

## Cyngor Sir CEREDIGION County Council

<b>REPORT TO:</b>	<b>Governance and Audit Committee</b>
<b>DATE:</b>	<b>9 March 2023</b>
<b>LOCATION:</b>	<b>Hybrid</b>
<b>TITLE:</b>	<b>Report on Draft Annual Governance Statement 2022-2023 and Governance Framework Document</b>
<b>PURPOSE OF REPORT:</b>	<b>To present the Draft Annual Governance Statement 2022-23 and Governance Framework Document 2022-23 update</b>
<b>For:</b>	<b>Decision</b>

### Background:

A report on the Governance Framework Document was presented to this committee on the 17<sup>th</sup> of January 2023 ([link](#)). This report set out an introduction to the annual review of the governance framework and the requirements that local authorities must abide by.

### Updated Governance Framework Document

The Governance Framework Document (**Appendix 1**) has been updated following the previous 17<sup>th</sup> January report to ensure it remains up to date:

- Evidence/actions has been removed from the document where it is no longer relevant or have been completed.
- Additional evidence has been added for B3.1 in response to discussions at the previous meeting regarding the increased score from 5/6 to 7/8.
- Actions updated to reflect current position including:
  - A1.1 & A1.2 – Including that MO to continue to advise on Code of Conduct matters, that appraisals have recommenced. Also updated to reflect current position with Audit Wales re: Follow-Up Review of the Planning Service.
  - A1.4 – Updated to reflect outstanding actions on Whistleblowing Policy review and activity reporting, and Revised Code of Conduct and Declaration of Interest forms.
  - A3.1 – Updated action to clarify Privacy Notices to be provided to Councillors by Data Protection Officer.
  - A3.1 – Added action that CMIA is to complete professional qualification.
  - B3.1 – Updated action to explain implementation of Engagement and Participation policy to be reviewed before action is complete.
  - E2.2 – Added that Delegated Decision Register to be published.

All changes to the Framework since it was last presented to the committee are shown using tracked changes in red.

## Annual Governance Statement

The Draft Annual Governance Statement 2022-23 (see **Appendix 2**) has been prepared in accordance with the framework. It includes:

- An acknowledgement of responsibility for ensuring good governance;
- Reference to the assessment;
- An opinion on the level of assurance that the governance arrangements can provide;
- A progress report on how issues identified last year have been resolved;
- An agreed action plan to deal with governance issues over the next year; and
- A conclusion.

## RECOMMENDATION(S):

The Committee is requested to:

- i) Note the Updated Governance Framework Document 2022-23 (**Appendix 1**); and
- ii) Recommend that Council endorses the Draft Annual Governance Statement 2022-23 (**Appendix 2**).

**REASON FOR RECOMMENDATION(S):** To progress the publication of the Annual Governance Statement 2022-2023.

<b>Appendices:</b>	<b>Appendix 1:</b> Updated Governance Framework Document 2022-2023 <b>Appendix 2:</b> Draft Annual Governance Statement 2022-23
<b>Head of Service:</b>	Elin Prysor, Corporate Lead Officer – Legal & Governance Services / Monitoring Officer
<b>Reporting Officer:</b>	Harry Dimmack, Governance Officer
<b>Date:</b>	17/02/2023

# CEREDIGION COUNTY COUNCIL



## Governance Framework Review 2022 -2023

Scoring						
Note that each score used throughout this Governance Framework Document is a score out of 10 e.g. a score of 7/8 means a score of between 7 and 8 out of a total 10 marks.						
A. Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law						
Local government organisations are accountable not only for how much they spend, but also for how they use the resources under their stewardship. This includes accountability for outputs, both positive and negative, and for the outcomes they have achieved. In addition, they have an overarching responsibility to serve the public interest in adhering to the requirements of legislation and government policies. It is essential that, as a whole, they can demonstrate the appropriateness of all their actions and have mechanisms in place to encourage and enforce adherence to ethical values and to respect the rule of law.						
Sub-principles	Behaviours	Evidence	Expected	✓/X	Score	Action
A1. Behaving with integrity	Elin Pryor / Lowri Edwards/ Duncan Hall / Alex Jenkins A1.1 Ensuring Members and Officers behave with integrity and lead a culture where acting in the public interest is visibly and consistently demonstrated thereby protecting the reputation of the organisation	<ul style="list-style-type: none"> <li>Code of Conduct for Members (updated in 2016) available on the Council's website, intranet site (CeriNet) under Councillor Resources, and in the <u>Constitution</u>.</li> <li>Members Code of Conduct Flowchart (updated in 2016).</li> <li>Code of Conduct for Officers* (review undertaken and currently awaiting approval) available along with all Corporate policies and strategies via Council website/CeriNet.</li> <li><del>Individual sign-off with regard to compliance.</del></li> <li><u>Mandatory</u> Induction and follow-up training on Code of Conduct and ethics provided to all Members. <del>A comprehensive Induction Programme for Members held following the Local Elections 2022 of which Code of Conduct training was mandatory.</del></li> <li>Ethics/Fraud training provided in collaboration with Council's insurer at Corporate Managers' quarterly workshop <del>28.5.2021. Slides from presentation are</del> forming a basis for e-learning module for all Staff <del>and.</del></li> <li>Internal Audit ('IA') &amp; Governance Services working with Learning &amp; Development <del>to prepare</del> <u>prepared</u> scenarios for training. Training supported by recent review of Council's Strategy on Counter-Fraud, Corruption &amp; Bribery (to include Anti-Money Laundering).</li> <li>Follow up Internal Audit of Council's arrangements regarding Ethics also in progress (currently in review).</li> <li>Day to day advice is provided by the Monitoring Officer ('MO') and Scrutiny Support Officer.</li> <li><u>Disciplinary Policy</u> (Nov 2017).</li> <li>Personal Development Review.</li> <li>Register of Members interests, available from the Council's Democratic Services, reviewed by MO.</li> <li><u>Declaration of Interest</u> and <u>Hospitality</u> forms for Officers and Members on CeriNet.</li> <li>Regular reminders and advice is sent by the MO to Staff via internal News update emails.</li> <li>Monitoring and review by MO of Chief Officers' declarations annually.</li> <li>MO advises Chief Officers <u>and Members</u> on need to declare close personal associations with other Officers or Members (MO News Email Update of 20.7.2021 on CeriNet) including advising Chief Officers at Leadership Group Meetings</li> </ul>	Codes of Conduct	✓	7/8	<p><del>Good overall governance considered compliant and meets best practice. No further action required.</del></p> <p><u>Acceptable - Minor adjustments may be required.</u></p> <p>MO to continue to advise Members further on the need to declare hospitality/gifts <u>Code of Conduct</u>.</p> <p>MO to continue to advise Chief Officers further on the need to declare:</p> <ul style="list-style-type: none"> <li>close personal associations with other Officers or Members,</li> </ul> <p>Ongoing review on Chief Officers business declarations</p> <p><del>MO and CLO Democratic Services to continue to review</del> <u>Review</u> Members holding directorships, trusteeships, or memberships <del>when appointed onto outside bodies, and committees,</del> MO to consider member feedback and added value <del>and continue to update Code of Conduct for Officers and Members.</del></p>
			Individual Sign-off with regard to compliance with the code	✓		
			Induction for new Members and Staff on standard of behaviour expected	✓		
			Performance appraisals otherwise known as Personal Development Reviews	✓		
			Officer Declaration forms			

		<ul style="list-style-type: none"> <li>Declaration of interest process to be extended to include requirement regarding related-parties: that officers and Members declare if they are closely-related to other officers, Members or teachers. Specific declaration/ return required if this includes/does not include a Chief Officer (and to state relationship).</li> <li>Declaration of interest process to be extended to include requirement that Members specify Directorships- company name and number, (un)remunerated, private interest or Council appointment. MO to remind Members of the need to accurately disclose all Directorships (including dormant companies).</li> <li>Declaration of interest process to be extended to include requirement that Members specify role within memberships- observer, member, volunteer, Committee member, Board member or Trustee.</li> <li>Officers' declaration of interest to include requirement to declare if they or a close family member, or any person or organisation acting on their behalf, are on the Board, management committee or other controlling group of an organisation with which the Council has significant dealings.</li> <li><del>The Code of Conduct for Officers has been substantially reviewed and will be updated soon.</del></li> <li>Update advice on Council Employees' Declarations and Registration of Interests news email updates published.</li> <li>MO advising of Officers re declarations of interest is ongoing. Regular reminders through News Updates on CeriNet system and at Leadership Group. Updates on Council Employees' Declarations of Interest and Hospitality were published on 3<sup>rd</sup> March 2022, 28<sup>th</sup> June 2022 and 5<sup>th</sup> October 2022 on the Council's CeriNet Site, including links to the relevant forms and Code of Conduct for Local Government Employees, along with a reminder that any queries or requests for advice should be made to the MO.</li> <li>Chief Officers informed through CeriNet system news update of MO email re declaring interests and Hospitality and reminder to Chief Officers sent.</li> <li>Review is currently being undertaken of the external bodies that have appointed Members, including added value, and also updating of the Constitution.</li> <li>MO to undertake enquiries with company secretaries as necessary to ascertain basis of Members <u>trustee/Directorship</u> interests within charitable organisations or companies, and rationale. Also to seek amendment of Articles of Association or resignation of Council directorships if necessary</li> <li>Declarations of interest by Members and Officers at meetings, an opportunity to make reference to any close personal contacts/roles etc.</li> </ul>				<p><del>Update</del> Dispensations forms for Members <u>updated</u></p> <p><del>Appraisals were halted due to Covid-19 Pandemic but have now recommenced (undertaken in May 2021 and continue to be held virtually).</del></p> <p>Reviewed Code of Conduct for Officers to be issued once approved.</p> <p>Officers to complete a Mandatory Ethics/Fraud e-training module once completed &amp; approved.</p> <p>Planning/Development Management Committee governance actions/documents established, training to be provided and progress to be reviewed during 2022-2023.</p> <p><u>Discussions are currently taking place with Audit Wales to support their Planning Service Follow-Up Review. Any recommendations will be responded to</u></p>
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		<ul style="list-style-type: none"> <li>• Ongoing review on Chief Officers' business declarations.</li> <li>• Update Dispensations forms for Members completed.</li> <li>• Members required to update Register of Interests in accordance with the Code of Conduct, and in addition, annually, which is opportunity to reference any close personal associates/roles etc. This now includes lay/independent members of the Ethics &amp; Standards Committee and Governance &amp; Audit Committee. Register of Interests booklet published for each Member on Council Website.</li> <li>• Proactive regular advice and reminders sent to Members and Officers as required.</li> <li>• MO to advise Officers further on the need to declare interests in organisations which actually, or may conflict with Council interests including: <ul style="list-style-type: none"> <li>○ Contractors;</li> <li>○ School Governors;</li> <li>○ Clerk to Town and Community councils;</li> <li>○ Members of Town and Community councils; and</li> <li>○ School Governors.</li> </ul> </li> <li>• MO to advise Officers further on the need to declare: <ul style="list-style-type: none"> <li>○ Directorships; and</li> <li>○ Other employment</li> </ul> Including whether conflicting with the Council's interests or not.</li> <li>• Dispensations forms for Members updated (2022).</li> <li>• Professional Qualified Officers and Teachers have to meet their professional body/organisation requirements.</li> <li>• Members complete a HR training module.</li> <li>• Training on standards of behaviour is provided to Managers for Staff.</li> <li>• MO circulates to political group leaders updates/decisions from the Adjudication Panel for Wales, <del>whose role is to determine alleged breaches by elected and co-opted members against their authority's statutory code of conduct.</del></li> <li>• MO meets with political group leaders quarterly to consider their new duties to uphold standards of conduct of Members in their group.</li> <li>• Political group leaders to <del>engage</del>cooperate with the Ethics and Standards Committee as required in pursuance of their new duties.</li> <li>• Political group leaders to complete template setting out actions undertaken to evidence compliance with their new duties.</li> <li>• Local Resolution Procedure for Members: ungrouped /unaffiliated Member receives Council Chair/Vice Chair' advice/support.</li> </ul>				
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		<ul style="list-style-type: none"><li>The Ethics and Standards Committee has <u>received training on its</u> new duties (from May 2022) under the Local Government and Elections (Wales) Act 2021 ('2021 <del>Act</del>'), <del>to include: Act</del>'),<ul style="list-style-type: none"><li><del>Monitoring compliance by leaders of political groups on the Council with their duties under S.52A(1) Local Government Act 2000;</del></li><li><del>Advising, training or arranging to train leaders of political groups on the Council about matters relating to their duties under S.52A (1) Local Government Act 2000.</del></li><li><del>The duty to monitor compliance of political group leaders is in relation to standards of conduct, and ensure that this is visible, and consistently demonstrated and evidenced to protect the Council's reputation.</del></li></ul></li><li>The Terms of Reference of the Development Management Committee (formerly Development Control Committee) have been revised.</li><li>The Operational Procedures document for the Development Management Committee has been revised.</li><li>The Scheme of Delegations contains criteria for applications, which must be referred to the Development Management Committee, and those applications that can be delegated to the Corporate Lead Officer.</li><li>A Protocol for Good Practice for Councillors at Development Management Committee has been produced and included in the Constitution.</li></ul>				
Elin Prysor A1.2 Ensuring Members take the lead in establishing specific standard operating principles or values for the Organisation and its Staff and that they are communicated and understood. These should build on the Seven Principles of Public Life (the Nolan Principles)	<ul style="list-style-type: none"><li>A good working relationship exists with <del>the Welsh Government as a</del> key <del>regulator. Regular dialogue is maintained with representatives from Audit Wales regulators.</del></li><li><del>This vision for the Council has been reviewed and endorsed by Cabinet, and the vision sets out a number of long term Strategic Objectives.</del></li><li><u>The Corporate Strategy 2022-2027 includes Corporate Well-being Objectives</u> setting out the Council's priorities and high level objectives with supporting actions on an annual basis. Council considered the draft Self-assessment and Annual Review of Performance and Well-being Objectives Annual Report 2021-22 on 15.12.22.</li><li><u>Code of Conduct for Members (2016).</u></li><li><u>Register of Members' interests available from the Council's Democratic Services</u> reviewed by MO.</li><li>Declarations of interest by Members and Officers at meetings.</li><li>Chief Officers' annual Declarations of Interest and continuing obligations to declare interests.</li><li>Member annual update of Register of Interests and continuing obligations to declare interests (including lay/independent members of the Ethics &amp; Standards Committee and Governance and Audit Committee).</li></ul>	<div>Standards reflect WG Public Service Values</div> <div>Communicating shared values with Members, Staff, the community and partners</div>	<div>✓</div> <div>✓</div>	7/8	<div><del>Good overall governance considered compliant and meets best practice. No further action required.</del></div> <div><u>Acceptable - Minor adjustments may be required.</u></div> <div>Planning/Development Management Committee governance actions/documents established, training to be provided and progress to be reviewed during 2022-2023.</div> <div><u>Audit Wales Planning Service Follow-Up Review ongoing. Any recommendations will be responded to</u></div>	

		<ul style="list-style-type: none"> <li><del>Regular dialogue with Public Services Ombudsman for Wales ('PSOW'), and other regulators including Estyn, CIW, IGO and IPCO.</del></li> <li><del>The Terms of Reference of the Development Management Committee (formerly Development Control Committee) have been revised.</del></li> <li><del>The Operational Procedures document for the Development Management Committee has been revised.</del></li> <li><del>The Scheme of Delegations contains criteria for applications, which must be referred to the Development Management Committee, and those applications that can be delegated to the Corporate Lead Officer.</del></li> <li>A Protocol for Good Practice for Councillors at Development Management Committee has been produced and included in the Constitution.</li> </ul>				
Elin Prysor / Lowri Edwards	A1.3 Leading by example and using these standard operating principles or values as a framework for decision making and other actions	<ul style="list-style-type: none"> <li>Minutes for all committees contain Declarations of Interest-Officers and Members.</li> <li>The Constitution is subject to regular reviews, with ongoing updates as required, including presenting proposed changes to Cross Party Constitution Working Group, to make recommendations on changes to Constitution to Council. Further revision is ongoing, as the Constitution is a live document, to reflect legislative changes and according to need. Council approved amendments on 3.3.22, 8.7.22 and 20.10.22..</li> <li>A comparison exercise was undertaken of the Current Constitution against the Model Constitution issued by WLGA, with changes made where necessary to ensure the Council's constitution remains up to date.</li> <li>Politically Balanced Constitution Cross Party Working Group meets regularly to consider proposals for Constitution updates. Meetings held 20.6.22 and 12.9.22.</li> <li>MO/Governance Officer report to Council to update delegations and Constitution.</li> <li><del>The Council has established a Task Task</del> and Finish Group (T&amp;F group) to develop actions that will improve the Planning Service including decision making.</li> <li>The Terms of Reference of the Development Management Committee <del>(formerly Development Control Committee)</del> have been revised to clearly state its purpose, role and responsibilities, and how it links to Corporate Priorities.</li> <li><del>An Operational Procedures document for the Development Management Committee has been revised. The Operational Procedures define applications that are strategically important and 'major' planning applications.</del></li> </ul>	<p>Leadership values set out by WG are followed</p> <p>Decision making practices</p> <p>Declarations of interest made at meetings</p> <p>Conduct at meetings</p> <p>Shared values guide decision making</p> <p>Develop and maintain an effective standards committee</p>	<p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p>	9/10	<p>Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.</p> <p><del>Leadership Group to be updated on e-learning with HR reporting to Leadership Group.</del></p>



