

is an ongoing year round activity.

The diagram below summarises the main steps and timescales involved in conducting the Self-Assessment and the production of the Self-Assessment Report.

Evaluation, Reflection and Identifying Opportunities

During April each year we bring together a wide variety of evidence to help us in assessing our current performance. This includes internal performance monitoring, regulator reports from inspections and the results from consultation and engagement activities. We undertake an exercise of reviewing the evidence to identify key findings - where performance has improved, where there are opportunities for improvement and what the key themes are from our consultation.

The findings from this exercise are presented to Self-Assessment Workshops with the Council's Leadership Group and Overview and Scrutiny Coordinating Committee to help in assessing our performance.

The workshops are where we re-assess ourselves against the Key Lines of Enquiry, updating our evidence for each question and using this to identify actions for improvement. They review the evidence available to them and add their own perspective to provide updated scores for each question.

The findings workshops are collated by the Performance and Research Team. They produce the draft Self-Assessment Report by drawing on the evidence matrix, scores and the improvement actions identified in the workshop, along with other key sources such as key strategies and inspection reports.

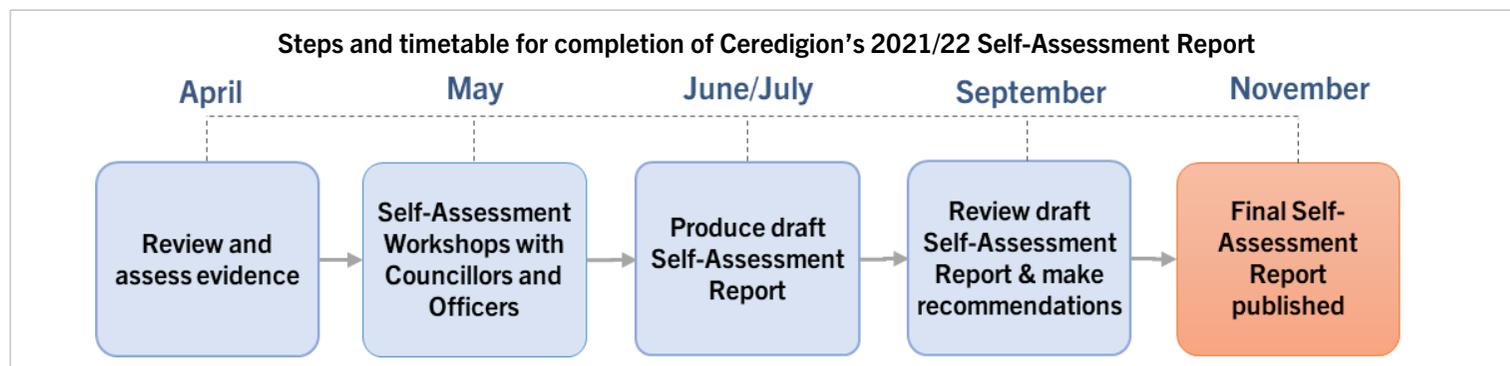
Part of the collation includes cross-checking the scoring with the evidence provided and seeking clarity on our conclusions where necessary. Gaps in evidence and understanding of our performance are also highlighted, all of which is designed to ensure the process is robust.

By focusing on this, we can learn from our experiences and tap into the innovation and creativity that exists in the Council to identify opportunities to improve our performance, whether that's through raising performance levels, identifying efficiencies or improving customer satisfaction.

The Council's Governance and Audit Committee play a key role in the Self-Assessment process. They are responsible for reviewing the draft Self-Assessment Report and making recommendations for changes to the conclusions drawn or the actions the Council intends to take. The draft Report is reviewed by the Governance and Audit Committee in September.

The Self-Assessment Report is updated following the Committee's recommendations and the final report published in November and submitted to the statutory recipients - The Council's Governance and Audit Committee, The Auditor General for Wales, Chief Inspector of Education and Training in Wales and the Welsh Ministers. The Report will be available for viewing on the Council's website.

Steps and timetable for completion of Ceredigion's 2021/22 Self-Assessment Report



EVIDENCE-BASED ASSESSMENT

Ceredigion strives to be an evidence and data driven organisation. A wide variety of evidence has been used in assessing our performance and in the production of this report.

These sources are split into three categories which help us check that our conclusions are correct. The three categories are the internal evidence available to us through key strategies and internal monitoring, such as the Medium Term Financial Strategy, our Annual Governance Statement and Complaints monitoring. This provides us with an internal view of how the organisation is performing.

We also draw on the extensive regulatory and external evidence that exists. These include inspection reports from Estyn, Care Inspectorate Wales and the ongoing work

conducted by Audit Wales. This provides us with the regulatory or external view of how we're performing from independent bodies.

The third category of evidence are the views of citizens, businesses, Council Staff and Trade Unions, offering the perspective of those receiving services from the Council. The Council has an ongoing process of engagement and consultation in place throughout the year which are used to record residents' views on a variety of Council functions.

These three categories of evidence help us 'triangulate' or check that the conclusions we draw are the correct ones by allowing us to compare the key findings from each and ensure they align before producing the Self-Assessment Report (shown below).

LEARNING FROM CONSULTATION

Consultation is an integral part of the evidence used in our performance management, and will continue to play an even greater role as we continue to explore opportunities for improvement with a variety of individuals and groups across the County.

Where more feedback is needed from particular groups, we will adjust our approach during the year to target those areas. We will engage with the many groups and organisations that represent specific groups in the county, and in particular to ensure that the voices of those seldom heard are indeed heard.

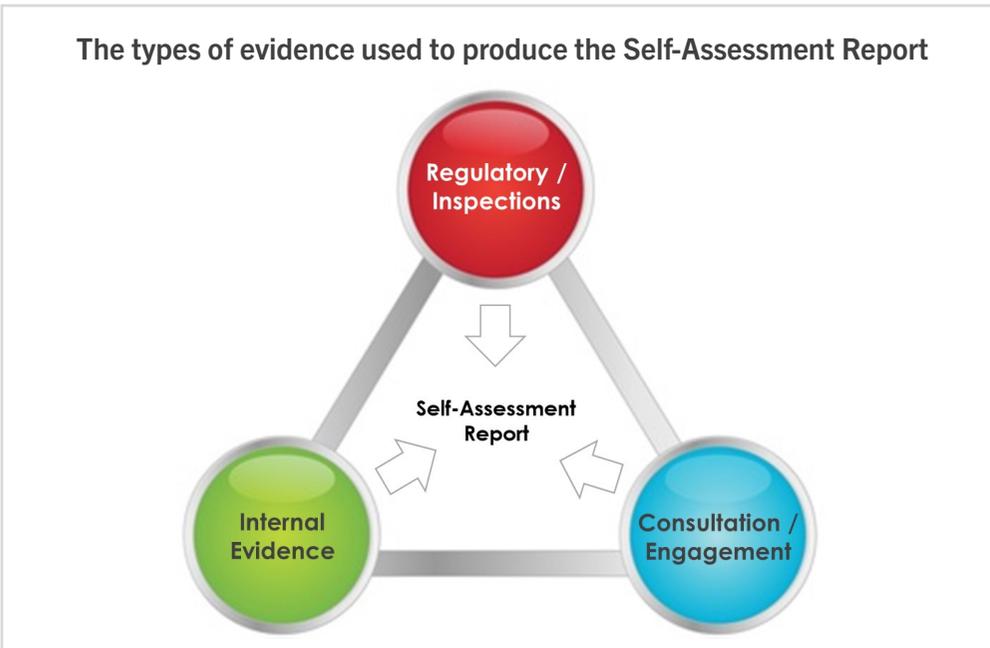
In 2021/22 we have benefitted from some important engagement events that provide a

unique insight into the views of citizens and stakeholders. These included the Regional Well-being Survey that provided detailed responses around the issues that help to improve people's economic, social, environmental and cultural well-being.

We also conducted a unique survey of householders and businesses in Ceredigion relating to the impact of COVID-19 to help in the recovery effort and provide the support needed to address the long-term effects of the pandemic.

Both of these have been used in the production of the Council's new Corporate Strategy and Corporate Well-being Objectives that will be consulted on during September 2022.

Sources used in conducting the Self-Assessment and Review of Well-being Objectives



Internal Evidence	Regulatory/External Evidence	Consultation and Engagement
<ul style="list-style-type: none"> • Statement of Accounts • Annual Governance Statement • Scrutiny Feedback and Reports • Director of Social Services Annual Report • Quarterly Performance Dashboards • Business Plan progress • Corporate Risk Register • Compliments, Comments & Complaints • PAMs • Previous Self-Assessment Reports • National Survey for Wales • Council Tax / Collection Rate • Corporate Strategy • Medium Term Financial Strategy 	<ul style="list-style-type: none"> • Audit Wales Annual Improvement Report • Care Inspectorate Wales Annual Performance Report • Audit Wales reports • CIW reports • Estyn inspection reports • Public Service Ombudsman Wales • Will include Panel Performance Assessment • Future Generations Commissioner Reports • Ceredigion PSB Assessment of Local Well-being • Ceredigion PSB Annual Report • West Wales Population Assessment • Performance Accountability Measures • Data Cymru / Stats Wales 	<ul style="list-style-type: none"> • Regional Well-being Survey • Economic Strategy Consultation • Disability Forum • Ceredigion Budget Challenge • Enterprise and Innovation Sub Group • Trade Unions monthly meetings • Impact of COVID-19 Survey • Staff Well-being Survey • Staff New Ways of Working Consultation

MANAGING OUR PERFORMANCE

Integration into the Council's Performance Framework

Self-assessment is not a standalone process, rather it is integrated as part of the Council's ongoing corporate planning and performance management arrangements. The diagram below demonstrates how self-assessment fits into our overall performance framework.