		<ul style="list-style-type: none"> <li><del>The Operational Procedures document addresses the arrangements in respect of local ward members addressing the Committee.</del></li> <li>A Protocol for Good Practice for Councillors at Development Management Committee has been produced and included in the Constitution.</li> <li>Development Management Committee Scheme of Delegations has been revised to allow it to better focus on more strategically important and major applications.</li> <li>The Scheme of Delegations contains criteria for applications, which must be referred to the Development Management Committee, and those applications that can be delegated to the Corporate Lead Officer.</li> <li>A 'cooling-off' <del>group</del>process has been established within the Development Management Committee Operational Procedures in order to review planning applications, which may, if approved, be a significant departure from policy.</li> <li>Chief Officer annual Declarations of Interest.</li> <li><u>Corporate Strategy</u> (2022-2027) contains the priorities of the Council.</li> <li>The Well-being and Improvement Objectives build on the priority areas identified in the <u>Corporate Strategy 2022-2027</u> and are reviewed annually These are developed in consultation with the public and Members. Council considered the draft Well-being and Improvement Objectives Annual Report 2020-21 and approved the Well-being Objectives for 2022-23 on 21.10.21, which are published on the Council's website.</li> <li>A mandatory E-learning training module, <del>introduced in September 2017,</del> on the Well-Being of Future Generations Act 2015 ('WFGA') must be completed by all Staff <del>(between September 2017 and November 2021 completed by 2,834 employees, of which 343 through Welsh and 2,491 through English). Between April and November 2021, 242 total employees completed the module, 40 through Welsh, 202 through English (* these figures include leavers). Reminders issued to Staff who not yet completed module and Leadership Groups receive periodic reports.</del></li> <li>Members' standards and conduct matters considered by the Council's <u>Ethics and Standards Committee</u>. Public meetings held regularly, and chaired by an independent person- determine dispensations, and consider strategic/policy issues and receive updates from PSOW <del>Casebook</del><u>Findings</u> &amp; APW cases.</li> <li><del>The main duties of the Ethics &amp; Standards Committee are to improve standards of Member conduct and operation of the Code of Conduct for Members.</del></li> </ul>				
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	<ul style="list-style-type: none"><li>• Code of Conduct Training provided to all Members following the Local Elections 2022.</li><li>• Committee and Members are advised by the MO- <u>&amp; Standards Officer</u>.</li><li>• Ethics and Standards Committee engage actively in the training of Members.</li><li>• Standards Conference 2018 jointly hosted by Powys &amp; Ceredigion County Council (held on 14 September 2018). A similar conference was to be hosted by North Wales Councils in 2021-postponed due to Covid-19.</li><li>• Annual Ethics &amp; Standards Committee Report reported to Council in October 2022.</li><li>• Governance and Audit Committee carry out a benchmarking exercise annually to provide further assurance on the review of the <u>Annual Governance Statement</u> ('AGS') process.</li><li>• IA review and report on the process annually. Governance &amp; Audit Committee meets regularly to consider governance and external regulator reports. Chaired by non-executive member. 2021/22 IA review reported on 10.3.22 and an update to address changes made reported on 6.6.22.</li><li>• Governance and Audit Committee Annual Report reported to Council on 23.9.2021 and approved.</li><li>• <u>Covid-19 Governance Structure</u> introduced by the Council, to include temporary delegated powers for the Council's Chief Executive and Leadership Group through use of Urgent Decisions for decisions relating to the Council's COVID-19 response), in accordance with Council's Constitution. <del>The Urgent Decision of the Leader was reviewed regularly, and expired on 31.8.2021.</del></li><li><del>• Gold Command Record of Decisions published on the Council's website).</del></li><li>• <u>Record of Decisions</u>, made by the Covid-19 Leadership Group ('Gold Command') published on the Council's Website.</li></ul>				
Elin Prysor/Alun Williams A1.4 Demonstrating, communicating and embedding the standard operating principles or values through appropriate policies and processes which are reviewed on a regular basis to ensure that they are operating effectively	<ul style="list-style-type: none"><li>• Effective <u>'Strategy to Counter Fraud, Corruption and Bribery (to include Anti-Money Laundering)'</u> updated and approved by Council 17.6.21(minutes confirmed 23.9.21).</li><li>• Internal Audit Annual Report on Counter Fraud presented to Governance and Audit Committee at year-end. Last report presented 6.6.22.</li><li>• <u>Register of Members' interests</u> available from the Council's Democratic Services.</li><li>• Declarations of interest/hospitality for Officers, as required.</li><li>• MO circulates reminder re interest/hospitality declarations to Staff quarterly.</li></ul>	Anti-fraud and corruption policies are working effectively Up-to-date register of interests (Members and Staff) Up-to-date register if gifts and hospitality Whistleblowing policies are in place and protect individuals raising concerns	✓ ✓ ✓ ✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required  Delegated Decisions Register to be published.  Continued monitoring of the Mandatory e-learning take up of Whistleblowing module. <del>Currently lower than required.</del>

		<ul style="list-style-type: none"> <li>NFI match highlights Staff who are directors of companies that have dealings with the Council – any non-declarations investigated by IA and reported to MO.</li> <li>Chief Officer Declarations of interest updated annually.</li> <li>Politically Restricted Post Register for Officers maintained and <u>Political Restrictions on Local Government Employees Policy</u> available to employees on CeriNet. <u>Register of Politically Restricted Posts published on Council website.</u></li> <li>Ethics/Fraud training provided <del>in collaboration with Council's insurer at Corporate Managers' quarterly workshop 28.5.2021. Slides from presentation forming 2021</del> forming a basis for e-learning module for all Staff, and IA &amp; Governance Services working with Learning &amp; Development to prepare scenarios for training.</li> <li>Training supported by recent review of Council's Strategy on Counter-Fraud, Corruption &amp; Bribery (to include Anti-Money Laundering).</li> <li>Ethics Audit undertaken during 2019. Follow up Internal Audit of Council's arrangements regarding Ethics also in progress (currently in review).</li> <li><u>Whistleblowing Policy</u> available to Employees and Contractors (updated 2018 – <u>currently under review awaiting approval</u>) on CeriNet and is updated as necessary.</li> <li>MO is the Corporate Lead Officer ('CLO'), and advises Whistle-blowers, as appropriate.</li> <li>A mandatory E-learning training module on Whistleblowing must be completed by all Staff. The MO keeps a register of referrals and reports 6-monthly to the Overview and Scrutiny Co-ordinating Committee.</li> <li>All complaints are dealt with in accordance with the corporate procedures which include informal and formal stages and these are communicated to Staff on a regular basis.</li> <li>The complaints system is monitored by the Corporate Complaints and Freedom of Information Manager.</li> <li>Revised <u>Corporate Concerns and Complaints Policy</u> published 1.10.2021.</li> <li>Improvements are implemented as a result of complaints /recommendations received.</li> <li><u>Council Complaints and Freedom of Information Privacy Notice.</u></li> <li>Annual Complaints Report considered by the Governance and Audit Committee and Cabinet prior to approval by Council, presented to Council and noted.</li> <li>Annual Complaints Report includes Lessons Learned from complaints received.</li> <li><u>Ethics and Standards Committee</u> and all other committee agendas/minutes contain disclosures of interests.</li> <li><u>Minutes for all committees</u> published on the Council's Website.</li> </ul>	Whistleblowing policy has been made available to members of the public, employees, partners and contractors	✓		<p><del>Whistleblowing Policy</del> <u>has been reviewed – and updated - to be presented to Overview and Scrutiny Committee and Cabinet for approval.</u></p> <p><u>Revised Officer Code of Conduct and Declaration of Interest forms to be presented to Scrutiny Committee</u></p> <p><u>Report on generic whistleblowing activity to be presented to Overview and Scrutiny Co-ordinating Committee.</u></p>
			Complaints policy and examples of responding to complaints about behaviour	✓		
			Changes/improvements, as a result of complaints received and acted upon	✓		
			Members and Officers code of conduct refers to a requirement to declare interests	✓		
			Minutes show declarations of interests were sought and appropriate declarations made	✓		

		<ul style="list-style-type: none"> <li>• <u>Cabinet Decision Notices</u> published on the Council's Website.</li> <li>• Preparation for publication of delegated decisions register ongoing. Development Management Committee delegated decisions published for each Development Management Committee.</li> <li>• <u>Register of Contracts</u> published on Council Website.</li> <li>• Necessary changes to Constitution regarding Governance and Audit Committee per 2021 Act approved by Council 23.9.21, 3.3.22, 8.7.22 and 20.10.22.</li> <li>• The Terms of Reference of the Development Management Committee have been revised.</li> <li>• The Operational Procedures document for the Development Management Committee/Development Management Committee has been revised.</li> <li>• A Protocol for Good Practice for Councillors at Development Management Committee has been produced and included in the Constitution.</li> <li>• Decisions made contrary to officer advice and that do not fulfil the criteria of the checklist being developed for the Development Management Committee will be annually reviewed as part of the AMR process and reported to the internal audit procedures.</li> <li>• <del>Report on the size of the Governance and Audit Committee presented to Democratic Services Committee 21.5.2021, which agreed to recommend to Council that the Committee should comprise 6 County Council Members and 3 lay members (9 total). Report on size of Committee presented to Council 17.6.2021 and Council agreed same member composition from 5.5.2022.</del></li> </ul>				
A2 Demonstrating strong commitment to ethical values	Elin Pryor A2.1 Seeking to establish, monitor and maintain the organisation's ethical standards and performance	<ul style="list-style-type: none"> <li>• <u>Ethics and Standards Committee</u> championing ethical compliance to ensure that public have trust and confidence that Members and Officers work to highest ethical and moral standards.</li> </ul>	Scrutiny of ethical decision making	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.
			Championing ethical compliance at governing body level	✓		
	Elin Pryor A2.2 Underpinning personal behaviour with ethical values and ensuring they permeate all aspects of the organisation's culture and operation	<ul style="list-style-type: none"> <li>• The <u>Ethics and Standards Committee</u> has been proactive, leading on training sessions and putting procedures in place for dispensation arrangements. The structure has recently been reviewed to improve efficiency and effectiveness.</li> <li>• Officers such as Internal Auditors, sign an annual Code of Ethics affirmation.</li> <li>• Internal Audit Charter approved by <u>Governance &amp; Audit Committee</u> 19 January 2022.</li> <li>• Carmarthen County Council undertook an independent audit of ethics within the Council during 2019. Follow up Internal Audit of Council's arrangements regarding Ethics in progress (currently in review).</li> </ul>	Provision of ethical awareness training	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required. All actions have commenced and are on-going

		<ul style="list-style-type: none"> <li>Training Needs Analysis Questionnaire has been circulated by Council newsletter to Staff requesting opinion on ethical culture of Council &amp; training module planned in response to feedback.</li> </ul>				
	Geraint Edwards A2.3 Developing and maintaining robust policies and procedures which place emphasis on agreed ethical values	<ul style="list-style-type: none"> <li>Employee Handbook is reviewed annually, is available on <u>CeriNet</u>, sets out the expected Employee <u>behaviour</u> and includes the <u>Code of Conduct for Local Government Employees</u>.</li> <li>Training on equality and diversity and recruitment and selection including equal opportunities is mandatory for all Ceredigion County Council Managers.</li> <li>All Staff must complete an e-learning module on Equality &amp; Diversity.</li> <li><u>Procurement Strategy 2018-2022</u> was approved by Council 19<sup>th</sup> June 2018.</li> <li>Procurement training also being rolled out to Staff.</li> <li>Council Recruitment Policy and DBS Policy.</li> </ul>	Appraisal processes take account of values and ethical behaviour Staff appointments policy Procurement policy	✓ ✓ ✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
	Duncan Hall A2.4 Ensuring that external providers of services on behalf of the organisation are required to act with integrity and in compliance with high ethical standards expected by the organisation	<ul style="list-style-type: none"> <li><u>Standard Terms and Conditions</u> for all Suppliers of Goods and services include conditions relating to Equality and Diversity and are available on the Council's website.</li> <li><u>Procurement Strategy 2018-2022</u></li> <li>In-House software used to retrospectively check for suspected duplicate payments.</li> <li>Council has developed a Modern Slavery Policy (sent to contractors of the Council), Anti-Slavery Annual Statement 2019-2020 and Code of Practice Ethical Employment in Supply Chains.</li> </ul>	Agreed Values in partnership working -Statement of business ethics communicates commitment to ethical values to external suppliers -Ethical values feature in contracts with external service providers Protocols for partnership working	✓ ✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
A3. Respecting the rule of law	Elin Prysor/ <del>Arwyn Morris</del> A3.1 Ensuring members and Staff demonstrate a strong commitment to the rule of the law as well as adhering to relevant laws and regulations	<ul style="list-style-type: none"> <li><u>Council Constitution</u>. Consideration is being given to the Data Protection Principles, and processing of personal information in the context of Council Committees and all Members.</li> <li>Training <del>has been scheduled</del> for all Members (<u>on</u> Introduction for Council, including GDPR) following the May 2022 Elections.</li> <li>Statutory powers and legal implications included in every decision making Cabinet report.</li> <li>Legal and Financial advice/implications is provided on all appropriate reports for decision.</li> <li>The MO and Legal Services are available to advise as appropriate.</li> <li>The IA Service is available to advise as appropriate.</li> <li>The MO attends Leadership Group/Cabinet/Council meetings.</li> </ul>	Statutory provisions Statutory guidance is followed Constitution	✓ ✓ ✓	7/8	<del>Good overall governance considered compliant and meets best practice. No further action required.</del>  <del>Further training to be</del> Acceptable - Minor adjustments may be required.  Training provided to all Members regarding their responsibilities in relation to Data Protection Principles and privacy notices.



		<ul style="list-style-type: none"> <li>The MO routinely attends many public meetings, as required, subject to availability.</li> <li>In the absence of the MO, the Deputy MO will attend Cabinet and Council meetings.</li> <li><del>Gold Command is no longer meeting</del></li> <li>Gold Command Record of Decisions published on the Council's website).</li> <li>The 2021 Act has an effect on corporate bodies, including the Council, and work to ensure compliance has taken place, including through the Cross-Party Constitution Working Group (Members of each political group in attendance), reports to the Governance and Audit Committee and Council, with a Council Action plan having been prepared and updated regularly, and meetings with relevant Officers and CLOs held, as appropriate.</li> </ul>				<p>-Privacy notices for Councillors being developed <del>and</del> to be provided <del>—</del> <u>by Data Protection Officer</u></p>
	<p>Elin Pryor / Duncan Hall / Alex Jenkins</p> <p>A3.2 Creating the conditions to ensure that the statutory Officers, other key post holders and members are able to fulfil their responsibilities in accordance with legislative and regulatory requirements.</p>	<ul style="list-style-type: none"> <li>Job descriptions &amp; person specifications clearly define the roles and responsibilities required of posts.</li> <li>Members' Role descriptions set out their respective responsibilities.</li> <li>Compliance with CIPFA's Statement on the Role of the Chief Financial Officer in Local Government (CIPFA, published 13 April 2016).</li> <li>Compliance with CIPFA's Statement on the Role of the Head of Internal Audit in Public Service Organisations (CIPFA, published 9 April 2019) &amp; contribution published in CIPFA's accompanying Putting Principles into Practice document (2019)).</li> <li>Terms of reference are included in the Constitution.</li> <li>Reporting to Governance and <u>Audit Committee</u>.</li> <li><u>Financial Regulations and Financial Procedure Rules (Document F Constitution)</u>.</li> <li><u>Contract Procedure Rules</u> (Document G in the Council's Constitution).</li> <li>Codes of Conduct (see above).</li> <li>Compliance with Specific Codes e.g. <u>Internal Auditors' Public Sector Internal Audit Standards</u> ('PSIAS', March 2017)</li> <li>Members of Governance and Audit Committee updated on fraud including IA annual counter fraud report.</li> <li>Statutory Officers accountable to the Chief Executive ('CE') and the Council.</li> <li>Regular meetings between CE, S.151 Officer &amp; MO.</li> <li>Corporate Manager – Internal Audit ('CMIA') has free &amp; unfettered access to Members and Officers at all levels, and right of access as per Council's <u>Constitution</u> and Internal Audit Charter.</li> <li>Register of Members' Interests published on the <u>Council Website</u>.</li> </ul>	<p>Job descriptions/specific ations</p> <p>Compliance with CIPF's statement on the role of the Chief Financial Officer in local government (CIPFA 2016)</p> <p>Terms of reference</p> <p>Committee support</p>	<p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p>	9/10	<p>Good <del>e-</del> Overall governance considered compliant and meets best practice. <del>No further action required.</del></p> <p><u>CMIA to complete professional qualification</u></p>

		<ul style="list-style-type: none"><li>2021 Act received Royal Assent January 2021 and makes changes to the Governance and Audit Committee.</li><li>GAC Terms of Reference updated according to the new Act.</li></ul>				
Elin Prysor / Duncan Hall A3.3 Striving to optimise the use of the full powers available for the benefit of citizens, communities and other stakeholders	<ul style="list-style-type: none"><li>Chief Officers provide support and advice to Members. Reporting requires financial and legal advice/implications to be included in reports/decisions which are published as appropriate.</li></ul>	Record of legal advice provided by Officers	✓	9/10	Good e- Overall governance considered compliant and meets best practice. No further action required.	
Elin Prysor A3.4 Dealing with breaches of legal and regulatory provisions effectively	<ul style="list-style-type: none"><li>The MO has direct access to the CE and reports to Council generally and as part of statutory duty.</li><li>The MO or a nominated representative attends all Cabinet meetings and Council Meetings. The MO operates an 'open' door policy for Members wishing to receive 'conduct' and 'governance' advice.</li><li>The MO &amp; S.151 Officer have monthly meetings with the CE.</li><li>The MO &amp; S.151 Officer are key members of Leadership Group.</li><li>Items reported to Members for decisions through Cabinet, Council and Committees are subject to legal and financial advice which will be referenced within each report.</li><li>Statutory powers and legal implications included in every decision making Cabinet report.</li><li>Legal and Financial advice/implications is provided on all appropriate reports for decision.</li><li>The MO and Legal Service are available to advise in advance and at meetings.</li></ul>	MO provisions & 151 Officer provisions	✓	9/10	Good e- Overall governance considered compliant and meets best practice. No further action required.	
		Record of legal advice provided by Officers	✓			
		Statutory provisions	✓			
Elin Prysor / Alex Jenkins A3.5 Ensuring corruption and misuse of power are dealt with effectively	<ul style="list-style-type: none"><li>Effective 'Strategy to Counter Fraud, Corruption and Bribery (to include Anti-Money Laundering)' updated and approved by Council 17 June 2021 (minutes confirmed 23 September 2021).</li><li>Effective External Audit, Internal investigations.</li><li>Whistleblowing Policy (in process of review) and Disciplinary Policy.</li><li>An Officer in the IA team is an accredited Counter Fraud Technician; a second officer is now also undertaking the qualification.</li><li>An Officer in the IA team holds a CIPFA Certificate in Investigative Practices ('CCIP').</li><li>Council complies with Audit Wales's annual National Fraud Initiative requirements, currently co-ordinated by Internal Audit.</li><li>IA annual report on Counter Fraud presented to Governance and Audit Committee at year-end (last presented 6.6.22).</li><li>Monitoring and response to fraud alerts (NAFN, wider networks, peers, etc).</li></ul>	Effective Counter-fraud and corruption policies and procedures	✓	9/10	Good e- Overall governance considered compliant and meets best practice. No further action required.	
		Local test of assurance (where appropriate)	✓			

		<ul style="list-style-type: none"> <li>• Membership and active participation in professional networks and groups (Tisonline, KHub, etc).</li> <li>• IA offer advice to services on implementation of new systems and processes to ensure effective internal controls maintained.</li> <li>• Nominated Council Officers undertake various fraud training to maintain knowledge and expertise.</li> <li>• Where appropriate, successful prosecutions publicised on Council website (and in local press).</li> <li>• Covid-19 grant payments audited prior to payment (as easier to stop a payment than recover it).</li> <li>• Key financial control audits added to audit plan, to check controls, governance &amp; risks whilst staff working from home.</li> <li>• IA's annual audit plan can address any necessary re-prioritisation of work, allowing IA to be reactive to any changes in risk within the Council.</li> </ul>				
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B. Ensuring openness and comprehensive stakeholder engagement						
Local government is run for the public good, organisations therefore should ensure openness in their activities. Clear, trusted channels of communication and consultation should be used to engage effectively with all groups of stakeholders, such as individual citizens and service users, as well as institutional stakeholders.						
Sub-principles	Behaviours	Evidence	Expected	✓/X	Score	Action
B1 Openness	Alun Williams B1.1 Ensuring an open culture through demonstrating, documenting and communicating the organisation's commitment to openness	<ul style="list-style-type: none"> <li>All statutory <u>Annual reports</u> are available on the Council's Website.</li> <li><u>Freedom of Information Act publication scheme.</u></li> <li>A host of service areas are available online including <u>council tax self-service and information.</u></li> <li>The Council's goals and values are set out in the <u>Corporate Strategy 2022-2027.</u></li> <li><u>Ceredigion County Council Website.</u></li> <li>Council and Cabinet meetings are broadcasted.</li> <li>MO and Ethics &amp; Standards generic email addresses created.</li> <li>Regular and timely responses to the press and other enquiries to Management and members as well as comprehensive FOI responses.</li> <li>Review of the FOI Publication scheme in progress.</li> <li><u>Freedom of Information Policy (March 2018).</u></li> <li>Corporate Complaints and Freedom of Information Manager in post.</li> <li><del>Complaints and Freedom of Information Privacy Notice.</del></li> <li><del>Environmental Information Regulations Policy (March 2018).</del></li> </ul>	Annual Report FOI publication scheme Online Council Tax information Authorities Goals & Values Authority website	✓  ✓ ✓ ✓	7/8	Acceptable - Minor adjustments may be required  FOI policy and EIR policy both updated. Review of the FOI Publication Scheme is in progress.
	Lowri Edwards B1.2 Making decisions that are open about actions, plans, resource use, forecasts, outputs and outcomes. The presumption is for openness. If that is not the case, a justification for the reasoning for keeping a decision confidential should be provided	<ul style="list-style-type: none"> <li>All Council, Cabinet and Committee meetings open to the public and agendas and papers published on the Council website (with the exception of exempt reports).</li> <li>An Overview and Scrutiny <u>Public Engagement Protocol</u> ( 2018) (<u>Document N Constitution</u>) has been approved by Council and has been used on several occasions</li> <li>Protocol for speaking at the Development Management Committee in place (Part 4 Document I <u>Constitution</u>).</li> <li>Protocol for access by Cabinet Members to Overview and Scrutiny Committee approved by Council (<u>Part 5 Document M2 Constitution</u>).</li> <li>In accordance with the requirements of the LGEW Act 2021, arrangements have been made to enable hybrid meetings to be held from May 2022. New equipment has been installed in the Chamber. Council and Cabinet meetings are being broadcasted on the Council's Facebook pages. Members of the public can attend to view meetings remotely or in person.</li> </ul>	Record of decision making and supporting materials	✓	9/10	Good e- Overall governance considered compliant and meets best practice. No further action required.
	Lowri Edwards B1.3 Providing clear reasoning and evidence for decisions in both		Decision making protocols Report pro-forma	✓ ✓	9/10	Good e- Overall governance considered compliant and

	<p>public records and explanations to stakeholders and being explicit about the criteria, rationale and considerations used. In due course, ensuring that the impact and consequences of those decisions are clear</p>	<ul style="list-style-type: none"> <li>• <u>Integrated Impact Assessment ('IIA') tool and guidance</u> to inform effective decision making have been developed and are being implemented.</li> <li>• Council / Cabinet report template updated to include reference to legal implications, staffing implications, property / asset implications and risks and to reflect the new Corporate Strategy 2022 - 2027.</li> <li>• <u>Standard templates and guidance</u> for reporting to Council, Cabinet and Overview and Scrutiny Committees are used and all include the IIA results.</li> <li>• Where appropriate, items reported for decisions through Cabinet, Council and Committees are subject to legal and financial advice which will be referenced within each report.</li> <li>• A Protocol is in place for working relationships between Members and Officers (e.g. Officer-Member Protocol). (<u>The Constitution Part 5</u>).</li> <li>• The Protocol of Good Practice has been created in order to support Members of the Development Management Committee in ensuring that determination of applications will be based on sound material planning considerations, and not applicants' personal circumstances.</li> <li>• A calendar of <u>dates of meetings</u> including forward work programmes of the Council, Cabinet and Committees are published on the Council's website.</li> <li>• Annual reports, Statements of accounts, Improvement progress reports are all published within timescales and are available on the <u>Council's website</u>.</li> <li>• Organisational Awareness training available as an optional module of the Corporate Manager Programme, which includes information relating to the decision making process, Wellbeing of Future Generations Act, Equalities, Welsh Language and the use of the IIAs.</li> </ul>	Record of professional advice in reaching decisions	✓		<p>meets best practice. No further action required.</p>
			Meeting reports show details of advice given	✓		
			Discussion between members and Officers on the information needs of members to support decision making	✓		
			Agreement on the information that will be provided and timescales	✓		
			Calendar of dates for submitting, publishing and distributing timely reports adhered to.	✓		
	<p>Alun Williams B1.4 Using formal and informal consultation and engagement to determine the most appropriate and effective interventions/ courses of action</p>	<ul style="list-style-type: none"> <li>• <u>The Engagement and Consultation Checklist</u> assists with decision making around whether or not to undertake a consultation regarding a proposed change and guidance on dissemination of consultation results is available to Officers.</li> <li>• IIA conclusions reported to Council, Cabinet and Overview and Scrutiny. 8 IIAs went to Cabinet from 01.04.2022 to 07.12.2022 (2022-23 part year).</li> <li>• The Council, in collaboration with partners, has carried out significant engagement to produce the Public Service Board's ('PSB') Well-being Assessment and <u>Local Well-being Plan</u>.</li> <li>• Well-being objectives for 2022-23 have been set in order to deliver the <u>Corporate Strategy 2022-2027</u>.</li> </ul>	Well-being strategy (PSB) and statement (LA)	✓	<p>7/8</p>	<p>Acceptable - Minor adjustments may be required</p> <p><u>Engagement and Participation Policy completed 2022</u></p>
			Use of consultation feedback	✓		
			Complaints policy and use of complaints	✓		
			Citizen survey	x		



		<ul style="list-style-type: none"> <li>• <u>Corporate Complaints Policy</u> has been reviewed, new Policy presented to Corporate Resources Overview &amp; Scrutiny Committee 7.7.21 and to Council 23.9.2021, and Revised Concerns and Complaints Policy and Procedures 2021, its implementation and publication approved by Council.</li> <li>• <u>Social Services Complaints Policy</u> and Procedure has been reviewed.</li> <li>• <u>Consultation Decision making tool (Consultation Tree and flowchart)</u> have been developed and includes the use of feedback.</li> <li>• Further consultation includes: <ul style="list-style-type: none"> <li>○ A new Engagement and Equalities post has been created through the restructure of the Policy and Performance service; and</li> <li>○ All <u>current consultations</u> are available on the Council website; and</li> </ul> </li> <li>• <u>Consultations 2020-2021.</u></li> <li>• <u>Consultations are published on Corporate section of Council Website.</u></li> <li>• Due to Covid-19, Council has consulted remotely via video conferences and electronic surveys.</li> <li>• <u>Consultations</u> are promoted through Social Media</li> <li>• Guidance has been issued on the Ceredigion Council intranet to all Staff to follow with regards to the dissemination of feedback to decision makers. Recent indications are that significant progress is being made in this area by Officers.</li> </ul>				
B2 Engaging comprehensively with institutional stakeholders	Alun Williams / Diana Davies B2.1 Effectively engaging with institutional stakeholders to ensure that the purpose, objectives and intended outcomes for each stakeholder relationship are clear so that outcomes are achieved successfully and sustainably	<ul style="list-style-type: none"> <li>• <u>PSB Terms of Reference</u> available on the Council Website.</li> <li>• PSB Project Groups Terms of Reference available</li> <li>• Joint engagement and consultation exercises are held</li> <li>• All <u>current consultations</u> are available on the Council Website.</li> <li>• Collaborative projects are running with institutional stakeholders with clear governance arrangements in place.</li> <li>• Scrutiny arrangements for the PSB have been put in place.</li> <li>• The <u>IIA tool and guidance</u> have been approved for implementation.</li> <li>• <u>Consultation Decision Tool (Consultation Decision Tree and flowchart)</u> have been developed and are available.</li> </ul>	Communication and engagement strategy	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
	Diana Davies B2.2 Developing formal and informal partnerships to allow for resources to be used more	<ul style="list-style-type: none"> <li>• <u>Engagement with Service Users List</u> including stakeholders with whom the authority should engage is in place and <u>Engagement and Participation Policy</u>.</li> <li>• <u>Collaboration Standards for New Strategic Projects Guidance and Templates</u> are available.</li> </ul>	Database of stakeholders with whom the authority should engage and for what purpose	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.

	efficiently and outcomes achieved more effectively	Partnerships Include: <ul style="list-style-type: none"> <li>○ <u>PSB;</u></li> <li>○ <u>West Wales Regional Partnership Board;</u></li> <li>○ <u>Community Safety Partnership;</u></li> <li>○ <u>Mid and West Wales Safeguarding Board;</u> and</li> <li>○ <u>Growing Mid Wales.</u></li> </ul> <ul style="list-style-type: none"> <li>• The formal review of partnerships that sit under the PSB has been completed. The new partnership structure has been operational since June 2018 and the partnerships will be reviewed on a periodic basis.</li> <li>• A review of the <u>Community Safety Partnership</u> was undertaken in 2019 and was subject to scrutiny.</li> </ul>	and a record of an assessment of the effectiveness of any changes			
	Alun Williams / Diana Davies B2.3 Ensuring that partnerships are based on: <ul style="list-style-type: none"> <li>• trust</li> <li>• a shared commitment to change</li> <li>• a culture that promotes and accepts challenge among partners and</li> <li>• that the added value of partnership working is explicit</li> </ul>	<ul style="list-style-type: none"> <li>• Advice provided to Members and Officers serving on outside bodies.</li> <li>• Regular reporting of partnership meetings and activity to Cabinet.</li> <li>• Partnerships such as <u>Growing Mid Wales</u> have been established with governance arrangements.</li> <li>• Regular reporting of partnership meetings and activity to Leadership Group and Cabinet.</li> <li>• Scrutiny arrangements in place for the PSB.</li> <li>• Partnership metrics are subject to internal review, where appropriate.</li> <li>• Legal Team is actively involved in drafting and reviewing Terms of Reference for Inter Authority Agreements ('IAAs') and formal committees.</li> <li>• A suite of documents have been developed that relate to strategic collaboration projects that the Authority is considering entering into. The <u>documents</u> include guidance, standards and numerous templates for varying stages of collaboration projects.</li> <li>• Executive Group Self-assessment carried out.</li> <li>• Growing Mid Wales Joint Overview and Scrutiny Committee has been established.</li> </ul>	Well-being strategy	✓	9/10	Good e- <u>O</u> verall governance considered compliant and meets best practice. No further action required.
			Partnership protocols	✓		
<b>B3 Engaging stakeholders effectively, including individual citizens and service users</b>	Alun Williams B3.1 Establishing a clear policy on the type of issues that the organisation will meaningfully consult with or involve individual citizens, service users and other stakeholders to ensure that service (or other) provision is contributing towards the achievement of intended outcomes	<ul style="list-style-type: none"> <li>• <u>Consultation Decision Tree and flowchart</u> for Staff and Members have been developed.</li> <li>• <u>The Engagement and Consultation Checklist</u></li> <li>• <u>Engagement and Participation Policy 2022</u></li> <li>• <u>The newly adopted Engagement and Participation Policy outlines our approach of applying the best method of engagement according to the situation. We will use several different methods of engagement to ensure that we engage with all people in Ceredigion in the most suitable manner. Included in this is a commitment that our engagement exercises must consider how to engage with non-digital users as a matter of priority. Examples of this are in-person discussions, telephone discussions and provision of</u></li> </ul>	Record of public consultations	✓	7/8	Acceptable Minor adjustments may be required
			Partnership framework	✓		<del>Due to the Covid-19 pandemic, decisions have needed to be made by Gold Command for emergency reasons (under the temporary executive function transfer of power in place until 31.8.2021 and for operational procedures under the Civil</del>
			Public Service Boards Terms of Reference	✓		

		<p><u>paper copies of relevant documents at Council Libraries and Well-being Centres.</u></p> <ul style="list-style-type: none"> <li>• A <u>Community Engagement, Consultations and Partnerships Page</u> has been created on <u>CeriNet</u>, which includes links to Engagement and Participation Policy, Engagement and Consultation Checklist, <u>Engagement with Service Users</u> and Consultation Decision Making Tool.</li> <li>• A new <u>Engagement and Participation Policy</u> for Ceredigion County Council, 'Talking, Listening and Working Together,' has been prepared and was agreed through the democratic process in Autumn 2022.</li> <li>• All IIAs for Cabinet are assessed by the Equalities and Inclusion Manager, including whether effective engagement, involvement and consultation has taken place and informed strategic decision making process.</li> <li>• <u>Public Engagement Tool Kit</u></li> <li>• <u>Engagement with Service Users List.</u></li> <li>• All school reorganisation proposals are required to have formally consulted with stakeholders through adhering to the Welsh Government's School Organisation Code.</li> <li>• All <u>current consultations</u> are available on the Council Website.</li> <li>• A monitoring partnership framework that reports on all key decisions made by existing partnerships is reported to Leadership Group.</li> </ul>				<p><del>Contingencies Act 2004 following that date); therefore it has been impossible to consult physically in the community at present for many services, and consequently the scoring has been amended to reflect this.</del></p> <p><u>A new Engagement and Participation Policy, 'Talking, Listening and Working Together' has been published. Implementation of this policy to be considered before action complete.</u></p>
Alun Williams / Lowri Edwards	B3.2 Ensuring that communication methods are effective and that Members and Officers are clear about their roles with regard to community engagement	<ul style="list-style-type: none"> <li>• <u>The Engagement and Consultation Checklist</u></li> <li>• <u>Corporate Strategy (2022-2027).</u></li> <li>• <u>Engagement and Participation Policy has been approved.</u></li> <li>• <u>Public Engagement Tool Kit.</u></li> <li>• <u>Engagement with Service Users List.</u></li> <li>• <u>IIA Tool Kit.</u></li> <li>• <u>Social Media Policy (revised Aug 2018).</u></li> <li>• <u>Guidelines on Corporate Branding (May 2019).</u></li> <li>• Minutes of structured engagement meetings and events.</li> </ul>	<p>Evidence of structured stakeholder discussions</p> <p>Communications strategy</p>	<p>✓</p> <p>✓</p>	9/10	Good <del>e-</del> <u>O</u> verall governance considered compliant and meets best practice. No further action required.
B3.3 Alun Williams / Lowri Edwards	Encouraging, collecting and evaluating the views and experiences of communities, citizens, service users and organisations of different backgrounds including reference to future needs	<ul style="list-style-type: none"> <li>• <u>Corporate Communications Strategy 2019-2022 is currently under review and a new Strategy will be developed in 2023.</u></li> <li>• <u>Overview and Scrutiny Public Engagement Protocol (2016) (Document N Constitution).</u></li> <li>• Social media is being used to seek the public's views on matters being considered by Overview and Scrutiny Committees.</li> <li>• <u>IIA Tool Kit.</u></li> </ul>	<p>Communications and engagement strategy</p> <p>Effective community involvement</p>	<p>✓</p> <p>✓</p>	9/10	Good <del>e-</del> <u>O</u> verall governance considered compliant and meets best practice. No further action required.