It is integral to driving Business Planning and Risk Management, and in turn draws on the outcomes from monitoring business plans and the corporate risk register to evaluate our current performance and complete the self-assessment. It is, in essence, a two-way communication between each pillar of the Performance Framework.

The timing of Self-Assessment is also important. It has been timed to transparently inform and influence the Council's strategic planning, financial management and budget process, risk management reviews, improvement planning and ongoing performance management. For example, the publication of the Self-Assessment Report in November ensures it is prepared in time to drive the annual business planning and target setting process in the final quarter of each year between January and March.

Self-Assessment in the Wider Performance Framework



Ceredigion has a long history of using self-assessment to good effect in identifying innovative ways of delivering services, most recently in the 'Through Age Well-being Programme' being implemented to transform the delivery of social care in the County over the next five years.

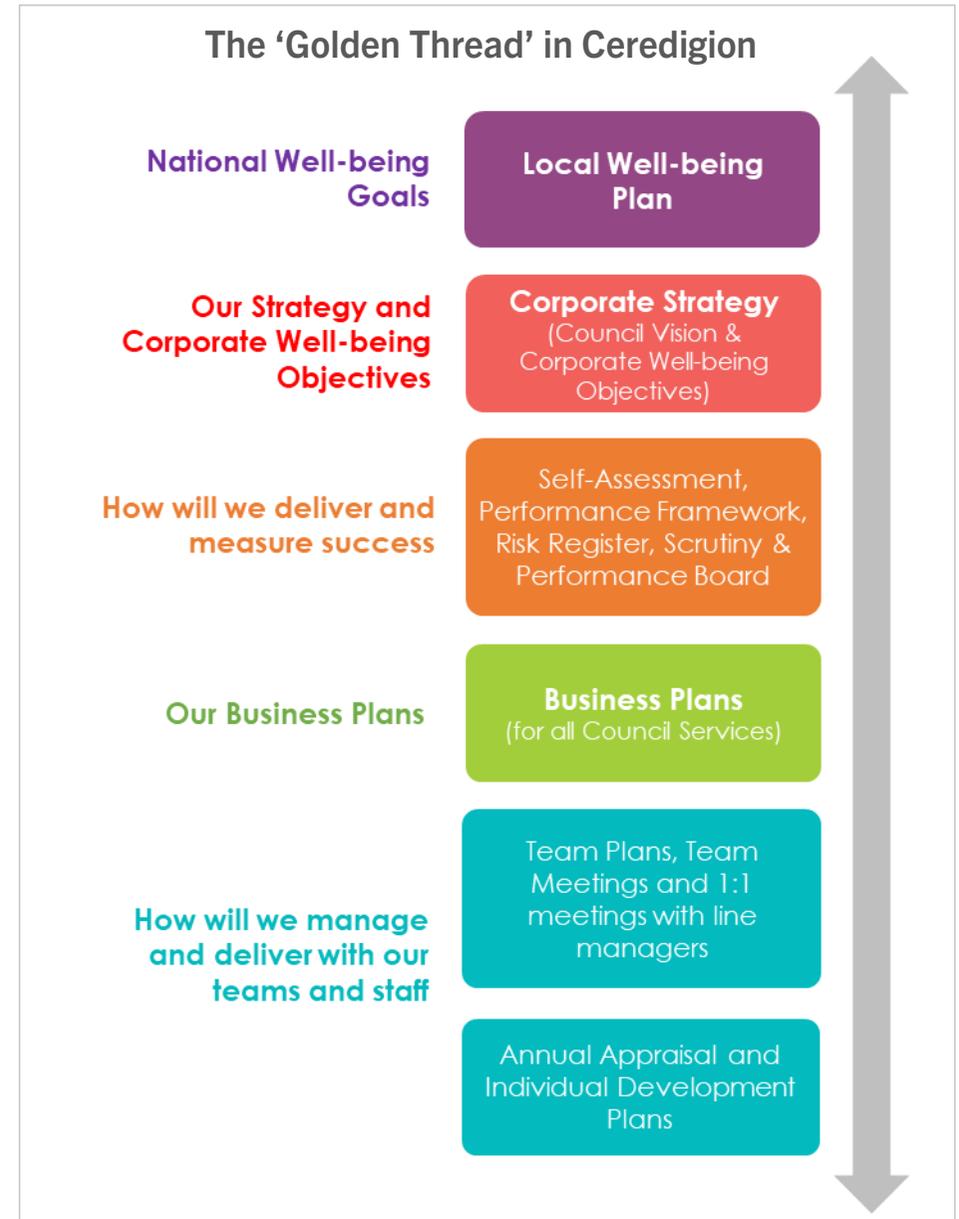
It is also an integral part of operational performance and used in the setting of annual business plans for each service. We all recognise that capacity is at a premium and demand is high, and as a result effective business planning has never been so important to ensure we are delivering 'the right services in the right way'. Having the opportunity to 'reflect' on past and current performance is crucial to understanding our strengths, weaknesses and opportunities. This form of reflective practice is critical in helping us determine our actions and priorities for the years ahead.

The Golden Thread

The Council uses a 'Golden Thread' diagram (shown right) to show the links between its key strategies and plans. It describes the flow of information from national and regional priorities for improvement contained in the Local Well-being Plan and Corporate Strategy, through to individual services, teams and members of staff in the Council responsible for delivering them.

A strong Golden Thread is important as it shows how each level of planning and action contributes to the next level, and how each role within the Council contributes towards achieving Ceredigion's Corporate Well-being Objectives.

Self-Assessment occupies a key place in the Golden Thread as the way in which we measure success and drive performance improvements, along with Business Planning and management and risk.



REVIEW OF OUR 2021/22 WELL-BEING OBJECTIVES

The Council's 2021/22 **Well-being Objectives** focused on the response and recovery to the COVID-19 pandemic. This decision was taken in order to protect and enhance the well-being of everyone during this difficult period, but without compromising the well-being of future generations. They were designed to support the ongoing recovery work of the Council and its partners. The Objectives were identified and aligned to the Public Services Board's Assessment of Local Well-being and the Local Well-being Plan. The eight objectives are shown in the diagram to the right.

It has been a challenging two years for everyone in Ceredigion and across Wales. The COVID-19 pandemic has affected every resident, business and community in different ways. We have seen some issues, such as poverty and in particular in-work poverty, come to the fore, while other issues such as housing affordability have been exacerbated during this period. At the same time, we have all been aware of the ongoing need to reduce carbon emissions and move towards becoming carbon net zero in order to protect our beautiful environment for future generations.

However, despite the challenges, we are very proud of how our communities have come together to support one another during this difficult period, and of the ways in which the council has adapted its ways of working to

continue to deliver services throughout.

The Well-being of Future Generations (Wales) Act requires the Council to set and publish Well-being Objectives that are designed to maximise our contribution to the achievement of the seven Well-being Goals for Wales specified in the Act. At the same time we must publish a statement explaining why meeting the objectives will contribute to the achievement of the well-being goals and what actions we will take to meet the objectives

The following pages provide a summary of how our 2021/22 Well-being Objectives contribute to the national Well-being Goals, a review of progress against delivering the Objectives and how we have applied the Sustainable Development Principle.

As we move forward, we will continue to focus on the recovery from the pandemic and we will continue to engage with, and support, both residents and business across the County.

The Council's new Corporate Strategy for 2022-27 sets out our new Corporate Well-being Objectives and our ambitions for the future. A summary of the new Corporate Well-being Objectives from 2023/24, and how they were reviewed, can be found on page 34.

The 2021/22 Well-being Objectives



Boosting the Economy

- Support businesses to respond to the impacts of COVID-19



Investing in People's Future

- Support learners of all ages and backgrounds to safely return to education and training and improve access to learning and employment
- Protecting people from poverty
- Promote and facilitate the distinct and vibrant bilingual culture and identity of Ceredigion



Enabling Individual and Family Resilience

- Support citizens who have been disproportionately impacted by COVID-19 to improve their physical and emotional well-being
- Promote the well-being of individuals and communities within safe and accessible homes



Promoting Environmental and Community Resilience

- Support active travel, other modes of transport and ways of working that build on our zero-carbon ambition
- Support our communities to be strong and well connected so that they are able to thrive despite COVID-19

IMPROVING OUTCOMES



Creating Opportunities

January 2022 saw the signing of the final deal agreement of the Mid Wales Growth Deal by the Welsh Government, UK Government and Ceredigion and Powys County Councils.