		<ul style="list-style-type: none"> <li>Summary reports on consultation and engagement activities are reported back to Members and service users.</li> <li>Minutes of engagement groups with people with protected characteristics.</li> <li>Effective Community involvement carried out with the well-being assessment work.</li> <li>Effective Community involvement carried out with service users from different backgrounds to inform the new Strategic Equality Plan.</li> </ul>				
	Alun Williams/Lowri Edwards B3.4 Implementing effective feedback mechanisms in order to demonstrate how their views have been taken into account	<ul style="list-style-type: none"> <li><u>Corporate Communications Strategy 2019-2022 is currently under review and a new Strategy will be developed in 2023.</u></li> <li>Summary reports on consultation and engagement activities, which are reported back to Members and service users.</li> <li>Dissemination of <u>consultation results</u> and reports on completed consultations and engagement exercises are posted on the Council's public <u>consultations</u> webpage in order to provide feedback to the public.</li> <li>Processes have been introduced to monitor feedback e.g. any consultation/engagement reports are presented to Scrutiny and Cabinet to inform their decision-making.</li> <li>Feedback from engagement and how people's views have been taken into account is recorded in the IIAs.</li> </ul>	Communications and engagement strategy	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice.
	Alun Williams B3.5 Balancing feedback from more active stakeholder groups with other stakeholder groups to ensure inclusivity	<ul style="list-style-type: none"> <li>We have worked in partnership with Local Authorities and Public Services across Mid and West Wales on the review of our Strategic Equality Plans. A joint question set and engagement and consultation framework was produced and as a result, feedback was obtained from people with protected characteristics.</li> </ul>	Processes for dealing with competing demands within the community for example consultation	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.
	Diana Davies B3.6 Taking account of the interests of future generations of tax payers and service users	<ul style="list-style-type: none"> <li>A <u>Well-being assessment</u> (PSB) has been carried out that will inform the development of the PSB's <u>Local Well-being Plan</u>, which will be published in May 2023.</li> <li><u>The Corporate Well-being Objectives</u> are included in the Council's <u>Corporate Strategy 2022-2027</u> and are reviewed each year.</li> <li>An <u>annual report</u> on progress made against the Council's Well-being objectives and Corporate priorities is published on the Council Website.</li> <li>UNCRC – United Nations Convention on the Rights of the Child have been adopted by the Council.</li> <li>Participation Standards have been adopted by Council.</li> </ul>	Reports Well-being assessment Well-being Objectives and statement	✓ ✓ ✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.



C. Defining outcomes in terms of sustainable economic, social, and environmental benefits						
The long-term nature and impact of many of local government’s responsibilities mean that it should define and plan outcomes and that these should be sustainable. Decisions should further the authority’s purpose, contribute to intended benefits and outcomes, and remain within the limits of authority and resources. Input from all groups of stakeholders, including citizens, service users, and institutional stakeholders, is vital to the success of this process and in balancing competing demands when determining priorities for the finite resources available.						
Sub-principles	Behaviours	Evidence	Expected	✓/X	Score	Action
C1 Defining outcomes	Alun Williams C1.1 Having a clear vision which is an agreed formal statement of the organisation’s purpose and intended outcomes containing appropriate performance indicators, which provides the basis for the organisation’s overall strategy, planning and other decisions	<ul style="list-style-type: none"><li>• The Council’s <u>Corporate Well-being Objectives</u> are included in the Council’s <u>Corporate Strategy 2022-2027</u> and are reviewed each year and reported in the Self-assessment and Annual Review of Performance and Well-being Objectives Annual Report published on the Ceredigion County Council website.</li><li>• The purpose and the vision of the Council have been determined by Council and is contained in the <u>Corporate Strategy 2022-2027</u>. This strategy illustrates how the authority will support and promote the well-being of the citizens of Ceredigion.</li><li>• All Planning arrangements reflect the Golden Thread and make the links to Corporate plans including;<ul style="list-style-type: none"><li>○ Business Plans;</li><li>○ Strategic Plan;</li><li>○ Corporate Performance Management Reporting; and</li><li>○ Well-being and Improvement Objectives.</li></ul></li></ul>	Well-being statement and objectives	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
			Vision used as a basis for corporate and service planning	✓		
	Alun Williams / Diana Davies C1.2 Specifying the intended impact on, or changes for, stakeholders including citizens and service users. It could be immediately or over the course of a year or longer	<ul style="list-style-type: none"><li>• The <u>IIA tool and guidance</u> are available and training has been rolled out for Officers and Members.</li><li>• <u>Engagement and Participation Policy</u> is available.</li><li>• A <u>Public Engagement Toolkit 2014</u> has been developed in order to provide a user-friendly resource for Officers when developing and undertaking effective public engagement with their communities, in accordance with the National Principles of Public Engagement.</li><li>• Updates on the budget savings and the work of the Development Group are reported to the Cross Party Transformation and Efficiency Consultative Group.</li><li>• <u>The Corporate Strategy 2022-2027 incorporates the Corporate Well-being Objectives</u>.</li><li>• The Self-assessment and Annual Review of Performance and Well-being Objectives Annual Report included a review of the Corporate Well-being Objectives.</li></ul>	Community engagement and involvement	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
Corporate & service plans			✓			
Well-being plan (PSB) and well-being statement (LA)			✓			
Alun Williams C1.3 Delivering defined outcomes on a sustainable basis within the resources that will be available	<ul style="list-style-type: none"><li>• <u>Performance</u> information is outlined in the Council’s Self-assessment and Annual Review of Performance and Well-being Objectives Annual Report .</li><li>• Business Plans are prepared on an annual basis and are monitored quarterly by a Performance Board, which includes Cabinet members and the Chairs and Vice Chairs of the Overview and Scrutiny Committees and Chair of the Governance and Audit Committee.</li></ul>	Regular reports on progress	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.	



		<ul style="list-style-type: none"> <li>Budget setting subject to detailed scrutiny by the five Overview and Scrutiny Committees.</li> <li>The Medium Term Financial Plan.</li> <li>Quarterly performance arrangements provide a challenge protocol to ensure outcomes are delivered.</li> <li>Business planning process includes resource allocation.</li> <li>Cross-Party Transformation and efficiency Group monitors the budget savings and delivery of services within budgets.</li> </ul>				
	Alun Williams C1.4 Identifying and managing risks to the achievement of outcomes	<ul style="list-style-type: none"> <li>Corporate performance management arrangements include quarterly assessment of risks to the achievement of outcomes or service delivery.</li> <li>Risk management includes risk logs for; <ul style="list-style-type: none"> <li>Business Plans (Level 1); and</li> <li>Service Plans (Level 2).</li> </ul> </li> </ul>	Performance trends are established and reported upon	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
	Duncan Hall C1.5 Managing service users' expectations effectively with regard to determining priorities and making the best use of the resources available	<ul style="list-style-type: none"> <li>Local performance measures are included in Business and service delivery plans.</li> <li>Capital Plans include; <ul style="list-style-type: none"> <li>Rights of Way;</li> <li>Highways;</li> <li>Annual Budget Plan; and</li> <li>Transformation.</li> </ul> </li> <li>The Risk Management Policy and Strategy and the Risk Management Framework was approved by Cabinet on 24 September 2019.</li> <li>Risk Management training to be rolled out to Members and Senior Managers.</li> <li>Risk management e-learning package has been developed for all other Staff and training took place in 2019, with workshop with insurers arranged for senior Managers.</li> <li>Publication of service performance, including costs and value for money data is routinely considered within service reports.</li> </ul>	A agreed set of quality standard measures for each service element are included in service plans	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. <u>No further action required.</u>  <del>Managing Service-users expectations</del>
<b>C2 Sustainable economic, social and environmental benefits</b>	Duncan Hall / Elin Pryor C2.1 Considering and balancing the combined economic, social and environmental impact of policies, plans and decisions when taking decisions about service provision	<ul style="list-style-type: none"> <li>The appointed Auditor considers the Council's arrangements to secure economy, efficiency and effectiveness. In his letter he has stated that the Council has complied with its responsibilities to the use of its resources.</li> <li>The most recent Audit of the Council's Improvement Plan (2020-2021) was issued in November 2020. The report concluded positively that the Council discharged its duties and has acted in accordance with Welsh Government guidance sufficiently to discharge its duties.</li> <li>A capital appraisal form is completed for new capital projects, which covers the requirement for the project, and is used to assess value for money and the revenue implications of major projects.</li> </ul>	Capital investment is structured to achieve appropriate life spans and adaptability for future use so that resources are spent on optimising social, economic and environmental wellbeing: capital programme capital investment strategy	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.

		<ul style="list-style-type: none"> <li>Capital Investment Strategy is contained within the <u>Medium Term Financial Strategy</u>.</li> <li>The Authority has undertaken the following steps towards the implementation of the Well-being of Future Generations (Wales) Act 2015: <ul style="list-style-type: none"> <li>Prepared well-being objectives and statement;</li> <li>Embedded the Well-being Goals and Sustainable; development principal into the business planning process</li> <li>Developed a new <u>IIA tool and guidance</u>;</li> <li>Established a Well-being of Future Generations Act group and action plan;</li> <li>The Constitution is continually monitored and reviewed;</li> <li>PSB <u>assessment of Local Well-being</u> published in March 2017;</li> <li>Scrutiny arrangements agreed for PSB;</li> <li>Cabinet Reports, to include the Social/economic/ environmental impact assessment;</li> <li>A mandatory e-learning module on the Act has been developed and promoted to all Council Staff;</li> <li>an Equality, community and Welsh language Impact Assessment must be undertaken on all school restructuring proposals as required under the Welsh Government School Organisation Code; and</li> <li>Members have contributed to The Future Generations Officer Scrutiny Framework in relation to the WFGA.</li> </ul> </li> </ul>	Legislative requirements – Well-being of Future Generations (Wales) Act 2015	✓		
	C2.2 Duncan Hall Taking a longer-term view with regard to decision making, taking account of risk and acting transparently where there are potential conflicts between the organisation's intended outcomes and short-term factors such as the political cycle or financial constraints	<ul style="list-style-type: none"> <li>Wales procurement policy statement is aligned to the Council's <u>Procurement Strategy 2018-2022</u>.</li> <li>The <u>IIA tool and guidance</u> is available and used to support decision-making.</li> <li>All reports and <u>minutes</u> are published in a timely manner and are open for inspection. All meetings are held in public, subject to the consideration of exempt information as defined by the 1972 Local Government Act.</li> <li>Pre-decision Scrutiny encouraged where possible.</li> <li><u>The Medium Term Financial Strategy</u>.</li> <li><u>The Corporate Strategy 2022-2027</u>.</li> <li>The Transformation Programme.</li> </ul>	Application of Wales procurement policy statement  Corporate plans take account of medium and long-term service plans  Discussion between Members and Officers on the information needs of Members to support decision making  Record of decision making and supporting materials	✓  ✓  ✓  ✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.

	Alun Williams / Diana Davies. C2.3 Determining the wider public interest associated with balancing conflicting interests between achieving the various economic, social and environmental benefits, through consultation where possible, in order to ensure appropriate trade-offs	<ul style="list-style-type: none"> <li>Public Services Board <u>Local Well-being Plan</u> was published in May 2018.</li> <li>All reports and <u>minutes</u> are published in a timely manner and are open for inspection. All meetings are held in public, subject to the consideration of exempt information as defined by the 1972 Local Government Act. Advice given by MO.</li> <li><u>Engagement and Consultation Checklists</u> are available on CeriNet.</li> <li>The Council wide WFGA Group Action Plan.</li> <li><u>IIA tool and guidance</u>.</li> </ul>	Well-being Plan (PSB)	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
			Record of decision making and supporting materials	✓		
			Protocols for consultation	✓		
	Alun Williams/Lowri Edwards C2.4 Ensuring fair and equal access to services	<ul style="list-style-type: none"> <li><u>Strategic Equality Plan 2020-2024</u>.</li> <li>Annual <u>Strategic Equality Plan monitoring report</u> 2021-2022 has been approved and has been published on Council website.</li> <li><u>Welsh Language Standards</u>.</li> <li><u>Annual Welsh Language Standards monitoring report</u>.</li> <li>Annual Complaints and Compliments Report 2021/22 presented to Governance and Audit Committee 21.9.22, Corporate Resources Scrutiny Committee 2.10.22 and approved by Council 24.11.22.</li> <li>A mandatory E-learning training module on Welsh Language Awareness must be completed by all Staff.</li> <li>Members provided with Welsh Language Awareness and Equalities Training as part of their Induction Programme.</li> </ul>	Develop protocols to ensure fair access and that statutory guidance is followed	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.

D. Determining the interventions necessary to optimise the achievement of the intended outcomes						
Local government achieves its intended outcomes by providing a mixture of legal, regulatory, and practical interventions. Determining the right mix of these courses of action is a critically important strategic choice that local government has to make to ensure intended outcomes are achieved They need robust decision-making mechanisms to ensure that their defined outcomes can be achieved in a way that provides the best trade-off between the various types of resource inputs while still enabling effective and efficient operations. Decisions made need to be reviewed continually to ensure that achievement of outcomes is optimised.						
Sub-principles	Behaviours	Evidence	Expected	✓/X	Score	Action
D1 Determining interventions	Lowri Edwards / Elin Prysor D1.1 Ensuring decision makers receive objective and rigorous analysis of a variety of options indicating how intended outcomes would be achieved and including the risks associated with those options. Therefore ensuring best value is achieved however services are provided	<ul style="list-style-type: none"><li>The <u>IIA tool and guidance</u> is available and training has been rolled out for Officers and Members.</li><li>Corporate project management group has been established to formalise project development and management.</li><li>Standard reporting templates are used in decision making process.</li><li>Organisational Awareness training available as an optional module of the Corporate Manager Programme, which includes information relating to the decision making process, Wellbeing of Future Generations, Equalities, Welsh Language and the use of the IIAs, Head of Democratic Services and MO (CLO-Legal &amp; Governance) advise as necessary.</li><li>Risk Management Policy, Strategy and Framework (approved by Cabinet 24.9.10) with training programme for Members, Senior Management and Managers, published on CeriNet and available to all Members of Staff. Documents amended to reflect additional risks and background information to make informed decisions. Corporate Risk Register reported regularly to Governance and Audit Committee (9.9.2021, 3.6.2021)</li></ul>	Discussion between Members and Officers on the information needs of Members to support decision making	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.
			Decision making protocols	✓		
			Option appraisals	✓		
			Agreement of information that will be provided and timescales	✓		
	Duncan Hall D1.2 Considering feedback from citizens and service users when making decisions about service improvements or where services are no longer required in order to prioritise competing demands within limited resources available including people, skills, land and assets and bearing in mind future impacts	<ul style="list-style-type: none"><li><u>Medium Term Financial Strategy</u> has been regularly updated the current version dated 2021/22 Onwards approved by Council 5.3.2021.</li><li><u>Consultation decision tree tool</u> includes a guidance section on dissemination of consultation results.</li><li>Finance challenge regarding savings on Council Website.</li></ul>	Financial Strategy	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.
D2 Planning interventions	Alun Williams D2.1 Establishing and implementing robust planning and control cycles that cover strategic and operational plans, priorities and targets	<ul style="list-style-type: none"><li>Corporate Performance Management arrangements include quarterly:<ul style="list-style-type: none"><li>Corporate Lead Officer Service Report;</li><li>Performance Board; and</li><li>Executive Panel meetings.</li></ul></li><li>A calendar is used to report deadlines and Board/Executive Panel dates are published with reports.</li></ul>	Calendar of dates for developing and submitting plans and reports that are adhered to.	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.

	Alun Williams / Diana Davies/Lowri Edwards D2.2 Engaging with internal and external stakeholders in determining how services and other courses of action should be planned and delivered	<ul style="list-style-type: none"> <li>• <u>Corporate Communications Strategy 2019-2022</u> currently being reviewed. A new strategy will be developed in 2023.</li> <li>• The <u>Ceredigion PSB</u> has a <u>Local Well-being Plan</u> that has been developed and delivered jointly with external stakeholders and partners.</li> <li>• <u>An Assessment of Local Well-being</u> has been undertaken by the PSB that has fed the <u>Local Well-being Plan</u> and the <u>Council Well-being Objectives</u> for future years.</li> </ul>	Communication and engagement strategy	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.
			Public Service Board well-being plans	✓		
	Alun Williams D2.3 Considering and monitoring risks facing each partner when working collaboratively including shared risks	<ul style="list-style-type: none"> <li>• All major collaboration projects have established governance and management arrangements including risk management.</li> <li>• All projects considered by Corporate Project Management Panel, which is also attended by IA and is an effective forum for advice/challenge and highlighting risks as Service areas develop projects, including collaboration projects.</li> <li>• The Corporate Project Management Panel helps ensure projects give early consideration to: the Well Being and Future Generations Act; to other guidance; to finance, procurement, governance and legal arrangements; to HR implications; Health &amp; Safety; and Audit. Improve project arrangements prior to reporting to the Development Group and other authorisation processes.</li> <li>• Account will be taken of legislative changes e.g. work is ongoing in relation to implementing legislative changes such as LGEW 2021 Act changes and considering/monitoring risks facing each partner when working collaboratively, including shared risks. Meetings are being held and preparation being carried out, for example, regarding the 2021 Act's requirement for Corporate Joint Committees, including potential and shared risks (a CJC group has been established, with the first meeting held on 19th April 2021, to consider the requirement to establish the Mid Wales CJC in accordance with the 2021 Act).</li> <li>• Appropriate Joint Scrutiny arrangements are in place in relation to the Growing Mid Wales Board. Similarly, the Mid Wales Corporate Joint Committee will have Sub appropriate arrangements in place (Joint Scrutiny, Standards and Governance and Audit Committee)- arrangements in compliance with legislation and its Standing Orders</li> </ul>	Partnerships/collaboration framework	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.  To continue to take into account legislative changes e.g. Local Government and Elections (Wales) Act 2021.  To implement legislative changes, such as Local Government and Elections (Wales) Act 2021 changes and consider/monitor risks facing each partner when working collaboratively, including shared risks.
			Risk management protocol	✓		
	Russell Hughes-Pickering D2.4 Ensuring arrangements are flexible and agile so that the mechanisms for delivering outputs can be adapted to changing circumstances	<ul style="list-style-type: none"> <li>• Corporate Project Management Group has been established to formalise project development and management.</li> <li>• Ensuring Staff with project management skills are available.</li> <li>• This helps ensure projects give early consideration to: the Well Being and Future Generations Act; to other guidance; to finance, procurement, governance and legal arrangements; to HR implications; Health &amp; Safety; and Audit. Improve project arrangements prior to reporting to the Development Group and other authorisation processes.</li> </ul>	Planning protocols	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.



		<ul style="list-style-type: none"> <li>Helps identify capital requirements for inclusion in future capital programmes.</li> </ul>				
	Alun Williams D2.5 Establishing appropriate local performance indicators (as well as relevant statutory or other national performance indicators) as part of the planning process in order to identify how the performance of services and projects is to be measured	<ul style="list-style-type: none"> <li>Local performance indicators have been established and approved for each service element and included in the service plan and are reported upon regularly.</li> <li>The Business Planning process for 2022-23 is being implemented with Level 1 Business Plans shared with the Performance and Research Team.</li> <li>Performance measures have been identified within each Level 1 Business Plan that have in turn translate into the reporting Dashboard for each service. These measures have been closely scrutinised and have received final sign-off from senior leadership. Services report against these measures as part of the performance management process for the year.</li> </ul>	Local performance indicators have been established and approved for each service element and included in the service plan and are reported upon regularly	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
	Alun Williams D2.6 Ensuring capacity exists to generate the information required to review service quality regularly	<ul style="list-style-type: none"> <li>The Corporate Performance Management arrangements include <ul style="list-style-type: none"> <li>Weekly leadership Group meetings;</li> <li>Quarterly reporting of progress against level 1 Business Plans;</li> <li>Quarterly Performance Board meetings; and</li> <li>Quarterly Executive Panel Meetings.</li> </ul> </li> </ul>	Reports include detailed performance results and highlight areas where corrective action is necessary	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
	Duncan Hall D2.7 Preparing budgets in accordance with organisational objectives, strategies and the medium-term financial plan	<ul style="list-style-type: none"> <li>Business Plans include budget and finance information and form part of the quarterly Corporate Performance Management arrangements.</li> <li>Budget Framework.</li> <li>Service Accountancy – Budget monitoring.</li> </ul>	Evidence that budgets, plans and objectives are aligned	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
	Duncan Hall D2.8 Informing medium and long-term resource planning by drawing up realistic estimates of revenue and capital expenditure aimed at developing a sustainable funding strategy	<ul style="list-style-type: none"> <li><u>Financial Regulations and Financial Procedure Rules (Document F Constitution)</u> along with Budgetary Control Guidance are all up to date. Chief Officer Assurance Statements. The internal controls in place are subject to regular review by Internal Audit, in accordance with the annual risk-based audit plan.</li> <li><u>Medium-term financial Strategy.</u></li> <li><u>Corporate Strategy 2022-2027.</u></li> <li>Internal Audit Strategy &amp; Plan 2022/2023 approved by Governance &amp; Audit Committee 10 March 2022.</li> </ul>	Budget guidance and protocols MTFS Corporate Plans	✓ ✓ ✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
<b>D3 Optimising achievement of intended outcomes</b>	Duncan Hall D3.1 Ensuring the medium term financial strategy integrates and balances service priorities, affordability and other resource constraints	<ul style="list-style-type: none"> <li>Changes through the corporate savings plan have been through a robust governance process to ensure that all savings all link to the desired outcome.</li> </ul>	Feedback surveys and exit/decommissioning strategies Changes as a result	✓ ✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
	Duncan Hall D3.2 Ensuring the budgeting process is all-inclusive, taking into account the full	<ul style="list-style-type: none"> <li><u>Financial Regulations and Financial Procedure Rules (Document F Constitution)</u> along with Budgetary Control</li> </ul>	Budget guidance and protocols	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.

	cost of operations over the medium and longer term	<p>Guidance are all up to date. Chief Officer Assurance Statements.</p> <ul style="list-style-type: none"> <li>The internal controls in place are subject to regular review by IA, in accordance with the annual risk-based audit plan.</li> <li>Internal Audit Strategy &amp; Plan 2022/23 approved by Governance and Audit Committee 10/3/22.</li> </ul>				
	Duncan Hall D3.3 Ensuring the medium-term financial strategy sets the context for ongoing decisions on significant delivery issues or responses to changes in the external environment that may arise during the budgetary period in order for outcomes to be achieved while optimising resource usage	<ul style="list-style-type: none"> <li><u>Medium Term Financial strategy</u> is in place</li> <li>The corporate savings plan has been through a robust governance process to ensure that all savings link to the desired service outcomes.</li> </ul>	Financial Strategy	✓	9/10	Good <del>e</del> - <u>O</u> verall governance considered compliant and meets best practice. No further action required.
			Long term trends are taken into account	✓		
			Can this be evidenced?			
	Duncan Hall D3.4 Ensuring the achievement of 'social value' through service planning and commissioning. The Public Services (Social Value) Act 2012 states that this is "the additional benefit to the community...over and above the direct purchasing of goods, services and outcomes"	<ul style="list-style-type: none"> <li>Community Benefits is embedded in our Processes and Policies and has been regularly applied, monitored and reported upon.</li> <li>Well-being of Future Generations (Wales) Act is integrated into our processes.</li> </ul>	Service plans demonstrate consideration of social value	✓	9/10	Good <del>e</del> - <u>O</u> verall governance considered compliant and meets best practice. No further action required.
			Achievement of social value is monitored and reported upon	✓		

E. Developing the entity's capacity, including the capability of its leadership and the individuals within it						
Local government needs appropriate structures and leadership, as well as people with the right skills, appropriate qualifications and mind set, to operate efficiently and effectively and achieve their intended outcomes within the specified periods. A local government organisation must ensure that it has both the capacity to fulfil its own mandate and to make certain that there are policies in place to guarantee that its management has the operational capacity for the organisation as a whole. Because both individuals and the environment in which an authority operates will change over time, there will be a continuous need to develop its capacity as well as the skills and experience of the leadership of individual staff members. Leadership in local government entities is strengthened by the participation of people with many different types of backgrounds, reflecting the structure and diversity of communities.						
Sub-principles	Behaviour	Evidence	Expected	✓/X	Score	Action
<b>E1 Developing the entity's capacity</b>	Geraint Edwards E1.1 Reviewing operations, performance and use of assets on a regular basis to ensure their continuing effectiveness	<ul style="list-style-type: none"> <li>Corporate and line management induction is now in place. Corporate induction and Corporate Manager Development plans were introduced in April 2018 and revised in October 2022. Corporate induction sessions are part of these requirements, all new Staff must attend an induction session. Senior Managers present within these face-to-face or virtual sessions.</li> <li><u>CeriNet</u> (the HR intranet and resource to Staff and management) is continually reviewed and improved for effectiveness.</li> <li>Learning &amp; Development is now managed via the Ceri system offering opportunities to all Staff. E-learning modules are being introduced to ensure training and development is cost effective wherever possible.</li> <li>Ongoing annual Personal Performance scheme – Performance Reviews link to Corporate and strategic objectives.</li> <li>The Corporate Performance Management arrangements provide the forum for performance management's needs and thereafter preparing action plans for delivery of corporate improvements in performance review of Staff. These have been further strengthened with the introduction of annual appraisals for all Staff via the Ceri HR system.</li> <li>Induction programme is provided for new Members. Ongoing training is arranged for specific issues e.g. Treasury management.</li> <li>Members attend various events, seminars and conferences (see above).</li> <li>Personal Development Review process in place for Members.</li> </ul>	Regular reviews of activities, outputs and planned outcomes	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
	Geraint Edwards E1.2 Improving resource use through appropriate application of techniques such as benchmarking and other options in order to determine how the authority's resources are allocated so that outcomes are achieved effectively and efficiently	<ul style="list-style-type: none"> <li>Utilisation of research and benchmarking exercises.</li> <li>The Ceri HR payroll system has ensured that meaningful data on Staff is now available to Managers on a monthly basis in order to monitor costs turnover and absence.</li> </ul>	Utilisation of research and benchmarking exercises	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.

	Alun Williams / Diana Davies E1.3 Recognising the benefits of partnerships and collaborative working where added value can be achieved	<ul style="list-style-type: none"> <li>Effective operation of partnerships which deliver agreed outcomes.</li> <li>Effective Partnerships have been developed in a number of areas and services including: <ul style="list-style-type: none"> <li>School Improvement;</li> <li>Health &amp; Social care; and</li> <li>Waste.</li> </ul> </li> <li>Additional partnerships are included in the strategic Collaboration Projects List.</li> </ul>	Effective operation of partnerships which deliver agreed outcomes	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
	Geraint Edwards E1.4 Developing and maintaining an effective workforce plan to enhance the strategic allocation of resources	<ul style="list-style-type: none"> <li>Strategic workforce planning is undertaken utilising the Strategic workforce planning tool kit and is completed by all service areas. The Workforce Plan 2022-2027 is currently being developed and will be published once approved by Cabinet in early 2023. Once in place, annual updates on progress of the workforce plan are reported to scrutiny.</li> </ul>	Workforce Plan	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
			Organisational development plan	✓		
<b>E2 Developing the capability of the entity's leadership and other individuals</b>	Elin Prysor / Geraint Edwards E2.1 Developing protocols to ensure that elected and appointed leaders negotiate with each other regarding their respective roles early on in the relationship and that a shared understanding of roles and objectives is maintained	<ul style="list-style-type: none"> <li>The Leadership and Senior Officer structure has defined these roles, including how they integrate with each other.</li> <li>Joint meeting of senior Managers ensures that roles, responsibilities and accountabilities are clear.</li> <li>Job descriptions clearly define the roles and responsibilities required of posts.</li> <li>The Constitution sets out the roles and responsibilities of Members (Part 3.4 Table 4) and senior Officers (part 2 Article 2)</li> <li>The Strategic Planning Toolkit includes an element of succession planning and talent management.</li> <li>Learning and Development opportunities are offered to those within a Leadership role or who are aspiring leaders.</li> </ul>	Job descriptions	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
			CE and leader pairings have considered how best to establish and maintain effective communication	✓		
	Elin Prysor / Duncan Hall E2.2 Publishing a statement that specifies the types of decisions that are delegated and those reserved for the collective decision making of the governing body	<ul style="list-style-type: none"> <li>A Scheme of Delegation (The Constitution Part 3.5) exists and clearly sets out responsibilities for Members and Officers.</li> <li>Protocols are in place for working relationships between Members and Officers (e.g. Officer-Member Protocol).</li> <li>Codes of Conduct for Officers and Members are in place.</li> <li>Member Officer working groups in place and working effectively.</li> <li>Contract Procedure Rules ('CPR') (Part 4 Document G Constitution) and Financial Regulations and accompanying financial procedures (Part 4 Document F Constitution) are reviewed on a regular basis e.g. CPR updated March 2019.</li> </ul>	Scheme of delegation reviewed at least annual in the light of legal and organisational changes	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. <del>No further action required.</del>
			Standing orders and financial regulations which are reviewed on a regular basis	✓		<u>Delegated Decision Register to be published</u>
	Elin Prysor E2.3 Ensuring the leader and the chief executive have clearly defined and distinctive leadership roles within a structure, whereby the chief executive leads the authority in implementing	<ul style="list-style-type: none"> <li>The Council's Constitution sets out the functions and responsibilities.</li> <li>The Corporate structure of the Council has been established to ensure that the Statutory Officers are able to perform their roles effectively.</li> <li>The CE is responsible for reviewing this structure, as necessary.</li> </ul>	Clear statement of respective roles and responsibilities and how they will be put into practice	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.

	strategy and managing the delivery of services and other outputs set by Members and each provides a check and a balance for each other's authority	<ul style="list-style-type: none"> <li>Democratic Services Committee <del>resolved on 15.10.21 to agree</del> <u>agreed</u> the revised set of Member Role Descriptions, designed to be used alongside Welsh member Development (Competency) Framework, of Welsh Local Government Association ('WLGA') Framework</li> <li>Member Role Descriptions and Person Specifications, <del>which includes role description of the Leader (Report for information also been prepared for presenting presented to Governance and Audit Committee 19.1.21)</del> <u>Council</u></li> </ul>				
	<p>Elin Prysor/Lowri Edwards/Geraint Edwards</p> <p>E2.4 Developing the capabilities of Members and senior management to achieve effective shared leadership and to enable the organisation to respond successfully to changing legal and policy demands as well as economic, political and environmental changes and risks by:</p> <p>ensuring members and staff have access to appropriate induction tailored to their role and that ongoing training and development matching individual and organisational requirements is available and encouraged –ensuring members and officers have the appropriate skills, knowledge, resources and support to fulfil their roles and responsibilities and ensuring that they are able to update their knowledge on a continuing basis</p> <p>–ensuring personal, organisational and system-wide development through shared learning, including lessons learnt from governance weaknesses both internal and external</p>	<ul style="list-style-type: none"> <li>Comprehensive Induction Programme for Members (new and old) <u>undertaken</u> following the Local Elections 2022</li> <li>E-learning modules available to Members and are encouraged to complete.</li> <li>Access to courses/information briefings on new legislation.</li> <li>Provision of opportunities for ongoing skills and refresher training for Officers.</li> <li>Members Workshops arranged, as necessary.</li> <li>Personal reviews for Officers.</li> <li>Provision and ongoing review of opportunities for skills and refresher training for Members (see above), including Personal Development Review Scheme.</li> <li>Development/training done as part of person specifications for key finance and legal posts (mandatory qualification, job requirements).</li> </ul>	Access to courses/information briefings on new legislation	✓	9/10	Good <del>e-</del> <u>O</u> verall governance considered compliant and meets best practice. No further action required.



	Lowri Edwards/ Geraint Edwards E2.5 ensuring Members and Staff have access to appropriate induction tailored to their role and that ongoing training and development matching individual and organisational requirements is available and encouraged	<ul style="list-style-type: none"> <li>The Council aims to achieve the standard level for the Wales Charter for Member Support and Development.</li> <li>Members' role descriptions are in place and updated as and when circumstances change.</li> <li>A process for Member Personal Development Reviews has been developed and the information used to develop a Members' Training Plan.</li> <li>Induction and Corporate Manager Development plans are in place.</li> <li>The introduction of <u>CeriNet</u> as a HR intranet and resource to Staff and management has improved effectiveness. Induction information is available along with the Staff handbook and Managers Toolkit.</li> <li>E-learning packages are regularly being developed and rolled out for mandatory and non-mandatory training for staff and Members.</li> <li>Performance Reviews are undertaken by all Staff as part of the Ceri system Performance Management module.</li> <li>The Corporate Performance Management arrangements provide the forum for performance management's needs and thereafter preparing action plans for delivery of corporate improvements in performance review of Staff.</li> <li>Induction programme is provided for new Members and new comprehensive induction programme has been provided post-election (from May 2022) with additional e-learning modules available. Ongoing training is arranged for specific issues. Members attend various events, seminars and conferences (see above).</li> </ul>	Member development strategy	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
			Members induction and on-going training and development programme	✓		
			Mentoring and peer support programmes	✓		
			Personal development plans for Members and Officers	✓		
	Lowri Edwards/ Geraint Edwards E2.6 Ensuring Members and Officers have the appropriate skills, knowledge, resources and support to fulfil their roles and responsibilities and ensuring that they are able to update their knowledge on a continuing basis	<ul style="list-style-type: none"> <li>Learning &amp; Development is available to Staff and Members in a range of subjects.</li> <li>All Staff can access learning and development events via <u>Ceri self-service</u>.</li> <li>Managers can also book Staff onto relevant events via Managers Self-service.</li> <li>Ongoing training provided to Members.</li> <li>Scrutiny self-assessment undertaken annually.</li> </ul>	For example, for Members this may include the ability to: scrutinise and challenge <ul style="list-style-type: none"> <li>recognise when outside expert advice is required</li> <li>promote trust</li> <li>work in partnership</li> <li>lead the organisation</li> <li>act as a community leader</li> </ul>	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.

			Efficient systems and technology used for effective support	✓		
	Geraint Edwards E2.7 Ensuring personal, organisation and system-wide development through shared learning, including lessons learnt from both internal and external governance weaknesses	<ul style="list-style-type: none"> <li>Succession planning is undertaken through discussions and actions within service areas and with partners this cannot always be evidenced. This will be further developed through the strategic workforce planning toolkit.</li> <li>Ceredigion Manager Programme offers personal development including governance arrangements and organisational knowledge.</li> </ul>	Arrangements for succession planning	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.
	Alun Williams E2.8 Ensuring that there are structures in place to encourage public participation	<ul style="list-style-type: none"> <li><u>Engagement with Service Users list.</u></li> <li><u>Engagement and Participation Policy.</u></li> <li><u>Scrutiny Public Engagement Protocol ( 2016) (Document N Constitution)</u> Council continually consults and engages with local residents, customers and other stakeholders within the county to understand their opinions and views when developing new plans and/or strategies. Feedback is always given due consideration before final versions are agreed.</li> <li>Service User focus groups.</li> <li>Survey regarding self-assessment completed by Scrutiny.</li> </ul>	Citizens and residents panel Stakeholder forum terms of reference Communication and engagement strategy	✓ ✓ ✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.
	Lowri Edwards E2.9 Taking steps to consider the leadership's own effectiveness and ensuring leaders are open to constructive feedback from peer review and inspections	<ul style="list-style-type: none"> <li>Member development scheme.</li> <li>Member personal development reviews.</li> <li>Attendance records published annually.</li> <li>Members are encouraged and supported to complete Annual Reports, which are published on the Council's website.</li> <li>Chair of the Democratic Services Committee attends the National Network, facilitated by the WLGA.</li> <li>Chair of Governance and Audit Committee attends All Wales Governance and Audit Committee Chair's Networking Meetings to develop and compare role within Local Authorities.</li> <li>Training provided to Members (as part of induction programme for Members (from May 2022)) Cabinet Member training, Ethics and Standards Committee (role) training, Political Group Leader Duties training and Governance and Audit Committee (role) training.</li> </ul>	Reviewing individual member performance on a regular basis taking account of their attendance and considering any training or development needs Peer Reviews	✓ X	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.
	Geraint Edwards E2.10 Holding Staff to account through regular performance reviews which take account of training or development needs	<ul style="list-style-type: none"> <li>Strategic Workforce planning toolkit includes the identification of training and learning needs for all service areas.</li> <li>Performance Appraisals record training and development needs via the Ceri system.</li> <li>Staff development plans linked to appraisals have been strengthened with the introduction of the Performance Management module in Ceri.</li> </ul>	Training and development Plan Staff development Plans linked to appraisals Implementing appropriate human	✓ ✓ ✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.