The Growth Deal is a ground-breaking partnership to bring a combined investment of £110m from UK and Welsh Government, which is expected to lever in significant additional investment from other public and private sources to maximise the impact in the Mid Wales region.

This milestone is significant as the programmes and projects supported by the Growth Deal are expected to produce wider social and economic benefits, such as **enhanced quality of life, creating business opportunities** following the impact of COVID-19, **decarbonisation** in industry and consideration of climate change impacts.

The potential outcomes that are achievable in Mid Wales through Growth Deal investment are:

- To create between 1,100 and 1,400 new jobs in Mid Wales by 2032.
- To support a net additional GVA uplift of between £570 million and £700 million for the Mid Wales Economy by 2032.
- To deliver a total investment of up to £400 million in the Mid Wales Economy by 2032.



Independent and Fulfilling Lives

The first residents at Aberystwyth's new extra care scheme have spoken about how it has transformed their lives, from sparking new friendships to providing the platform for a fresh start in life.

Maes y Môr, provided by Wales & West Housing in partnership with Ceredigion County Council, opened in October at Pen-yr-Angor, overlooking the town and harbour. But for many of its new residents, it has offered much more than just spectacular sea views.

Their new homes provide easy access to a range of facilities, 24-hour on-site care and support as well as a Wellbeing Officer, ensuring that residents **lead an independent, healthy, and fulfilling life**.



Supporting vulnerable people

During the COVID-19 pandemic around 2,900 residents from young people to families to carers were supported through regular 'Keeping in Touch' calls from Council staff in Porth Cymorth Cynnar to check on their well-being and provide an opportunity to talk to someone whilst in lockdown, helping to **reduce social isolation and loneliness**.



Strong Communities

Ceredigion Museum is delighted to have been awarded £115,894 development funding by the National Lottery Heritage Fund for the following project: Perthyn 'belonging to/ possessing': An exploration of how collections can **create community in Ceredigion**.

Perthyn is an ambitious project that aims to ensure that every Ceredigion resident can find something in the museum collection that resonates with their **sense of identity and values**, regardless of their age, gender, ethnicity, beliefs, sexuality, ability or other characteristics that they identify with.



Connected Ceredigion

The last two years have shown just how critical digital connectivity is for Wales' businesses, public services and communities. Continued investment and lobbying by the Council has led to the improvement of digital connectivity across the County. For example, the provision of Fibre to the Premises (FTTP) broadband has increased from 20% to 28.3%.

Improved digital connectivity increases not only **innovation and productivity** across the economy, it also **keeps people and communities connected**. The Council will continue to support improvements to digital connectivity, such as the rollout of 4G Broadband, to help provide the connectivity that businesses and people need, **tackle digital exclusion and increase opportunities** for all.



Healthy Environment

In June 2022 at the Wales Regional Energy Efficiency Awards, Ceredigion County Council's Energy Efficiency Schemes scooped 2 awards.

The Energy Efficiency Awards recognise the work being undertaken by the energy efficiency sector in Wales. The measures were introduced to help homeowners **reduce their energy bills, tackle fuel poverty and reduce carbon emissions**.

The Council has been delivering the ECO Local Authority Flexibility scheme along with the Warm Homes Cozy Ceredigion Scheme for a number of years. These schemes have seen a number of insulation measures and heating systems being installed in properties improving their **energy efficiency**.

To date, the Council has invested over £5 million in energy efficiency and carbon reduction projects, and this investment has saved £2.8m to date.



WELL-BEING OBJECTIVE:

1) Support businesses to respond to the impacts of COVID-19

Progress Made

- The Growing Mid Wales economic partnership has been established and has succeeded in attracting a £110m Growth Deal of investment to Mid Wales over the next 10 years for projects across the region.
- £10.8m of investment has been secured from the UK Government's Levelling Up Fund to help transform the Aberystwyth's Harbour, Old College and promenade.
- £2.8m worth of investment has been secured from the UK Government's Community Renewal Fund, for 12 community schemes across the county.
- A Welsh Government funded Small Capital Grant scheme delivered in early 2021 led to almost £500,000 of grant investment in Ceredigion businesses, attracting a further £631,000 of Private sector funding. The support led to the creation of 146 new jobs in Ceredigion, and a further 408 jobs were safeguarded in 81 businesses through the investments.
- Investments have led to Ceredigion being the first County to have a county-wide LoRaWAN network, that is available to private and public sector partners to make use to improve use of technology as a business efficiency aid.
- Supporting the independent sector through collaborative working providing mutual aid, funding and resources. Provision of additional staffing resources, equipment as well as H&S advice and policies and procedures.
- Leading on work of Centre for Local Economic Strategies (CLES) to develop community wealth building approaches to local procurement policy and practices.
- Supported local businesses during the COVID pandemic by administering 8,835 Business Grant payments across Ceredigion with a value of £49m.
- Ceredigion's new Economic Strategy was published in March 2021 setting out how we will work together towards achieving strong, sustainable and more resilient economic growth for Ceredigion, created and shared by all. The strategy document sets out the actions that will address the challenges and opportunities that exist in the local economy. It focuses on four main priority areas – People, Enterprise, Place and Connectivity, with each section outlining some of the early interventions considered. Work will continue on developing the detailed implementation plans during 2021/22.
- During the pandemic, a dedicated Business Support webpage created to support Ceredigion's economy to ensure that businesses, employers and employees in the County have access to the latest information, advice and support to help them adjust and recover from the pandemic.
- "Safe zones" were created in Aberaeron, Aberystwyth, Cardigan and New Quay town centres to create safe, inviting towns for people to come shopping and to enjoy despite the impact of the pandemic. This included widening of footpaths, dropping kerbs, closure of roads, adaption to parking bays and areas for businesses to trade to allow people to maintain a 2 metre social distance at all times.
- 8,900 COVID related enquiries were managed by Ceredigion's Customer Contact Service 'CLIC' during the 2020/21 year, including enquiries relating to Business Grants, the Cultural Recovery Fund and the Small Business Capital Grant Scheme. Over 2,000 alone were in relation to the Non- Domestic Rate Grant to help businesses in the hospitality, tourism, leisure and non-essential retail sectors.
- Ceredigion Workways+ has continued to help people that are not in employment to access funded face-to-face and online training, work experience, volunteering opportunities and jobs. The scheme is staffed by officers from Ceredigion County Council and is part funded by the European Social Fund through the Welsh Government. Support is available to help people affected by work-limiting health conditions or disabilities; carers; those with low or no qualifications; people with childcare responsibilities; the over 54's; people in a single adult or jobless household or anyone from a Black, Asian and Minority Ethnic group.

Overall Assessment of the Journey So Far

Progress in meeting this priority is **Good** and prospects for improvement are **Good**. The steps to provide employment opportunities and develop collaborative and innovative partnership schemes are progressing well. The new Economic Strategy provides a shared vision for the local economy and practical interventions that can be delivered collaboratively.

The Growing Mid Wales Partnership is an example of Ceredigion **owning our ambition** to ensure that we strengthen the local and regional economy as part of a prosperous and resilient Wales post COVID-19.

Owning our Ambition





DELIVERING SUSTAINABLE DEVELOPMENT

Long-Term

- The Economic Strategy plans for the long-term development of the economy up to 2035
- The Mid Wales Growth Deal and the Economic Strategy addresses structural weaknesses for long-term benefit
- The Growing Mid Wales Partnership sets the vision for 15+ year timeframe
- Future trend analysis has been used to develop the Growing Mid Wales vision

Prevention

- Increased economic opportunities will prevent further out-migration of skilled young people
- Economic growth will prevent the future negative impact of migration patterns on Welsh language and culture
- Interventions in the Economic Strategy will prevent further growth in the productivity gap

Collaboration

- The Growing Mid Wales Partnership brings together public, private and academic sectors to achieve shared goals
- Working with Powys County Council and Welsh and UK Government to maximise use of resources and capitalise on opportunities

Involvement

- Private sector businesses, drivers of future economic growth are involved in identifying key priorities and strategies
- Private, public and third sectors involved in shaping the emerging Growth Deal programme
- Extensive engagement was undertaken in the development of the Economic Strategy

Integration

- The Economic Strategy provides a shared vision and action for development of the local economy and the interventions contain in it will be delivered by a variety of partners and stakeholders over the next 15 years
- Economic growth strategies integrated with other service provision, including education, skills, planning and infrastructure

Our Well-being Objective maximises our contribution to the highlighted well-being goals

Prosperous	Resilient	Healthier	More Equal	Cohesive	Culture	Global				
Corporate Well-being Objective				Well-being Goal						
Supporting Businesses to respond to the impacts of COVID-19										