		<ul style="list-style-type: none"> <li>Implementing appropriate Human Resource policies and ensuring that they are working effectively.</li> </ul>	resource polices and ensuring that they are working effectively			
	<p>Geraint Edwards/Lowri Edwards</p> <p>E2.11 Ensuring arrangements are in place to maintain the health and wellbeing of the workforce and support individuals in maintaining their own physical and mental wellbeing</p>	<ul style="list-style-type: none"> <li>Human Resources policies.</li> <li><u>Smoke-Free Workplace Policy.</u></li> <li><u>Alcohol and Drug Misuse Policy.</u></li> <li>The Council has introduced a range of resources and options to enhance the health and well-being of Staff.</li> <li>Health and Well-being Strategy 2021-2026 has been introduced to support the improvement in the workforce health and well-being.</li> <li>The Council has appointed an Employee Health &amp; Wellbeing Officer to coordinate and promote health and wellbeing within the workforce.</li> <li>A <u>Care First employee assistance package</u> has been introduced that offers: <ul style="list-style-type: none"> <li>Counselling service; and</li> <li>Advice on financial, legal, consumer, eldercare, childcare and employment issues.</li> </ul> </li> <li>Other support available for Staff includes: <ul style="list-style-type: none"> <li>Cognitive Behaviour Therapy Interactive health and wellbeing programme;</li> <li>Eyecare scheme;</li> <li>Childcare voucher scheme;</li> <li>lechyd Da; and</li> <li>Mindfulness training for Staff and Managers.</li> </ul> </li> <li>Counselling service is also available to Members.</li> </ul>	Human Resource Policies	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.

F. Managing risks and performance through robust internal control and strong public financial management						
<p>Local government needs to ensure that the organisations and governance structures that it oversees have implemented, and can sustain, an effective performance management system that facilitates effective and efficient delivery of planned services. Risk management and internal control are important and integral parts of a performance management system and crucial to the achievement of outcomes. Risk should be considered and addressed as part of all decision making activities.</p> <p>A strong system of financial management is essential for the implementation of policies and the achievement of intended outcomes, as it will enforce financial discipline, strategic allocation of resources, efficient service delivery, and accountability.</p> <p>It is also essential that a culture and structure for scrutiny is in place as a key part of accountable decision making, policy making and review. A positive working culture that accepts, promotes and encourages constructive challenge is critical to successful scrutiny and successful delivery. Importantly, this culture does not happen automatically, it requires repeated public commitment from those in authority.</p>						
Sub-principles	Behaviour	Evidence	Expected	✓/X	Score	Action
<b>F1 Managing risk</b>	Alun Williams F1.1 Recognising that risk management is an integral part of all activities and must be considered in all aspects of decision making	<ul style="list-style-type: none"> <li>The Corporate Risk Management Framework was approved by Cabinet on the 24<sup>th</sup> of September 2019 and continues to be updated.</li> <li>The Corporate Risk Register is considered at all Leadership Group, Corporate Lead Officers, Corporate Performance Management meetings and by the Governance and Audit Committee as a standing item to the Governance and Audit Committee.</li> <li>Risk Management is integral to operational business planning Policy and Strategy setting.</li> <li>Project and transformation Risks are all logged.</li> <li>All Plans included Risk logs including: <ul style="list-style-type: none"> <li>The Medium term Financial Plan;</li> <li>Business Plans (level 1); and</li> <li>Service Plans (level 2).</li> </ul> </li> <li>Corporate Risk Management arrangements are audited regularly.</li> <li>The management of risks is included in individual Services service/establishment audit programmes.</li> <li>'Risks' form the basis of Internal Audit's audit programmes of work, as required by the Pentana audit management software system. Cabinet report template expanded to include risks and implications arising.</li> </ul>	Risk management protocol	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
	Alun Williams F1.2 Implementing robust and integrated risk management arrangements and ensuring that they are working effectively	<ul style="list-style-type: none"> <li><u>The Risk Management Policy and Strategy were approved by Cabinet</u> on the 24.9.2019.</li> <li>The Corporate Risk Register is a standing agenda item at each Leadership Group meeting. Updates are reported at each Governance and Audit Committee Meeting to provide ongoing information and assurance that risks continue to be managed. The Committee refers matters to Scrutiny Committees, where appropriate.</li> <li>Corporate Performance requires regular updates for Risk.</li> <li>The Cross party Transformation and Efficiency Group regularly monitors Transformation Risks.</li> <li>Specific Project Risk Monitoring is undertaken.</li> </ul>	Risk management strategy/policy formally approved, adopted, reviewed and updated on a regular basis	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
	Alun Williams F1.3 Ensuring that responsibilities for	<ul style="list-style-type: none"> <li>All Risks are allocated to a Corporate Lead Officer (Risk Owner).</li> </ul>	Risk management protocol	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.

	managing individual risks are clearly allocated					
<b>F2 Managing performance</b>	Alun Williams F2.1 Monitoring service delivery effectively including planning, specification, execution and independent post-implementation review	<ul style="list-style-type: none"> <li>Corporate performance management is linked to the Well-being and Improvement Objectives, <u>Corporate Strategy 2022-2027</u> and the PSB's plans. The Council also has many local indicators which helps it determine whether it has achieved the priorities in its <u>Corporate Strategy 2022-2027</u>.</li> <li>Council approved the Self-assessment and Annual Review of Performance and Well-being Objectives Annual Report 2021-22.</li> <li>Benchmarking information carried out as part of service re-modelling.</li> <li>External &amp; internal assessments by: <ul style="list-style-type: none"> <li>Audit Wales;</li> <li>Estyn;</li> <li>Care Inspectorate Wales ('CSIW'); Investigatory Powers' Commissioner's Office ('IPCO'); and</li> <li>Information Commissioner's Office ('ICO').</li> </ul> </li> <li>Self-Assessment (Governance and Audit Committee) - self-assessment exercise discussed at 28.11.22 workshop and will be carried out in 2023.</li> <li>Individual Services carry out self-assessment through a performance matrix.</li> <li>IA undertake an annual self-assessment and have a 5-yearly independent external assessment / peer review as required by the PSIAS. EQA completed May 2022, report &amp; resulting action plan presented to Governance &amp; Audit Committee 27.9.22 along with the CMIA's Internal Audit Self Assessment.</li> <li>Cost performance (using inputs and outputs).</li> <li>A Corporate Performance Management Panel meets quarterly. All Corporate Lead Officers report to this Panel and the Dates for reporting are published in the report. The Chairs and Vice Chairs of the Overview and Scrutiny Committees attend with the principle that they can identify areas that require inclusion on their respective Forward Work Programmes.</li> </ul>	Performance map showing all key activities have performance measures	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.
			Benchmarking information	✓		
			Cost performance (using inputs and outputs)	✓		
			Calendar of dates for submitting, publishing and distributing timely reports that are adhered to.	✓		
	Alun Williams / Lowri Edwards/Elin Pryor F2.2 Making decisions based on relevant, clear objective analysis and advice pointing out the implications and risks inherent in the organisation's financial, social and environmental position and outlook	<ul style="list-style-type: none"> <li>Chief Officers provide support and advice to Members.</li> <li>Reporting requires financial and legal advice/implications to be included in reports/decisions, which are published as appropriate.</li> <li>Council / Cabinet report template updated to include reference to legal implications, staffing implications, property/asset implications and risks.</li> <li>Advice provided by Chief Finance Officer.</li> <li>All reports and <u>minutes</u> are published in a timely manner and are open for inspection including: <ul style="list-style-type: none"> <li>Options for recommendations.</li> <li>Scrutiny Chairs are invited to take issues back to Cabinet</li> <li>Governance and Audit Committee refer matters to Scrutiny and receive reports back.</li> </ul> </li> </ul>	Discussion between Members and Officers on the information needs of Members to support decision making	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.
			Publication of agendas and minutes of meetings	✓		
			Agreement on the information that will	✓		



		<ul style="list-style-type: none"> <li>All meetings are held in public, subject to the consideration of exempt information as defined by the 1972 Local Government Act and are hybrid meetings as per the Local Government and Elections Act 2021.</li> <li>Advice given by the MO.</li> <li>Agreement on the information that will be needed and timescales.</li> </ul>	be needed and timescales			
	Lowri Edwards F2.3 Ensuring an effective scrutiny or oversight function is in place which encourages constructive challenge and debate on policies and objectives before, during and after decisions are made, thereby enhancing the organisation's performance and that of any organisation for which it is responsible	<ul style="list-style-type: none"> <li>Scrutiny arrangements are in place which provide opportunities to challenge decision making and review the provision of services. The scrutiny function's aim is to provide added value to the continuous improvement agenda in their role as "critical friend". In addition, Overview and Scrutiny Committees also provide opportunities to undertake pre-decision and policy development work, which is a function of scrutiny, which has developed over recent years. The Council's aim is to scrutinise, where possible, before decisions are made.</li> <li>An Overview and Scrutiny <u>Public Engagement Protocol</u> (2016) (<u>Document N Constitution</u>) has been approved by Council and has been used on several occasions.</li> <li>Arrangements in place to seek the views of the public which is gathered via social media and shared with Overview and Scrutiny Committees for consideration.</li> <li>All agendas and minutes are published on the Council's website.</li> <li><u>Forward Work Programme</u> published on the Council's website.</li> <li>Terms of reference are published on the Council's website.</li> <li>Training for Members on the role of Scrutiny.</li> <li>Scrutiny Chair and Vice Chair training provided.</li> <li><u>Membership details</u> for all Scrutiny Committees is available on the web.</li> <li>The Council's Overview and Scrutiny Co-ordinating Committee is responsible for taking an overview of the overall effectiveness of the <u>PSB</u>.</li> <li>Work undertaken with the <u>Future Generations Office</u> to develop a Scrutiny Framework in relation to the WFGA.</li> <li>Governance and Audit Committee.</li> </ul>	The role and responsibility for scrutiny has been established and is clear Agenda and minutes of scrutiny meetings Evidence of improvements as a result of scrutiny Terms of reference Training for Members Membership Public Service boards are subject to effective scrutiny	✓ ✓ ✓ ✓ ✓ ✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.
	Lowri Edwards/Alun Williams F2.4 Providing Members and senior management with regular reports on service delivery plans and on progress towards outcome achievement	<ul style="list-style-type: none"> <li>The Council revised its Corporate Performance Management arrangements in 2017 to improve monitoring of its business plans and performance indicators. These are also linked to the Corporate Well-being Objectives and the <u>Corporate Strategy 2022-2027</u>.</li> <li>A Corporate Performance Management Board meets each quarter, with Chairs of Scrutiny Committees invited to attend.</li> <li>Reporting dates are set at beginning of each year.</li> <li>Transformation and Risks are all referred to joint Local Government meetings and Panels.</li> <li>Scrutiny Committees may request reports at any time.</li> </ul>	Calendar of dates for submitting, publishing and distributing timely reports that are adhered to	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.

	Duncan Hall F2.5 Ensuring there is consistency between specification stages (such as budgets) and post-implementation reporting (e.g. financial statements)	<ul style="list-style-type: none"> <li>Financial monitoring is regularly undertaken throughout the Council under a devolved accountancy arrangement and formal reporting is made to Cabinet. Monitoring is also incorporated in to the quarterly performance management reports.</li> <li>Financial implications are a requirement for inclusion in all Cabinet Meeting reports.</li> <li><u>Financial Regulations and Financial Procedure Rules (Document F Constitution) and the Contract Procedure Rules (Document G Constitution)</u> are all up to date. The current <u>Procurement Strategy 2018-2022</u> was approved in 2018.</li> <li>Accounting practices - Codes of Practice are complied with. Prudential Indicators are prepared and reported to Council and monitored throughout the year. Regular budget monitoring takes place throughout the year. IA also reviews controls over income collection and monitoring.</li> <li>Business/Service plans are monitored to ensure delivery outcomes are achieved.</li> </ul>	Financial standards, guidance	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required.
			Financial regulations and standing orders	✓		
<b>F3 Robust internal control</b>	Alun Williams / Alex Jenkins F3.1 Aligning the risk management strategy and policies on internal control with achieving objectives	<ul style="list-style-type: none"> <li>Risk Management Policy and Strategy and the Risk Management Framework were approved by Cabinet on 24 September 2019.</li> <li>Updates in relation to Business Continuity and Civil Contingencies arrangements submitted on a regular basis in line with the Corporate Risk Register, Risk CORP04.</li> <li>Business Continuity and Civil Contingencies Group meet quarterly.</li> <li>The annual Internal Audit Plan is risk-assessed and takes account of Council aims and objectives, and corporate policies and procedures; to include a review of the Risk Management corporate arrangements, and testing the mitigating controls in place for a sample of risks noted in the Corporate Risk Register</li> <li>Internal Audit Strategy &amp; Annual Plan 2021-2022 approved by Governance and Audit Committee 10 March 2022, &amp; continues to take account of additional risks presented by the pandemic.</li> <li>IA's annual audit plan can address any necessary re-prioritisation of work, allowing IA to be reactive to any changes in risk within the Council.</li> <li>Internal audit reports issued to Managers highlight the risks of not implementing any IA recommended actions. Fundamental &amp; significant recommended actions are followed up and reported to Governance and Audit Committee. If CMIA considers that any fundamental risks have not been addressed by a Manager this is reported to Governance and Audit Committee who has the discretion of requesting that Manager to attend &amp; explain reasoning for non-compliance.</li> <li>The appointed Auditor considers the Council's arrangements to secure economy, efficiency and effectiveness in his letter he has stated that the Council has complied with its responsibilities to the use of its resources.</li> <li>The Council Objectives are aligned to Strategies.</li> </ul>	Risk management strategy	✓	9/10	Good <del>e</del> - Overall governance considered compliant and meets best practice. No further action required
			Audit Plan 2018/19	✓		
			Audit reports	✓		

<p>Alun Williams / Alex Jenkins F3.2 Evaluating and monitoring risk management and internal control on a regular basis</p>		<ul style="list-style-type: none"> <li>The Council's Risk Management Framework was approved by Cabinet on the 24<sup>th</sup> September 2019 and the Council continues to form strategies and plans taking into account the risks caused by the Covid-19 pandemic.</li> <li>Regular meetings of the Emergency and Business Continuity Management Group take place to review Corporate and Service Area Emergency and Business Continuity Arrangements and Plans as well as recommendations arising from past incidents and exercises to evidence risk, identify emerging trends, and document any lessons learnt for follow up.</li> <li>Risk evaluation always appears on agendas.</li> <li>Internal Audit Strategy &amp; Annual Plan 2022-2023 approved by Governance and Audit Committee 10 March 2022, &amp; continues to take account of additional risks presented by the pandemic.</li> <li>IA's annual audit plan can address any necessary re-prioritisation of work, allowing IA to be reactive to any changes in risk within the Council.</li> <li>Regular Quarterly Internal Audit Progress Reports to Governance and Audit Committee for monitoring (e.g. Internal Audit Progress Report for period 1 <del>April</del>July 2022 to 30 <del>June</del>September 2022 presented to Governance &amp; Audit Committee on <del>27 September 2022</del>17 January 2023).</li> <li>Summary of work and audit opinion on assurance provided annually in Internal Audit Annual Report at year-end. IA Annual Report for 2021/22 approved by Governance &amp; Audit Committee 6 June 2022.</li> <li>Follow-up IA reviews to monitor implementation of required actions.</li> <li>Internal controls, risk &amp; governance processes are monitored according to the Internal Audit Charter (last version approved by Governance &amp; Audit Committee 19/1/22) &amp; the Annual Internal Audit Strategy and Plan.</li> </ul>	<p>Risk management strategy/policy has been formally approved and adopted and is reviewed and updated on a regular basis</p>	<p>✓</p>	<p>9/10</p>	<p>Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required</p>
<p>Alex Jenkins F3.3 Ensuring effective counter fraud and anti-corruption arrangements are in place</p>		<ul style="list-style-type: none"> <li>Compliance with the Code of Practice on Managing the Risk of Fraud and Corruption ('CIPFA', 2014).</li> <li>Internal Auditors have procedures in place if fraud discovered.</li> <li>An Officer in the IA team is an accredited Counter Fraud Technician, <u>and a second officer is also currently undertaking the qualification.</u></li> <li>An officer) in the IA team holds a CIPFA Certificate in Investigative Practices ('CCIP').</li> <li>'Strategy to Counter Fraud, Corruption and Bribery (to include Anti-Money Laundering)' updated and approved by Council 17 June 2021 (minutes confirmed 23 September 2021) has been written with regard to the Code of Practice &amp; updated to ensure all requirements are included.</li> <li>IA undertakes counter fraud work where required (as well as dealing with the discovery of fraud as considered earlier).</li> <li>Council complies with Audit Wales's annual National Fraud Initiative requirements, currently co-ordinated by IA.</li> </ul>	<p>Compliance with the Code of Practice on Managing the Risk of Fraud and Corruption (CIPFA, 2014)</p>	<p>✓</p>	<p>9/10</p>	<p>Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required</p>