KEY ACHIEVEMENTS

£10.8m

of capital funding secured through the Levelling Up Fund 2022-25

£2.8m

of funding secured through the Community Renewal Fund for 2022/23

8,835

Business Grant payments administered across Ceredigion

£49m

of Business Grant funding administered across Ceredigion

3,700

visits to ensure business premises are compliant with COVID-19 rules

138

staff redeployed to other roles to help support the COVID response

8,900

COVID-19 related enquiries were managed by Ceredigion's Customer Contact Service 'CLIC'

11.4m

items of Personal Protective Equipment (PPE) distributed

WELL-BEING OBJECTIVES:

- 2) Support learners of all ages and backgrounds to safely return to education and training and improve access to learning and employment
- 3) Protecting people from poverty
- 4) Promote and facilitate the distinct and vibrant bilingual culture and identity of Ceredigion

Progress Made

- Ceredigion's Education system continues to be considered amongst the most successful in Wales. The support and resources provided to all Ceredigion schools during the Covid-19 pandemic were particularly commended, praised and appreciated by inspectors, school staff, parents and pupils alike.
- Distance learning was put in place for all pupils during lockdown and a wide range of catch up resources provided.
- The Council established a Childcare Hub during the early stages of the pandemic to support those children and their families who needed care with 1,294 sessions being held.
- In response to long waiting times to access mental health support, Ceredigion County Council has supported a local youth charity to provide easily accessible mental health services to young people in the county.
- Worked with the 3rd sector and private businesses to provide work experience opportunities for individuals/vulnerable groups.
- Roll out of funded childcare for 3-year olds across the county.
- Invested in and delivered nursery provision such as the £900k Llwyn yr Eos Nursery in Aberystwyth, the £700k Cenarth School Nursery and the £600k Tregaron Nursery facility.
- Invested in and delivered school improvements such as the refurbishment and extension to create a 3-16 school at Henry Richard, the extension and improvements at Cardigan Primary School and the new net-zero 3-storey extension at Ysgol Uwchradd Aberteifi.
- Schools developments already underway including the £100k of construction work at Penglais secondary school, providing the school with new and improved facilities, £160k of construction work at Ysgol Henry Richard School and £5.4m of work on the Cardigan Secondary School as part of the 21st Century Schools Programme.
- Professional consultants and contractors being appointed to deliver the new £11.5m Aeron Valley new area school, and the new £5.4m extension at Ysgol Gymraeg, Aberystwyth.
- Appointing consultants to scope works to Aberystwyth Museum totalling approximately £1m.
- 2-year programme of investments worth £500,000 as part of the Arfor Programme to support and strengthen the links between economic growth and the Welsh language.
- Proactively working with Cadw (Welsh Government's historic environment service) and the Royal Commission on the Ancient and Historical Monuments of Wales "Historic Place Names Task and Finish Group".
- Developed apprenticeship scheme within Local Authority care homes in Ceredigion.
- Digital provision has enabled Cered (Welsh language enterprise) to continue promoting the Welsh language within communities despite COVID-19. A weekly programme of events and activities was posted on social media sites including new and innovative engagement projects such as Theatr Soffa, Hwyl i Blant and Cefn y Rhwyd radio broadcasts in conjunction with Radio Aber
- A Tackling Hardship Strategy has been published to help to mitigate the impact of COVID-19 and the cost of living crisis on the most vulnerable in Ceredigion.
- Ceredigion County Council and its partners on the Ceredigion Public Services Board continue to work proactively in mitigating the causes and impacts of poverty in Ceredigion.
- Supported 5,502 households and individuals with their Council Tax through the Council Tax Reduction Scheme, which is a benefit to help people who are on a low income or claiming certain benefits to pay some or all of their Council Tax bill.
- £36,000 Carers Fund distributed in 2021/22 to provide support to carers' health and well-being in the County, with £98,000 being distributed so far in 2022/23.
- 600 pupils continued to receive instrumental music lessons during the pandemic.
- Theatr Felinfach delivered several digital arts programmes throughout the lockdown, e.g. Ed holden (Mr Phormula) Beat box sessions, virtual dance lessons, a digital pantomime and several imaginative sessions for children of all ages.
- E-library resources were made more widely available during the pandemic, and the Council's library vans were redeployed to deliver care packages across the County.
- The Active Young People Team in Ceredigion supported young people during the pandemic by providing virtual sessions - 110 videos were produced aimed at getting teenagers, primary school aged pupils and pre-school toddlers active during the time when they were at home.

Overall Assessment of the Journey So Far

Progress in meeting this priority is Good and prospects for improvement are Good. The objectives to support learners to return safely to education, protecting people from poverty and promoting Ceredigion's vibrant culture are on target. Despite the challenges of delivering services during lockdown Ceredigion was able to provide virtual lessons and support to learners, run virtual sessions promoting Ceredigion's rich cultural and linguistic identity, and push ahead with supporting citizens affected through the pandemic and more recently the cost of living crisis.

For example, the Tackling Hardship Strategy is being implemented through the Public Services Board's Poverty Sub-Group. This is an example of Ceredigion owning our ambition.

Owning our Ambition





DELIVERING SUSTAINABLE DEVELOPMENT

Long-Term

- Ceredigion's Welsh in Education Strategic Plan (WESP) is a 10-year strategy to strengthen Welsh language provision and work towards a million Welsh speakers Wales wide by 2050
- The recovery from the pandemic is projected to last for a number of years and our plans to tackle poverty take a long-term approach
- School improvements provide better facilities for future generations of learners

Prevention

- Supporting all learners helps to provide them with better learning and career opportunities
- Working to raise income levels across the County will help in the prevention of in-work poverty
- Supporting people through the Council Tax Reduction Scheme or Discretionary Housing Payments are key components of financial support to households through the cost of living crisis and in preventing their situation becoming worse

Collaboration

- The Council works proactively with partners through the Ceredigion Public Services Board Poverty Sub Group to tackle the causes and impacts of poverty across the County
- Working with the Third Sector to provide mental health support to young people following the COVID-19 pandemic

Involvement

- Supporting the Ceredigion Youth Council as a forum for children and young people ensures the voices of young people across Ceredigion are heard

Integration

- Better skills and jobs increase income levels and therefore allow the local economy to grow
- The Arfor Programme to support and strengthen the links between economic growth and the Welsh language also strengthen each of the four pillars of well-being (economic, social, environmental and cultural)

Our Well-being Objective maximises our contribution to the highlighted well-being goals

	Prosperous	Resilient	Healthier	More Equal	Cohesive	Culture	Global
▼ Corporate Well-being Objective							
2) Support learners of all ages and backgrounds to safely return to education and training and improve access to learning and employment	●	●	●	●	●	●	●
3) Protecting people from poverty	●	●	●	●	●	●	●
4) Promote and facilitate the distinct and vibrant bilingual culture and identity of Ceredigion	●	●	●	●	●	●	●

KEY ACHIEVEMENTS

£5.8m

secured to refurbish and build an extension at Ysgol Uwchradd

GOLD

standard awarded to various local schools in the Welsh Language Charter, including Ysgol Gynradd Llanilar and Ysgol Dyffryn Cledlyn

42

pupils continued to receive language immersion through the virtual Language Centre

600

Young people and families supported through 3,000 calls

110

Active Young People's videos published during lockdown

50+

Parenting groups and programmes delivered virtually

1,000+

laptops/tablets and MiFi devices provided to pupils in order to be able to access Distance Learning during the lockdown period.

453

Discretionary Housing Payments made to residents in 2021/22 who faced a shortfall in meeting their housing costs

£131,000

Funding received for Amgueddfa Ceredigion Museum

2,400

Individual attendees to digital festival Gwyl yr Enfys

WELL-BEING OBJECTIVES:

5) Support citizens who have been disproportionately impacted by COVID-19 to improve their physical and emotional well-being

6) Promote the well-being of individuals and communities within safe and accessible homes