		<ul style="list-style-type: none"> <li>IA presents Counter-Fraud Report to Governance and Audit Committee annually (<u>2021/22 Counter-Fraud Report presented to Governance &amp; Audit Committee on 6 June 2022</u>).</li> <li>Monitoring and response to fraud alerts (NAFN, wider networks, peers, etc);</li> <li>Membership and active participation in professional networks and groups (Tisonline, KHub, etc);</li> <li>IA offer advice to services on implementation of new systems and processes to ensure effective internal controls maintained;</li> <li>Nominated Council Officers undertake various fraud training to maintain knowledge and expertise;</li> <li>Where appropriate, successful prosecutions publicised on Council website (and in local press)</li> <li>Covid-19 grant payments audited prior to payment (as easier to stop a payment than recover it);</li> <li>Key financial control audits added to audit plan, to check controls, governance &amp; risks whilst staff working from home</li> <li>IA's annual audit plan can address any necessary re-prioritisation of work, allowing IA to be reactive to any changes in risk within the Council.</li> </ul>				
	Alex Jenkins F3.4 Ensuring additional assurance on the overall adequacy and effectiveness of the framework of governance, risk management and control is provided by the internal auditor	<ul style="list-style-type: none"> <li><u>AGS 2020/21</u> approved by Council on 25 November 2021 with the Statement of Accounts. The AGS contains the CMIA's annual opinion on assurance.</li> <li>The IA function is headed by a CMIA who is currently studying to gain an IIA qualification, they have considerable local government experience, and are supported by a team with appropriate knowledge and skills. Regular reporting to Governance and Audit Committee on the activity of IA is undertaken. Robust risk-based forward work programme and business planning is in place.</li> <li>IA evaluates and improves the effectiveness of risk management, control &amp; governance processes in accordance with PSIAS, which is self-assessed and reported to Governance and Audit Committee annually along with any improvements required. A peer review is undertaken every 5 years the most recent having been completed in May 2022. The report and resulting action plan was presented to Governance &amp; Audit Committee on 27 September 2022.</li> <li>IA provides an individual assurance to Managers after each audit review – these are then used to provide an overall corporate level of assurance annually, which feeds in to the <u>AGS</u>.</li> <li>A re-structure of IA was implemented in May 2019, and another in November 2020. The service has been fully resourced since 1 December 2020.</li> <li>Two members of the team are currently pursuing the Institute of Internal Auditors' professional training qualification.</li> </ul>	Annual Governance Statement	✓	9/10	Good <del>e</del> - <u>O</u> verall governance considered compliant and meets best practice. No further action required.
			Effective Internal Audit service is resourced and maintained	✓		
	Elin Pryor F3.5 Ensuring a Governance and Audit committee or equivalent	<ul style="list-style-type: none"> <li>Governance and <u>Audit Committee</u> established that sets its own work plan. Committee is chaired by a Member of the opposition</li> </ul>	Governance and Audit Committee complies with best practice – see Audit	✓	9/10	Good <del>e</del> - <u>O</u> verall governance considered compliant and meets best practice. No further action required.

	group or function which is independent of the executive and accountable to the governing body: provides a further source of effective assurance regarding arrangements for managing risk and maintaining an effective control environment that its recommendations are listened to and acted upon	<p>group (until May 2022 when Lay Person shall be Chair, per 2021 Act provisions).</p> <ul style="list-style-type: none"> <li>Ongoing preparation and implementation of changes affecting the Governance and Audit Committee in light of the 2021 Act. The Governance and Audit Committee was informed, in a report on 24.2.2021 Meeting, of the changes to their role regarding self-assessment reports of the Council, and regarding panel performance assessments, as well as the change of name, and changes to the Chair/Vice Chair and composition.</li> <li>The Governance and Audit Committee's Terms of Reference were updated on 6 December 2018.</li> <li>Update report on 2021 Act presented to Governance and Audit Committee 3.6.2021, to include updating Governance and Audit Committee regarding changes to Constitution affecting Committee including: <ul style="list-style-type: none"> <li>Recruitment of lay members and the Mid Wales CJC Governance and Audit Sub-Committee; and</li> <li>Regarding the Committee's functions relating to: <ul style="list-style-type: none"> <li>reviewing and assessing the performance assessment of the Council;</li> <li>considering the Council's draft annual Self-Assessment report;</li> <li>considering any report from the Auditor General and Council's draft response;</li> <li>review of the Council's complaints handling function; and role regarding Panel Performance Assessments (from May 2022).</li> </ul> </li> </ul> </li> <li>Changes made during 2021-2022 include preparations for: <ul style="list-style-type: none"> <li>terms of reference/remit/composition changes (including recommendations to Council from Cross-Party Constitution Working Group and changes to Constitution approved by Council at its 23.9.2021 Meeting);</li> <li>change of name to 'Governance and Audit Committee';</li> <li>Membership to be 2/3 Councillors and 1/3 Lay Persons (as defined in Act) – recruitment completed (Council approved appointments 9.12.21);</li> <li>Committee duty to appoint own Chair and Deputy Chair;</li> <li>Chair must be lay person – recruitment completed (Council approved appointments 9.12.21) and Chair/Deputy Chair shall be appointed from Lay Members;</li> <li>Deputy Chair must not be member of Local Authority Executive; and</li> <li>In absence of Chair &amp; Deputy only non-executive Members can chair.</li> </ul> </li> <li>Size of Governance and Audit Committee review completed and change of size from May 2022 approved (9).</li> <li>The Governance and Audit Committee has an effective Lay Member. Membership of Governance and Audit Committee considered in line with 2021 Act: Lay member recruitment</li> </ul>	Committees: Practical Guidance for Local Authorities and Police (CIPFA, 2013)			
			Terms of reference	✓		
			Membership	✓		
			Training	✓		



		<p>completed, taking into account 2021 Act requirements and termination of term of office of current lay member.</p> <ul style="list-style-type: none"> <li>• Job Direction, Personal specification, and criteria approved by Council 10/12/20.</li> <li>• Governance and Audit Committee self-assessment - self-assessment exercise underway.</li> <li>• Reports and minutes are published on the Council's website.</li> <li>• Governance and Audit Committee Terms of Reference updated.</li> <li>• <u>Membership details</u> for Governance and Audit Committee and all Scrutiny Committees is available on the Council's website.</li> <li>• Regular meetings between CMIA and Chair of Governance and Audit Committee.</li> <li>• Meetings as necessary between MO &amp; Chair of Governance and Audit Committee.</li> <li>• Regular meetings between MO &amp; CMIA.</li> <li>• Regular meetings between MO and CMIA &amp; Audit Wales when necessary.</li> <li>• Regular Meetings between Governance and Audit Committee Members and external regulator Audit Wales (with and without Officers)</li> <li>• Regular training / updates provided to Governance and Audit Committee.</li> <li>• Chair of Governance and Audit Committee attends Welsh Governance and Audit Committee Chair network group to develop and compare role within Local Authorities.</li> </ul>				
<b>F4 Managing data</b>	Arwyn Morris F4.1 Ensuring effective arrangements are in place for the safe collection, storage, use and sharing of data, including processes to safeguard personal data.	<ul style="list-style-type: none"> <li>• A New <u>ICT and Digital Strategy for 2018-2022</u> has been approved</li> <li>• All policies are up to date including; (all approved in February 2019). <ul style="list-style-type: none"> <li>◦ <u>Data Protection &amp; GDPR Policy</u>;</li> <li>◦ <u>Information Security Policy</u>; and</li> <li>◦ <u>Records Management Policy</u>.</li> </ul> </li> <li>• A mandatory E-learning training module on Information Security must be completed by all Staff.</li> <li>• A mandatory E-learning training module on Data Protection must be completed by all Staff.</li> <li>• Designated Data Protection Officer.</li> <li>• Corporate Lead Officer Customer Contact is the Senior Information Risk Owner ('SIRO') and has attended appropriate training for that role.</li> <li>• The following responsible Officers are identified: <ul style="list-style-type: none"> <li>◦ IT Security Officer ('ITSO'); and</li> <li>◦ Information and Records Management Officer ('IRMO')</li> </ul> </li> <li>• In addition the following groups/committees consider Information security: <ul style="list-style-type: none"> <li>◦ Corporate Data Protection Group; and</li> <li>◦ Emergency &amp; Business Continuity Meeting.</li> </ul> </li> <li>• External assessments to include compliance with Code of Conduct.</li> <li>• Regular Internal Audit of data protection Registration requirements.</li> </ul>	<p>Data management framework and procedures Could we add the dates to the policies please</p> <p>Designated data protection officer</p> <p>Data Protection policies and procedures</p>	<p>✓</p> <p>✓</p> <p>✓</p>	9/10	Good <del>e</del> -Overall governance considered compliant and meets best practice. No further action required.

		<ul style="list-style-type: none"> <li>Procedures following Audit Wales audit have been implemented.</li> <li>Officers are considering the introduction of privacy notices in relation to applications to all Members, including the Development Management Committee.</li> <li>Training has been scheduled for Members on their obligations under the GDPR as part of the new Member training and a section on said legislation is now included in the protocol for Members in planning.</li> </ul>				
	Arwyn Morris F4.2 Ensuring effective arrangements are in place and operating effectively when sharing data with other bodies	<ul style="list-style-type: none"> <li>Ceredigion County Council signed Wales Accord on the Sharing of Personal Information ('WASPI') and therefore uses WASPI framework for Information Sharing Agreements.</li> <li>In most cases agreements are forwarded to the Data Protection Officer.</li> <li>There is also a public register on <a href="#">WASPI Website</a>.</li> <li>Regular external Assessments e.g. Compliance with Code of Conduct.</li> </ul> <p>***The Accord is a common set of principles and standards under which partner organisations will share personal information. Organisations who adopt the Accord will show their commitment in meeting the agreed conditions, obligations and requirements within the framework.</p>	Data sharing agreement	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
			Data sharing register	✓		
			Data processing agreements	✓		
	Arwyn Morris F4.3 Reviewing and auditing regularly the quality and accuracy of data used in decision making and performance monitoring	<ul style="list-style-type: none"> <li><a href="#">Records Management Policy</a>.</li> <li><a href="#">Data Protection/GDPR Policy</a>.</li> <li>Internal performance monitoring and evidence.</li> <li>Cross matching data happens across the different services.</li> <li>Performance Indicator values are validated with evidence.</li> <li>Retention Schedule –now <a href="#">published</a> on intranet.</li> </ul>	Data quality procedures and reports Could we add the dates to the policies please Is there an example of Internal performance monitoring	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
			Data validation procedures What data validation is carried out	✓		
<b>F5 Strong public financial management</b>	Duncan Hall F5.1 Ensuring financial management supports both long-term achievement of outcomes and short-term financial and operational performance	<ul style="list-style-type: none"> <li>The current <a href="#">Medium Term Financial Strategy</a> ('MTFS') was established during the 2013-14 year and fundamentally updated and approved by Council on the 24th February 2016. The Current MTFS is that of <a href="#">2018/2019 Onwards</a>, but has now been amended to reflect the 2021/2022 provisional revenue settlement and updated to: <ul style="list-style-type: none"> <li>Reflect the impact of Covid-19</li> <li>Reflect 'Boosting Ceredigion's Economy – A Strategy for Action 2020-35'</li> <li>Amend the transformation savings plan</li> <li>Project forward cost pressures</li> </ul> </li> </ul>	Financial management supports the delivery of services and transformational change as well as securing good stewardship	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.

		<ul style="list-style-type: none"> <li>○ Reflect data changes, regulations, plans, policies and strategies and is being presented to Cabinet for approval 23.2.2021 for approval to then be presented to Council on 5.2.2021.</li> <li>• This now includes a policy framework for setting the budgets annually as well as a three-year plan. The MTFS features as a corporate risk that is updated at least three times a year. The annual budget setting also included a risk assessment. The Council is responding to the proposal in the 2016 Wales Audit Office (now Audit Wales) Annual Improvement Report, and considering the report in light of the MTFS through ensuring that the Council's financial management arrangements are sufficiently robust to meet the significant challenges ahead.</li> <li>• A Strategic Plan has been developed and has improved the programme of work necessary to consider service priorities whilst addressing financial constraints.</li> <li>• An annual budget project plan/timetable is established to ensure that a balanced budget is approved within the statutory period in accordance with the Councils budget framework. Regular budget reports are taken to Cabinet and Leadership Group throughout the year and operational budgets are monitored on a monthly basis.</li> </ul>				
	Duncan Hall F5.2 Ensuring well-developed financial management is integrated at all levels of planning and control, including management of financial risks and controls	<ul style="list-style-type: none"> <li>• Budget monitoring is regular throughout the year, within services, to Cabinet and to Member Officer working groups e.g. Development Group and CMG and transformation programme savings to the Cross Party Transformation and Efficiency Consultative Group.</li> <li>• Quarterly Executive Panel meetings take place if required with Corporate Lead Officers together with the Leader of the Council, the CE, Corporate Lead Officer for Finance and Cabinet Member with Finance responsibility.</li> </ul>	Budget monitoring reports	✓	9/10	Good <del>⊖</del> Overall governance considered compliant and meets best practice. No further action required.

G. Implementing good practices in transparency, reporting, and audit to deliver effective accountability						
Accountability is about ensuring that those making decisions and delivering services are answerable for them. Effective accountability is concerned not only with reporting on actions completed, but also ensuring that stakeholders are able to understand and respond as the organisation plans and carries out its activities in a transparent manner. Both external and internal audit contribute to effective accountability.						
Sub-principles	Behaviour	Evidence	Expected	✓/X	Score	Action
<b>G1 Implementing good practice in transparency</b>	Lowri Edwards/Arwyn Morris/Alun Williams G1.1 Writing and communicating reports for the public and other stakeholders in an understandable style appropriate to the intended audience and ensuring that they are easy to access and interrogate	<ul style="list-style-type: none"> <li>Council's <u>Website</u>.</li> <li>Council and Cabinet meetings are broadcasted.</li> <li>Standard templates for Cabinet, Scrutiny and Council.</li> <li>Compliance to the <u>Welsh language Standards</u>.</li> <li>Use of Modern.Gov for publishing agendas and Councillor Information.</li> <li>Council implementing changes introduced by 2021 Act, which include for Council to consult and publish a public participation strategy with the aim of increasing public participation in local democracy, and improving transparency.</li> <li>Council compliance with The Local Authorities (Coronavirus) (Meetings) (Wales) Regulations 2020, which allow for remote access for meetings and public access/publishing of documents requirements.</li> <li>Work is underway to prepare a Community Engagement Policy that will meet the requirements of the 2021 Act, which will also include how we will encourage participation in decision-making, although final guidance is awaited from Welsh Government regarding this part of the legislation.</li> <li>Council <u>Roadmap</u> provided up-to-date information for citizens on services being provided due to Covid-19 pandemic, in order to provide clarity for County residents.</li> <li></li> <li>Equipment has been installed in the Council Chamber to enable hybrid meetings to be held, as per the Local Government and Elections Act 2021. The Council provides alternative ways for citizens to access information if they don't have access to digital services. The Citizen can telephone the Council's Contact Centre or visit its Libraries where public access to computers are available or free 4G Wi-Fi to allow anyone to use their own device.</li> </ul>	Website	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
			Council meetings are webcast	✓		
	Lowri Edwards G1.2 Striking a balance between providing the right amount of information to satisfy transparency demands and enhance public scrutiny while not being too onerous to provide and for users to understand	<ul style="list-style-type: none"> <li>Councillors' contact details, attendance records, Committee membership and Declarations of Interests available on the <u>Council's Website</u>.</li> <li>Councillors' annual reports available on the Council's Website.</li> <li>Overview and Scrutiny Annual Report available on the <u>Council's Website</u>.</li> <li><u>Democratic Services Annual Report available on the Council's Website</u>.</li> </ul>	Councillors annual reports	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
			Annual report	✓		

G2 Implementing good practices in reporting	Alun Williams G2.1 Reporting at least annually on performance, value for money and the stewardship of its resources	<ul style="list-style-type: none"> <li>The County Council's Self-assessment and Annual Review of Performance and Well-being Objectives Annual Report <u>is</u> published on the Ceredigion County website to inform Ceredigion citizens what activities and actions the Council undertakes in support of its Well-being and Improvement Objectives. This also forms part of the Council's self-assessment. A summary plan is also available in public offices for our citizens.</li> <li><u>Annual financial statements</u> are published on the Council's Website.</li> </ul>	Formal annual report which includes key points raised by external scrutineers and service users feedback on service delivery	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
			Annual finance statements	✓		
	Alun Williams G2.2 Ensuring Members and senior management own the results	<ul style="list-style-type: none"> <li>Appropriate approvals.</li> <li>Corporate Performance Management arrangements.</li> <li>Ownership of planning and transformation.</li> </ul>	Appropriate approvals	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
	Elin Pryor G2.3 Ensuring robust arrangements for assessing the extent to which the principles contained in the Framework have been applied and publishing the results on this assessment including an action plan for improvement and evidence to demonstrate good governance (annual governance statement)	<ul style="list-style-type: none"> <li>Council's <u>AGS</u> evidences how it complies with the seven core Governance Framework Principles and sub-principles contained in the Framework and in the Local Code of Corporate Governance, including how it puts in place proper arrangements for the governance of its affairs, facilitates the effective exercise of its functions, and makes arrangements for risk management (the Governance Framework was developed in 2010 and has been revised in accordance with the CIFA/SOLACE Delivering Good Governance in Local Government Framework 2016). In compliance also with Local Government (Wales) Measure 2009 and The Well-being of Future Generations (Wales) Act 2015.</li> <li>Assessment of the framework for corporate governance carried out to ensure compliance e.g. updated to reflect changes necessary because of Covid-19 pandemic. Decision by Council whether <u>AGS</u> approved e.g. updated and approved by Council <u>25 November 2021</u> (with accounts).</li> <li>Council's <u>Local Code of Corporate Governance</u> demonstrates how it has the necessary corporate governance arrangements in place to perform effectively. The Local Code of Governance is a public statement that sets out the way the Council will meet that commitment.</li> </ul>	Annual Governance Statement	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
	Elin Pryor G2.4 Ensuring that the Framework is applied to jointly managed or shared service organisations as appropriate	<ul style="list-style-type: none"> <li><u>AGS</u> shared with accounts, reviewed and updated with Members and Officers providing a wider engagement process.</li> </ul>	Annual Governance Statement	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.
	Duncan Hall G2.5 Ensuring the performance information that accompanies the financial statements is	<ul style="list-style-type: none"> <li>Financial implications are a requirement for inclusion in all Cabinet Meeting reports. <u>Financial Regulations and Financial Procedure Rules (Document F Constitution)</u>, <u>Contract Procedure Rules (Document G Constitution)</u> are all up to date.</li> </ul>	Format follows best practice	✓	9/10	Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.