Progress Made

- Ceredigion has responded to the challenges in the provision of social care by moving towards combining the previously separate children and adults' service into a single Through-Age and Well-Being Service. This eliminates departmental barriers, provides a more consistent, lifelong service for users and maintains the generic skills and flexibility of staff.
- The transformed social care service focusses on prevention, intervening at an early stage to help connect people to the communities and facilities around them, building individual and family resilience and preventing problems from escalating into a need for higher end services.
- As part of its prevention work, the Council has invested in giving full recognition and support to the role of carers, in particular by providing opportunities for respite, allowing carers to take a rest from what can be a demanding 24/7 role.
- Working with Wales and West Housing Association, we have facilitated the ground-breaking Maes y Môr Extra Care Housing development in Trefechan that helps to maintain independent living for the vulnerable by the level of care required by the individual.
- Completed the £100k Canolfan Steffan Community Support Facility in Lampeter, and delivering the £150k refurbishment of Canolfan Padarn Day Centre in Aberystwyth.
- Commissioning arrangements for the new Complex Children's residential provision have commenced.
- Maximised the Disabled Facility Grant and associated Welsh Government Funding to provide adaptations to homes, in order to enable people to remain within their communities.
- As the first Welsh local authority to volunteer to welcome refugees from Syria, Ceredigion has welcomed and integrated 74 refugees to the county. The displaced people resettlement programmes are progressing well.
- Used Welsh Government allocated Social Housing Grant to deliver much needed Affordable Housing for rent.
- The allocation of Social Housing via the Common Housing Register allows applicants to identify five areas giving them more choice for where they and their family wish to live.
- A new Strategic Equality Plan 2020-2024 has been published to ensure that residents and stakeholders in Ceredigion have a voice to influence the development of policies and strategies that will affect their lives.
- Public Space Protection Orders (PSPO's) have been renewed for Cardigan, Lampeter and Aberystwyth to deal with nuisance or problems in an area that cause harm to the quality of life of the local community.
- Reinvigorated Dyfed Powys Police and Police and Crime Commissioner's work on Anti-Social Behaviour and introduced a Community Trigger Protocol for Ceredigion County Council.
- Introduced multi agency weekly tension monitoring meetings to address early signs of community tensions through early intervention/preventative work on a partnership basis.
- Implemented with partner organisations, place-based pilots in Cardigan, Lampeter and Aberystwyth to address wellbeing in communities based on need.
- Around 2,900 residents from young people to families to carers, were supported during the pandemic through regular 'Keeping in Touch' calls from Council staff in Porth Cymorth Cynnar to check on their well-being and provide an opportunity to talk to someone whilst in lockdown.
- Ceredigion was the first local authority in Wales to provide a contact tracing service and was subsequently chosen as a pilot area by the Welsh Government, before the national scheme was set up.
- Supported Hywel Dda University Health Board by establishing two temporary field hospitals in response to COVID-19.
- In July 2020, Ceredigion launched its Connect to Kindness campaign, to create more understanding about the benefit and impact of kindness to ourselves and others in our community. The campaign fosters and nurtures connections to alleviate loneliness and isolation prevalent in many of our communities.
- Progressed plans to create a Well-being Centre in Lampeter, and developing plans to create Wellbeing Centres in the North and South of the county as well.
- Porth y Gymuned, the community portal service assists residents of all ages in Ceredigion, by helping them to make connections to access support opportunities in their area that could maintain and improve their wellbeing. This service has been particularly important in supporting our residents during the COVID-19 pandemic.
- Video conferencing facilities were installed in all of our care homes to ensure contact with family members during the national lockdowns.
- 96 households in Ceredigion successfully prevented from homelessness during 2021/22 following intervention from the Council.
- Ceredigion's Cam Nesa Team delivered wellbeing packs to support young people who experienced loneliness, isolation or other vulnerabilities during the pandemic.

Overall Assessment of the Journey So Far

Progress in meeting this objective is Good and prospects for improvement are Good. Despite the challenges in supporting citizens who have been disproportionately impacted by COVID-19 and promoting the well-being of individuals and communities within safe and accessible homes, both have been assessed as green and on target. There are many examples of how the Council has worked proactively with partners to coordinate an effective response through the pandemic. The Through Age Programme that is transforming the delivery of social care in the County is an example of how Ceredigion is Leading the Way to deliver Integrated Services now and in the future.

Leading the Way





DELIVERING SUSTAINABLE DEVELOPMENT

Long-Term

- The Through Age Model An involves long-term planning to ensure sustainable services for the next 15 years +
- Future Trends, such as demographic change have been utilised in the Model
- The recovery from the pandemic is projected to last for a number of years and our plans to improve physical and mental well-being take a long-term approach to support in response

Prevention

- The Through Age Model provides a coordinated approach to social care in order to prevent, reduce or delay the need for ongoing support, and allow people to remain in their own homes
- Preventing homelessness and promoting independence remains a priority for the Council and is the most effective way of tackling homelessness
- Progressing the Well-being Centres supports the ambition to create healthy communities

Collaboration

- The Health Board, Council and Third Sector partners work collaboratively to implement integrated health and social care programmes across west Wales
- Effective collaboration with the Health Board in responding to the pandemic such as the setting up the two field hospitals and the Mass Vaccination Centres

Involvement

- Public and private sector have been involved in developing the Through Age Model
- The refreshed Strategic Equality Plan ensures that our actions are fair and inclusive to all
- Younger people were identified as one of the groups disproportionately affected by the pandemic in Ceredigion, and as a result a range of specific support was put in place

Integration

- Public and private working together to maximise contribution to healthier Wales and other goals
- Supporting people's physical and emotional well-being impacts on all of the national Well-being Goals and helps to build stronger and more resilient communities

Our Well-being Objective maximises our contribution to the highlighted well-being goals

Prosperous	Resilient	Healthier	More Equal	Cohesive	Culture	Global
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Corporate Well-being Objective	National Well-being Goal						
5) Support citizens who have been disproportionately impacted by COVID-19 to improve their physical and emotional well-being							
6) Promote the well-being of individuals and communities within safe and accessible homes							

KEY ACHIEVEMENTS

35,000

Mail outs to support the Vaccination Programme in Ceredigion

11.4m

Items of Personal Protective Equipment (PPE) distributed

160

Press releases with news and advice on COVID-19

7,400

People referred for contact tracing to help everyone stay safe

1,040

Welsh afternoon teas / 'break in a box' were delivered

195

Active family bags distributed with Flying Start and Families First services

100+

Adult carer and 10 young carer ID cards produced

50,000

Social media engagements during the year, helping people keep informed

15,000+

Food parcels delivered to medically vulnerable residents

1,650

Well-being packs produced for unpaid carers and isolated adults

WELL-BEING OBJECTIVES:

7) Support active travel, other modes of transport and ways of working that build on our zero-carbon ambition

8) Support our communities to be strong and well connected so that they are able to thrive despite COVID-19

Progress Made

- Prioritised climate change and carbon reduction. Since 2007 the Council has undertaken a series of three 5-year Carbon Management Plans. Since the first plan was instigated, Ceredigion County Council has reduced its carbon emissions by 61%.
- In 2019, the Council declared a Climate Emergency and committed the Council to achieving Net Zero Carbon by 2030.
- Developed the first net carbon zero building on the Council's estate with the new nursery block at Ysgol Llwyn yr Eos in Penparcau.
- Placed 70kw of photo-pholtaic cells on the roof of Ysgol Bro Teifi, generating 160kw hours of clean electricity.
- In addition we have placed 22kw of photo-photaic cells on Ysgol Bro Pedr in Lampeter, 10kw on Ysgol Henry Richard in Tregaron and another 10kw on Ysgol Comins Coch.
- Fitted hundreds of LED bulbs into our street lighting around the county, resulting in a saving of over £2 million.
- Instigated a review into transitioning our corporate fleet of vehicles towards Ultra Low Emission Vehicles.
- In the last five years Ceredigion has achieved one of the highest recycling rates in both Wales and the UK and is currently at 70%. This has avoided 9,000 tons of carbon emissions and saved around £2 million compared to traditional disposal. We collect enough food waste in one year to power 300 homes.
- Introduced a kerbside glass recycling collection.
- The Council's award-winning Cosy Caron project has ensured that the homes of many local residents are energy-efficient and warm. The programme has provided central heating and insulation for 137 homes that were previously energy-inefficient, particularly in rural areas where the gas network does not reach.
- The Council has delivered Energy Efficiency initiatives providing efficiency measures and advice in people's homes.
- Delivered public transport infrastructure improvements along the TrawsCymru corridor through Local Transport Funding.
- A Towns Development Officer has been employed to engage with town representatives to help facilitate and support ideas to reinvigorate Ceredigion's rural towns. This is provided with the support of Leader funding through the Cynnal y Cardi programme.
- £379k of funding secured from Welsh Government to support a range of projects to bring town centre assets into economic use and to enhance green infrastructure in town centres.
- Published new Net Carbon Zero Action Plan for Ceredigion Council setting out its response to the county-wide climate emergency, and explaining why we need to take this action and why the 2030 target is so important to tackling climate change.
- Delivered a number of Active Travel improvements, including major refurbishment of Pont-yr-Odyn, Trefechan and construction of a shared use path between Gogerddan and Penrhyncoch.
- Supported local suppliers throughout the pandemic during the period of service reduction or postponement in waste and transport.
- A multi-agency panel was set up to ensure the safe and proportionate reopening of community venues across Ceredigion as the lockdown was lifted. The aim is to support and provide advice for community groups preparing to reopen by providing a series of briefing sessions for individuals, groups or organisations responsible for multi-purpose community centres focusing on buildings, people and activities. The panel has also created a resource pack to aid the safe reopening of community venues.
- Successfully delivered core front line services safely during the COVID-19 pandemic and continue to respond to ever changing issues caused by the pandemic.
- Supported Highways and Environmental Services and wider corporate operational response which has extended from the delivery of food boxes to vulnerable groups through to logistical support in distributing materials to schools, providing operational support, and establishing mass testing and vaccination centres.
- Supported local suppliers throughout the pandemic during the period of service reduction or postponement in waste and transport.
- Significant lobbying by Ceredigion County Council and others has resulted in 29.5% coverage of full Fibre broadband giving over 100 Mbps capability. The county wide current average download of 54mbps is one of the highest levels for a rural local authority. Over the last two years, the provision of Fibre to the premises (FTTP) has increased from 20% to 28.3%, and for Superfast Broadband (>30Mbps) from 80.6% to 86.3% for 30Mbps or over.

Overall Assessment of the Journey So Far

Progress in meeting this objective is Good and prospects for improvement are Good. All steps to reduce our carbon emissions, improve active travel provision and create well connected communities are on target, with further improvements planned in the next year.

The Council's Carbon Management Plan is an example of Ceredigion Leading the Way to minimise our carbon footprint, minimising our contribution to climate change and deliver our ambition of being a carbon net zero council by 2030.

Leading the Way





DELIVERING SUSTAINABLE DEVELOPMENT

Long-Term

- Long-term planning to reduce carbon emissions will help protect our beautiful landscape for future generations
- Future Trend analysis utilised in developing the Council's 5-Year Carbon Management Plan

Prevention

- The first objective focuses on preventing further impact on the environment, particularly reducing carbon emissions, but also the impact on biodiversity across the County
- Active travel is a key part of Ceredigion's strategy to improve health and well-being, and thus preventing health related problems in the future
- Being connected has come to the fore over the last two years, and investment in connectivity will help to create stronger and more resilient communities

Collaboration

- Collaborative working with partners and stakeholders will help to ensure a coordinated approach to minimising the impact of climate change and that we all focus on more sustainable forms of energy in the future
- We are working in partnership with colleagues on the Ceredigion Public Services Board, for example, in the development of the Penglais District Heating Project where all public sector organisations in the locality will be able to take advantage of green solutions to energy

Involvement

- Everyone is involved and encouraged to make choices that will reduce costs now and protect the environment for the future

Integration

- Decarbonisation, improving the health of the County through encouraging active travel, and improving connectivity has clear benefits for maximising our contribution to all of the well-being goals

Our Well-being Objective maximises our contribution to the highlighted well-being goals

	Prosperous	Resilient	Healthier	More Equal	Cohesive	Culture	Global
▼ Corporate Well-being Objective	National Well-being Goal ▼						
7) Support active travel, other modes of transport and ways of working that build on our zero-carbon ambition	●	●	●	●	●	●	●
8) Support our communities to be strong and well connected so that they are able to thrive despite COVID-19	●	●	●	●	●	●	●

KEY ACHIEVEMENTS

70.2%
of waste recycled composted or reused

29,271
tonnes of municipal solid waste collected during the year

2.53
Days on average to clear fly-tips across the county

61%
Reduction in carbon emissions since 2007 saving £6m to reinvest

£5m+
Invested in energy efficiency and carbon reduction projects, saving £2.8m to date

£23m
will be spent on the coastal defence schemes in Aberaeron and Aberystwyth

2
Regional Energy Efficiency awards to recognise the work in helping homeowners reduce their energy bills, tackle fuel poverty and reduce carbon emissions

28.3%
Provision of Fibre to the premises (FTTP) broadband, increased from 20%, due to investment in digital connectivity over the last two years

CONTRIBUTION TO THE NATIONAL WELL-BEING GOALS

The Well-being of Future Generations Act (Wales) 2015 seeks to improve the social, economic, environmental and cultural well-being of Wales by requiring public bodies to work together to create a sustainable Wales. It is intended to help to create a Wales that we all want to live in, now and in the future. There are 7 national well-being goals that set out a shared vision for all public bodies to work towards (shown right).

We know that we face challenges in Ceredigion - the COVID-19 pandemic has been unprecedented in its impact on all walks of life, but more recently the cost of living crisis is impacting many households in the County. Some of these issues have been exacerbated by the pandemic and have come to the fore such as housing affordability, while others remain a consistent challenge such as tackling poverty.

There is also the need to grow the local economy and create opportunities for local people to stay and thrive in their local communities. The County's changing demographics towards an ageing population and out-migration of younger people will have far-reaching impacts across the four pillars of well-being.

Ceredigion County Council has worked collaboratively with its local and regional partners to tackle these complex issues to create the Ceredigion that we want. Some examples are the Mid Wales Growth Deal leveraging significant funding for regeneration across the region, the coordinated response to the COVID-19 pandemic with a variety of partners across the County, and the Public Services Board Poverty Sub Group in tackling the impact of Poverty across the County.

The Council's 2021/22 Well-being Objectives focused on the immediate response to the

COVID-19 pandemic and supported the longer-term recovery. They were set based on evidenced local needs and on the views of local people. A variety of sources were used to determine these needs including the last Ceredigion Assessment of Local Well-being and Local Well-being Plan.

The Well-being Objectives will help us improve outcomes for local people and also maximise our contribution to the national Well-being Goals.

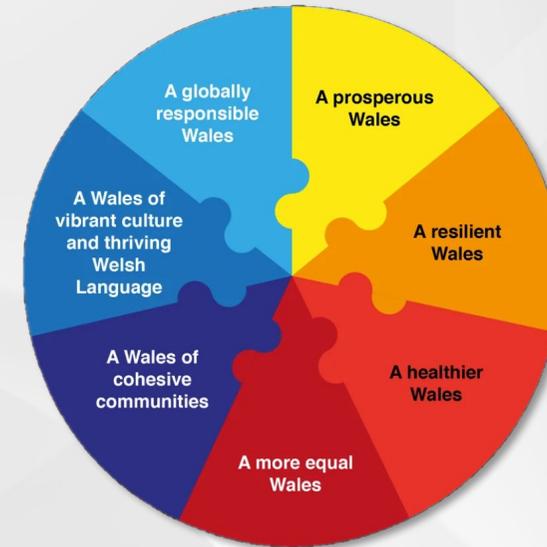
We monitor and review progress towards delivering the Objectives on a regular basis and produce an annual Self-Assessment Report in which we convey progress.

Ceredigion Public Services Board brings together the County's public service leadership and decision-makers, to improve the economic, social, environmental and cultural well-being of the County by strengthening joint working across the County's services.

Like the Council, its priorities were developed using the evidence and engagement feedback from key sources such as the Assessment of Local Well-being. This ensures that both Ceredigion County Council and Ceredigion Public Services Board's Well-being Objectives are aligned to focus on the priority needs of the County, and maximise the contribution to the national Well-being Goals.

Common themes such as tackling poverty, environmental responsibility, creating opportunities and providing the best start in life are all closely aligned and together allow us to provide a coordinated and shared response to improving well-being. The table overleaf demonstrates how Ceredigion's Well-being Objectives contribute to the 7 national Well-being Goals.

THE 7 NATIONAL WELL-BEING GOALS



The Well-being of Future Generations (Wales) Act 2015 puts in place 7 Well-Being Goals.

The Act gives us the ambition, permission and legal obligation to improve our social, cultural, environmental and economic well-being.

It requires public bodies in Wales to think about the long-term impact of their decisions, to work better with people, communities and each other, and to prevent persistent problems such as poverty, health inequalities and climate change.

▼ Well-being Goal	How the Council's Well-being Objectives contribute to the national Well-being Goals ▼
A Prosperous Wales	All of our Well-being Objectives reflect the importance of developing the local economy in Ceredigion. Enabling employment, developing skills, providing affordable housing, protecting the environment, supporting businesses and investing in regeneration will contribute to the national goal of a prosperous Wales. Supporting businesses to respond to the impacts of Covid-19 helps both the immediate response and the longer-term future as we seek to increase economic growth, create more and better paid jobs and support the workforce through opportunities for learning.
A Resilient Wales	Delivering our carbon net zero ambition, increasing opportunities for active travel and ensuring communities are well-connected will help to protect our natural environment and create strong and resilient communities. This contributes to the national well-being goal of creating a resilient Wales by reducing our impact on the environment and enhancing our capacity to adapt to change.
A Healthier Wales	Supporting learners in education and training, and protecting people from poverty, and the promotion of healthier, more active lifestyles seeks to build a healthier Ceredigion and a healthier Wales. It also enables independent living and provides early intervention and prevention services for the most vulnerable. Supporting citizens who have been disproportionately impacted by COVID-19 to improve their physical and emotional wellbeing will support other initiatives to deliver a healthier Wales.
A more Equal Wales	All of our Well-being Objectives seek to establish a more Equal Wales by ensuring equal opportunities for all in employment, housing, education, healthier lifestyles and sustainable communities.
A Wales of Cohesive Communities	Building the strength of our communities is a key feature in our Well-being Objectives. Providing support for our communities to be strong and well connected so that they are able to thrive despite Covid-19 will enhance the Wales of cohesive communities.
A Wales of Vibrant culture and thriving Welsh language	The Council continues to promote the distinct and vibrant bilingual culture and identity of Ceredigion. The cultural pillar of Well-being was highlighted as being particularly important to Citizens in the Ceredigion Assessment of Local Well-being, and further measures to promote bilingualism and the Welsh Language are in place.
A Globally responsible Wales	In considering our Wellbeing Objectives we have taken into account the Ceredigion Assessment of Local Well-being and engagement activity to ensure we can make a positive contribution to global well-being. Support for active travel, other modes of transport and new ways of working that build on our zero-carbon ambition continues our work in this area.

THE SUSTAINABLE DEVELOPMENT PRINCIPLE

The Well-being of Future Generations (Wales) Act 2015 introduced the Sustainable Development Principle and outlines the 5 Ways of Working that all public bodies must adopt. Sustainable development is the central organising principle that shapes what we do and how we do it.

In essence, it means we must strive to ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs. This approach provides an opportunity for innovative thinking, reflecting the way we live our lives and what we expect of our public services

We have embedded the principle across the Council and adopt the principle in the planning and delivery of our Well-being Objectives.

Some of the ways in which we have used the Sustainable Development Principle are outlined right.

	Ways of Working	How the Council has demonstrated the Sustainable Development Principle
	<p>Long term</p> <p>Looking to the long term so that we do not compromise the ability of future generations to meet their own needs</p>	<ul style="list-style-type: none"> • Medium Term Financial Planning ensures that decisions consider the impact on future generations • Workforce Planning ensures the development of workforce skills for the future and ensuring services are sustainable over the longer term • The Council's Corporate Strategy seeks to improve the social, economic, environmental and cultural well-being of Ceredigion over the next 5 years and beyond • The recovery from the COVID-19 pandemic is projected to last for a number of years and our plans to tackle poverty and take a long-term approach to economic development reflect this
	<p>Integrated</p> <p>Taking an integrated approach so that public bodies look at all the well-being goals in deciding on their wellbeing Objectives</p>	<ul style="list-style-type: none"> • The Well-being Objectives are aligned with those of the Ceredigion Public Services Board which promotes a shared understanding and coordinated response to the challenges Ceredigion faces to improving the well-being of citizens
	<p>Involvement</p> <p>Involving a diversity of the population in the decisions that affect them</p>	<ul style="list-style-type: none"> • The Council's Corporate Strategy has taken into account the Public Services Board's Assessment of Local Well-being, which has been produced following extensive engagement with citizens, including those with protected characteristics. • The Council consults on an annual basis with citizens and its engagement groups on the review and setting of its annual Well-being Objectives. • The Council's Engagement and Participation Strategy will help to ensure the voices of all groups in Ceredigion are heard.
	<p>Collaborative</p> <p>Working with others in a collaborative way to find shared sustainable solutions</p>	<p>The Council actively supports, amongst others, the following partnerships:</p> <ul style="list-style-type: none"> • The Growing Mid Wales Partnership • The Ceredigion Public Services Board • The Community Safety Partnership <p>The Council worked alongside Hywel Dda University Health Board and other partners in responding to COVID-19, including the setting up of two temporary hospitals, mass vaccination centres and a multi-agency panel to ensure the safe re-opening of community venues</p>
	<p>Prevention</p> <p>Understanding the root causes of issues to prevent them from occurring</p>	<ul style="list-style-type: none"> • The Council's Well-being Objectives have been set in order to prevent problems from occurring or getting worse. These include addressing the effects of poverty, the issues of rurality and improving the well-being of people of all ages, from early years through to older age. • The Through Age Model provides a coordinated approach to social care in order to prevent, reduce or delay the need for ongoing support, and allow people to remain in their own homes

NEW WELL-BEING OBJECTIVES FOR 2022/23

The Council's Corporate Strategy 2022-2027 outlines how the Council intends to deliver its four Corporate Well-being Objectives.

The core purpose of the Council's Corporate Strategy is to illustrate how the authority will support and promote sustainability and the wellbeing of the citizens of Ceredigion, through its long term Vision and Strategic Objectives.

The Corporate Well-being Objectives were reviewed during the summer of 2022.

The Corporate Well-being Objectives will enable the delivery of services that will enhance the social, economic, environmental and cultural well-being for the citizens and communities of Ceredigion. They have been identified through public engagement, the Ceredigion Assessment of Local Well-being and the ambitions of the new political administration.

The process started with a desktop analysis of a variety of evidence, in order to identify the main issues affecting the well-being of Ceredigion's citizens. This included reviewing the Ceredigion Public Service's Board Assessment of Local Well-being, which provides a comprehensive picture of well-being in the county, and included extensive public engagement during 2021. This told us about the concerns people had and the areas they would like to see improve.

A triangulation exercise was then conducted, looking at the new Administration's priorities for the next five years and comparing with the Assessment to identify any gaps. Workshops were run with Council services to provide a further check and to develop the individual steps to be taken to deliver the Objectives.

The draft Strategy and Well-being Objectives are being consulted on during the autumn of 2022. The draft Corporate Well-being objectives are:

- **Boosting the economy, supporting businesses and enabling employment**
- **Creating caring and healthy communities**
- **Providing the best start in life and enabling learning at all ages**
- **Creating sustainable, green and well-connected communities**

We developed the objectives through the lens of the Wellbeing of Future Generations Act, in particular identifying how we could maximise our contribution to the national well-being goals and also ensure that we use the sustainable development principle to ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.

We review our Corporate Well-being Objectives and steps annually to ensure they remain the right Objectives for Ceredigion and ensure we are delivering them.

The Strategy sets out clearly our priorities and demonstrates our commitment to improving social, economic, environmental and cultural well-being in the County.

To find out more about the new Corporate Well-being Objectives please see the Council's new Corporate Strategy 2022-27.

Our Vision:

Ceredigion County Council delivers value for money sustainable bilingual public services that support a strong economy and healthy environment while promoting well-being in our people and our communities

Draft Corporate Well-being Objectives



OUR PERFORMANCE

The Council routinely monitors and benchmarks its performance as part of its ongoing performance management arrangements. Performing benchmarking contributes to our overall effectiveness and efficiency by allowing us to identify best practice and opportunities for improvement.

Due to the impact of the COVID-19 pandemic, the reporting of the national Performance Accountability Measures (PAMs) was suspended for the 2020/21 year. As a result only a small number were collected and these are shown overleaf.

The last full year of collection was 2019/20, when twenty-one Performance Accountability

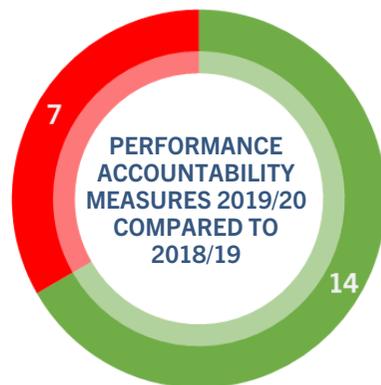
Measures were collected. Results from that year show that the majority (14) of Ceredigion's measures were meeting their target, with a further 3 slightly off target and 4 were significant off-target, (see chart below left).

When compared to the previous year, the majority (14) had shown improvement on the previous year, none were at the same level and the remaining 7 had decreased, (see chart below).

The Council is proactively working with Data Cymru and all 21 other Local Authorities nationwide to develop an improved set of measures to assist in benchmarking and work on this will continue during 2023/24.



- On target: 14 (72%)
- Off target by less than 5%: 3 (14%)
- Off target by more than 5%: 4 (13%)



- On target: 14 (67%)
- Off target by less than 5%: 0 (0%)
- Off target by more than 5%: 7 (33%)

OTHER KEY MEASURES

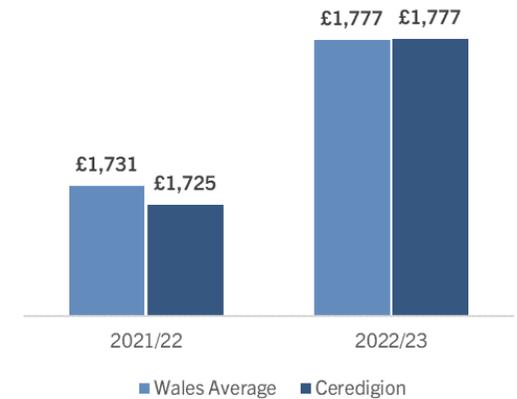
The Council uses a variety of performance indicators to monitor how well our services are performing in meeting the needs of service users and to measure their efficiency and value for money.

They measure performance across a wide range of Council services including: financial management, education, housing, leisure services, waste management and street cleansing. Targets are set for each measure and comparisons made with the West Wales region and the national picture.

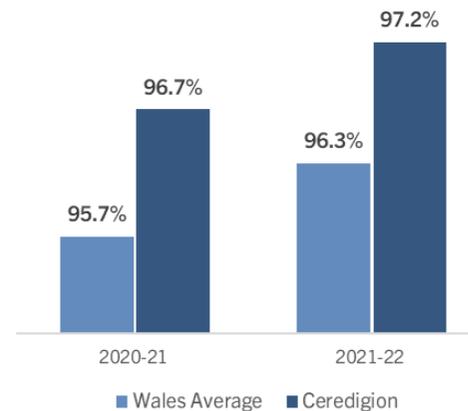
For example, despite the significant challenges over the last two years due to the COVID-19 pandemic, two key measures of efficiency, the collection of Council Tax and

Non-domestic (business) rates, both remain above average. The average Band 'D' Council Tax, often used as a comparator between different Counties, shows that current rates are equal to the national average across Wales.

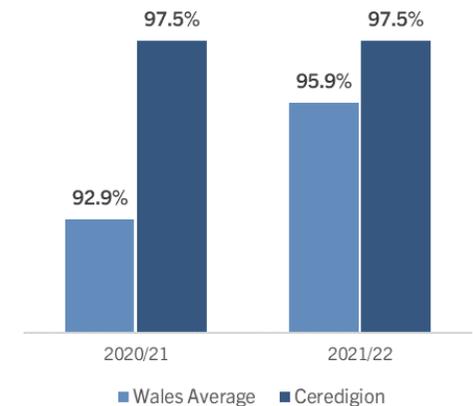
Band D Council Tax Rate



Council Tax Collection Rate



Non-Domestic Rates Collection

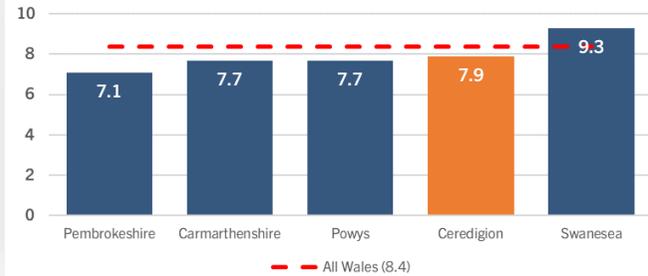


2020/21 PERFORMANCE ACCOUNTABILITY MEASURES

Sickness Absence

Number of days lost to sickness absence per Full-Time Equivalent employee (2020/21)

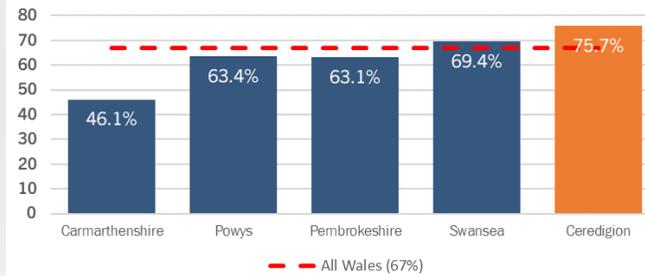
▼ Number



Homelessness Prevention

% of households successfully prevented from becoming homeless (2020/21)

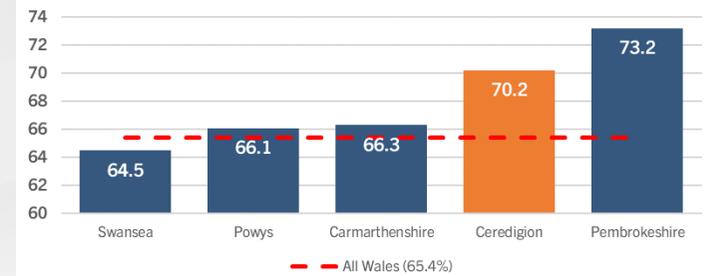
▼ Percentage



Recycling

Percentage of municipal waste collected and prepared for recycling or reuse (2020/21)

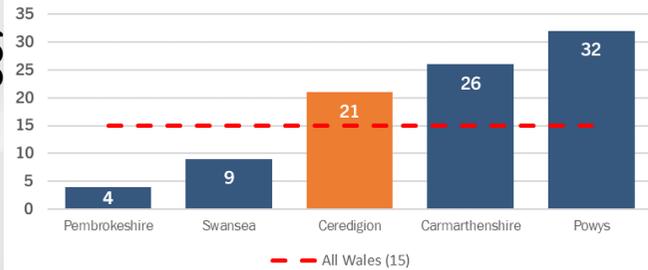
▼ Percentage



Apprenticeships

Number of apprentices on formal recognised apprenticeship schemes per 1,000 employees (2020/21)

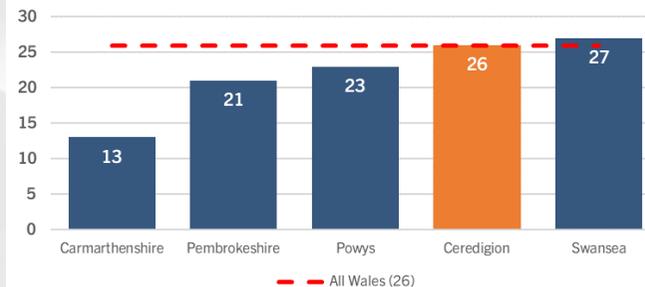
▼ Number



Affordable Housing

Number of additional affordable housing units delivered per 10,000 households (2020/21)

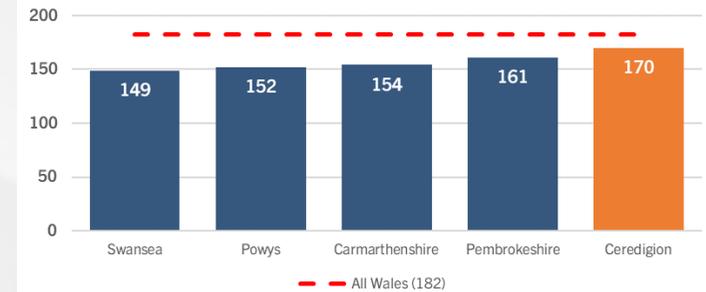
▼ Number



Waste Collection

Kilograms of household waste generated per person (2020/21)

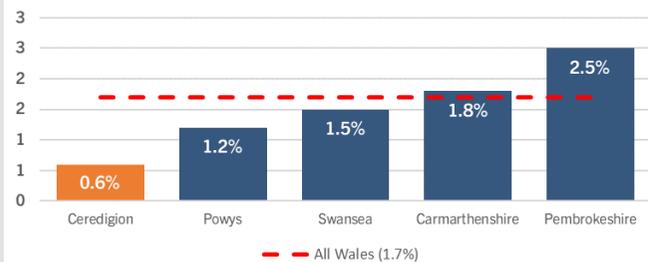
▼ Kgs



Not in Education Employment or Training (NEET)

Percentage of Year 11 leavers Not in Education, Training or Employment

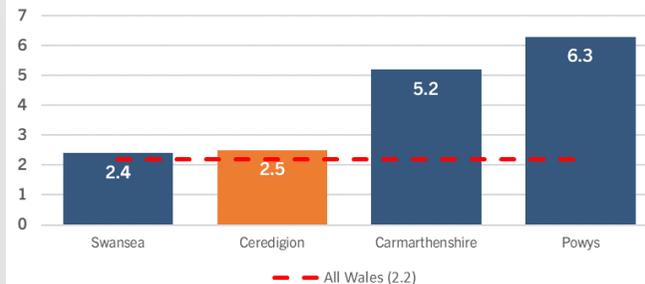
▼ Number



Fly-tipping

Average number of working days taken to clear fly-tipping incidents (2020/21)

▼ Number of days



Contact Us

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27 September 2022 Governance and Audit Committee Forward Work Programme

Standing Items:

Regulatory & Inspectorate Reports & Updates
 Council Responses to Regulatory and Inspectorate Reports
 Internal Audit Progress Reports
 AGS Progress Report
 Corporate Risk Register
 Forward Work Programme
 GAC Meeting Actions Log
 Complaints Reports
 Performance Reports

Additional items for consideration

27th September 2022	IA Progress Report – Q1 Internal Audit Self-Assessment 2021-2022 IA External Quality Assessment Report CM-IA Response to IA External Quality Assessment Report AGS Progress Update Report Annual Compliments, Complaints and FOI Report Public Services Ombudsman Wales Annual Letter Corporate Risk Register – Q1	Alex Jenkins Alex Jenkins Marion Pryor Alex Jenkins Harry Dimmack Marie Neige-Hadfield Marie Neige-Hadfield Alun Williams
17 th November 2022	Annual Financial Statement only (to include AGS) to be followed by Council	Duncan Hall
19 th January 2023	IA Progress Report – Q2 IA Charter Internal Audit National Fraud Initiative Self-Appraisal Draft Annual Governance Statement 2022-2023 & Local Code of Corporate Governance (2023/2024) Corporate Risk Register – Q2 Corporate Self-Assessment Report Mid-Year Report for Compliments, Complaints and FOI	Alex Jenkins Alex Jenkins Alex Jenkins Harry Dimmack Alun Williams Alun Williams/Rob Starr Marie Neige-Hadfield
9 th March 2023	Internal Audit Progress Report – Q3 Internal Audit Strategy and Plan 2023-2024 Internal Audit Report – Governance Framework Review 2022/2023 Self-assessment of good practice and evaluating effectiveness of Governance and Audit Committee Corporate Risk Register – Q3	Alex Jenkins Alex Jenkins Alex Jenkins Harry Dimmack Alun Williams

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