	prepared on a consistent and timely basis and the statements allow for comparison with other similar organisations	<p>The current <u>Procurement Strategy 2018-2022</u> was approved in 2018.</p> <ul style="list-style-type: none"> <li>Accounting practices - Codes of Practice are complied with Prudential Indicators are prepared and reported to Council and monitored throughout the year. Regular budget monitoring takes place throughout the year. IA also reviews controls over income collection and monitoring.</li> </ul>				
<b>G3 Assurance and effective accountability</b>	Elin Pryor G3.1 Ensuring that recommendations for corrective action made by external audit are acted upon	<ul style="list-style-type: none"> <li>A good working relationship exists with external regulators, including Audit Wales, Estyn, CIW, Financial Services Authority ('FSA') and Food Standards Agency as key regulators.</li> <li>Audit Wales Protocol documented and procedures in place to ensure all 'Management Response Forms' from each Audit Wales report addressed and that Service responses are presented to Leadership Group, Governance and Audit Committee and Audit Wales.</li> <li>Regarding monitoring of progress of actions/recommendations, Governance Officer is Audit Wales point of contact for outstanding Management Response Forms ('MRFs') for 2019/20 &amp; 2020/21, and ongoing governance-related MRFs/governance matters. Corporate Performance and Improvement Officer is point of contact for performance-related MRFs/performance matters. This system is set out in a Protocol, approved by Leadership Group and presented to Governance and Audit Committee, with updated version (to reflect that the Corporate Performance and Improvement Officer is in post) presented to Governance and Audit Committee 9.9.2021 Meeting.</li> <li>Monthly meetings are also being held between Performance officers &amp; Audit Wales, and can be arranged with other officers as necessary. Regular dialogue is maintained with representatives from Audit Wales.</li> <li>Recommendations from Audit Wales are taken forward in the Corporate Performance Management arrangements.</li> <li>All Audit Wales reports presented to Leadership group and Governance and Audit Committee, which monitors implementation of corrective actions required.</li> <li>Monitoring of progress of Actions process has been developed.</li> </ul>	Recommendations have informed positive improvement	✓	9/10	<p>Good <del>e-</del> Overall governance considered compliant and meets best practice.</p> <p>Monitor progress of Actions/recommendations.</p>
	Alex Jenkins G3.2 Ensuring an effective internal audit service with direct access to Members is in place which provides assurance with regard to governance arrangements and recommendations are acted upon	<ul style="list-style-type: none"> <li>Chief Internal Auditor <del>onwards(CMIA)</del> is currently studying to gain an IIA qualification, and <del>thereafter the Chartered qualification and has considerable</del> local government experience, and is supported by a team with appropriate knowledge and skills.</li> <li>The Audit <del>m</del>Manager is undergoing <del>tean</del> IIA qualification.</li> <li>and two auditors are developing ICT auditing skills.</li> <li>IA Officers are undergoing audit qualifications to enhance knowledge, skills and competency.</li> </ul>	<p>Compliance with CIPFA's Statement on the Role of the Head of Internal Audit (2010) and CIPFA 2019 statement on role of Internal Audit</p> <p>Compliance with PSIAS</p>	<p>✓</p> <p>✓</p>	9/10	<p>Good <del>e-</del> Overall governance considered compliant and meets best practice. No further action required.</p> <p>Internal Audit now fully staffed. Training is in progress.</p>

		<ul style="list-style-type: none"><li>• A re-structure of IA was implemented in May 2019, and another in November 2020- <u>and April 2022</u>. The service has been fully resources<u>d</u> since 1 <del>December 2020</del><u>June 2022</u>.</li><li>• A new CMIA has <u>been</u> in place from 1 January 2022, and has considerable experience in IA, and is supported by a knowledgeable &amp; skilled Audit Manager.</li><li>• The role of CMIA has free and unfettered access to the Chair of the Governance &amp; Audit Committee and both meet regularly during the year.</li><li>• Robust risk-based forward work programme and business planning is in place.</li><li>• Regular reporting to Governance &amp; Audit Committee on the activity of IA is undertaken, i.e. quarterly Internal Audit Progress Reports to Governance &amp; Audit Committee for monitoring progress performance and improvement and summary of work and audit opinion on assurance provided annually in Internal Audit Annual Report at year end. Follow-up reviews undertaken to monitor corrective actions are implemented.</li><li>• Internal Audit Charter regularly reviewed and approved by Governance &amp; Audit Committee (last version approved by Audit Committee 19/1/22).</li><li>• CMIA provides annual objective opinion on assurance placed on Council's risk management, control and governance processes, based on the individual assurances given to Managers after each audit review, &amp; feeds into the <u>AGS</u>.</li><li>• Compliance with PSIAS reported annually to Governance &amp; Audit Committee with resultant improvement plan. Peer review of assessment every five years (latest review completed May 2022, report and resulting improvement plan were presented to Governance &amp; Audit Committee on the 27 September 2022).</li><li>• IA's mission is to enhance &amp; protect organisational value by providing risk-based &amp; objective assurance, advice &amp; insight. This is detailed in the internal Audit Charter, which also states IA's right of access (as per the Council's Financial Regulations/<u>Constitution</u>).</li></ul>				<p><del>Actions in place to ensure smooth transition in exchange of CMIA role</del></p> <p><del>Arrange 5-year peer review with Anglesey</del></p> <p><u>QAIP updated following EQA, and all actions either completed or in progress.</u></p>
Alex Jenkins G3.3 Welcoming peer challenge, reviews and inspections from regulatory bodies and implementing recommendations	<ul style="list-style-type: none"><li>• A good working relationship exists with the Welsh Government as key regulator. Regular dialogue is maintained with representatives from Audit Wales.</li><li>• Recommendations from Audit Wales are taken forward in the Corporate Performance Management arrangements.</li><li>• The Council is learning and continually works towards improvement.</li><li>• Five-yearly external assessment of IA is undertaken as required by PSIAS.</li><li>• The last Internal Audit External Assessment was undertaken in May 2022 by Anglesey County Council and was reported to Audit Committee, along with the resultant improvement Plan on 27 September 2022.</li></ul>	Recommendations have informed positive improvement	✓	9/10	<p>Good <del>e</del>- <u>Overall</u> governance considered compliant and meets best practice. No further action required.</p> <p><u>QAIP updated following EQA, and all actions either completed or in progress.</u></p>	

		<ul style="list-style-type: none"> <li>IA progress, performance &amp; improvement is reported to Audit Committee quarterly.</li> </ul>				
	Elin Pryor G3.4 Gaining assurance on risks associated with delivering services through third parties and that this is evidenced in the annual governance statement	<ul style="list-style-type: none"> <li><u>AGS</u>.</li> <li>Members and Officers carry out a review of the <u>AGS</u> annually.</li> </ul>	Annual governance statement	✓	9/10	Good <del>e</del> - <u>O</u> verall governance considered compliant and meets best practice. No further action required.
	Alun Williams / Diana Davies G3.5 Ensuring that when working in partnership, arrangements for accountability are clear and that the need for wider public accountability has been recognised and met	<ul style="list-style-type: none"> <li><u>PSB</u>'s terms of reference and <u>Well-being Plan</u></li> <li>Annual report from PSB.</li> <li>The Ceredigion County Council Overview and Scrutiny Co-ordinating Committee is responsible for taking an overview of the overall effectiveness of the Board.</li> <li>Partnership and Accountability agreements are established in collaborative projects.</li> </ul>	Public Service Boards terms of reference and well-being plans Public service boards engage with scrutiny	✓ ✓	9/10	Good <del>e</del> - <u>O</u> verall governance considered compliant and meets best practice. No further action required.

# Annual Governance Statement

## 2022-23



Approved by Council [x]

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## 1 EXECUTIVE SUMMARY

Ceredigion County Council ('the Council') is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded, properly accounted for, and used economically, efficiently and effectively.

The Council is also committed to improving the social, economic, environmental and cultural wellbeing of its citizens. This commitment is set out in the Council's Corporate Strategy 2022-2027 and describes how the council will meet the challenges ahead and make the most of opportunities. The Council's vision for this period is that the 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'* and is to be achieved by fulfilling the Corporate Priorities, which are:

1. Boosting the Economy, Supporting Businesses and Enabling Employment;
2. Creating Caring and Healthy Communities;
3. Providing the Best Start in Life and Enabling Learning at All Ages; and
4. Creating Sustainable, Greener and Well-Connected Communities.

To be successful the council must have a solid foundation of good governance and sound financial management. The Council's Local Code of Corporate Governance ensures that we are doing the right things, in the right way, in line with our values. The Local Code is supported by a Governance Assurance Framework that sets out what assurances the Council seeks to obtain, and how this will be done.

A copy of the Council's Local Code of Corporate Governance and Annual Governance Statement is available on the Council's website at <https://www.ceredigion.gov.uk/your-council/councillors-committees/annual-governance-statement/>.

The Council also has a duty under the Local Government (Wales) Measure 2009 to arrange to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness. In discharging this overall responsibility, the Council must ensure proper arrangements for the governance of its affairs are in place, facilitating the effective exercise of its functions, and which includes the arrangements for the management of risk. The Local Government and Elections (Wales) Act 2021 is in force and the Council has taken the necessary steps to ensure compliance.

A Governance Framework was developed in 2010 and has been revised in accordance with the CIFA/SOLACE Delivering Good Governance in Local

Government Framework 2016. The framework is used to review the governance arrangements on an annual basis.

The Well-being of Future Generations (Wales) Act 2015 also introduces new governance arrangements for public services in Wales. Public bodies are required to carry out sustainable development. It places a well-being duty on public bodies to set and publish well-being objectives designed to maximise their contribution to the seven national well-being goals. They are also expected to take all reasonable steps towards achieving their objectives.

Following the review and in accordance with the requirements of the Framework a Local Code of Corporate Governance is in place and has been reviewed for 2023-24.

The Local Code of Corporate Governance brings together in one document all the governance and accountability arrangements the Council has in place. The Code is based on best practice guidance set out in the CIPFA/SOLACE Framework Delivering Good Governance in Local Government.

Following a review by Audit Wales of the Council's Planning Service undertaken during the period April to July 2021 (Report issued October 2021), the Council is working to support Audit Wales with their Planning Service Follow-Up Review. Any recommendations will be responded to as reference in the action plan below..

The Council's Governance Framework is based on the International Framework: Good Governance in the Public Sector (CIPFA/IFAC, 2014) and the following seven principles:

- A: Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law
- B: Ensuring openness and comprehensive stakeholder engagement
- C: Defining outcomes in terms of sustainable economic, social and environmental benefits.
- D: Determining the interventions necessary to optimise the achievement of the intended outcomes
- E: Developing the entity's capacity, including the capability of its leadership and the individuals within it
- F: Managing the risks and performance through robust internal control and strong public financial management
- G: Implementing good practices in transparency reporting, and audit to deliver effective accountability

The Council is required, each year, to produce an Annual Governance Statement ('AGS') (this document), which explains how the Council has complied with the seven core principles and sub-principles contained in its Governance Framework and the

Local Code of Corporate Governance, and also meets the requirement of The Accounts and Audit (Wales) Regulations 2014. This AGS gives assurances on compliance for the year ending 31 March 2023 and up to the date of approval of the Statement of Accounts.

The Leader of the Council and Chief Executive both recognise the importance of having a solid foundation of good governance and sound financial management. They pledge their commitment to address the matters highlighted in this AGS, and to further enhance the Council's governance arrangements.

The Leader and Chief Executive confirm they have been advised of the implications of the review by Senior Management and the Audit Committee and are satisfied that the steps outlined in this AGS will address the areas for improvement.

Signed on behalf of **Ceredigion County Council**

**Leader of the Council**

**Chief Executive**

Date: xx/xx/xxxx

Date: xx/xx/xxxx

## **2 Assessment of the effectiveness of key elements of the Governance Framework**

The Council is committed to demonstrating that it has the necessary corporate governance arrangements in place to perform effectively.

The Leader of the Council provides clear strategic direction and the Constitution clearly defines the roles of Councillors and Officers. Internal and External Audit, Ethics and Standards Committee and the Governance and Audit Committee are committed to ensuring the governance arrangements are effective and robust.

The Council has conducted an annual review of the effectiveness of its governance against the CIPFA/SOLACE Delivering Good Governance Framework (2016). The review involved a member/officer workshop in which the Council's Governance Framework Document was analysed and reviewed, with further changes made after the workshop reported to the Governance and Audit committee. Contributions were made to the review by the following Members: the Chair of the Governance and Audit Committee along with councillor and lay members of the committee. In addition, the Monitoring Officer, Corporate Manager - Internal Audit, Governance Officer, Corporate Lead Officer - Democratic Services, Corporate Manager – Democratic Services,

Corporate Lead Officer – People & Organisation and the Corporate Manager – Partnerships, Performance and Public Protection also took part.

During the workshop each behaviour was introduced and scored against a scoring mechanism, as follows:

- 1/2 Unacceptable Immediate action required
- 3/4 Below satisfactory - urgent Action Required (within 3-6 months)
- 5/6 Satisfactory - Action Required (before end of year 9-12 months)
- 7/8 Acceptable Minor adjustments may be required
- 9/10 Good - overall Governance considered to be good and meets best practice no further action required

Each score used in the Governance Framework Document is a score out of 10 e.g. a score of 7/8 means a score of between 7 and 8 out of a total 10 marks.

The Governance Framework Document was also circulated to other officers, who have governance/management responsibilities within the Council. The review framework was presented to the Governance and Audit Committee on 17<sup>th</sup> January 2023.

The effectiveness of the governance framework draws on evidence and assurances from:

- Internal and External Audit and Inspection;
- Financial Controls;
- Risk and Performance Management;
- Legal and Ethical Standards;
- Corporate Directors and Other Senior Management, including the S.151 Officer and the Monitoring Officer;
- The Governance and Audit Committee; and
- Overview and Scrutiny Committees.

In addition, the Corporate Manager - Internal Audit undertakes an independent review of the Governance Framework and the method of scoring and evidence, on an annual basis. The review of the 2022/23 Framework was completed in January 2023 and provided 'high' assurance that there was a sound system of scrutiny and robustness in place. This was reported to the Governance and Audit Committee in March 2023.

The Council has drawn together a Local Code for Corporate Governance which sets out the systems and processes, and cultures and values, by which the authority is directed and controlled and its activities through which it accounts to, engages with and leads the community. It enables the authority to monitor the achievement of its

strategic objectives and to consider whether those objectives have led to the delivery of appropriate, cost-effective services.

The system of internal control is a significant part of that code and is designed to manage risk to a reasonable level. It cannot eliminate all risk of failure to achieve policies, aims and objectives and can therefore only provide reasonable assurance of effectiveness. The system of internal control is based on an ongoing process designed to identify and prioritise the risks to the achievement of the Council's policies, aims and objectives, to evaluate the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively and economically.

The Local Code for Corporate Governance is available on the Council's website at <https://www.ceredigion.gov.uk/your-council/councillors-committees/annual-governance-statement/>.

The CIPFA Financial Management code sets the standards of financial management for local authorities. It is designed to support effective practice in financial management and to assist local authorities in demonstrating their budgetary sustainability. The S151 Officer has undertaken a self-assessment review and is satisfied that the Council is compliant with the code.

### **3 Corporate Governance Achievements for 2022-23**

The Local Code for Corporate Governance sets out the Local Authority's commitment to the principles of good governance. The following paragraphs outline the Corporate Governance achievements during 2022-23.

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

##### **Behaving with integrity**

- Code of Conduct for Members (updated in 2016) available on the Council's website, intranet site (CeriNet) under Councillor Resources, and in the Constitution.
- Members Code of Conduct Flowchart (updated in 2016).
- Code of Conduct for Officers\* (review undertaken and currently awaiting approval) available along with all Corporate policies and strategies via Council website/CeriNet.
- Mandatory Induction and follow-up training on Code of Conduct and ethics provided to all Members.
- Ethics/Fraud training provided in collaboration with Council's insurer at Corporate Managers' quarterly workshop 2021 forming a basis for e-learning module for all Staff.
- Internal Audit ('IA') & Governance Services working with Learning & Development have prepared scenarios for training. Training supported by recent review of



Council's Strategy on Counter-Fraud, Corruption & Bribery (to include Anti-Money Laundering).

- Day to day advice is provided by the Monitoring Officer ('MO') and Scrutiny Support Officer.
- Disciplinary Policy (Nov 2017).
- Personal Development Reviews carried out to review performance.
- Register of Members interests, available from the Council's Democratic Services, reviewed by MO.
- Declaration of Interest and Hospitality forms for Officers and Members on CeriNet.
- Monitoring and review by MO of Chief Officers' declarations annually.
- MO advises Chief Officers and Members on need to declare close personal associations with other Officers or Members.
- MO advising of Officers regarding declarations of interest is ongoing. Regular reminders through News Updates on CeriNet system and at Leadership Group.
- NFI match highlights Staff who are directors of companies that have dealings with the Council – any non-declarations investigated by IA and reported to MO.
- Declaration of interest process to be extended to include requirement regarding related parties: that officers and Members declare if they are closely related to other Officers, Members or teachers. Specific declaration/return required stating whether this includes a Chief Officer (and to state relationship).
- Declaration of interest process to be extended to include requirement that Members specify Directorships - company name and number, (un)remunerated, private interest or Council appointment.  
MO to remind Members of the need to accurately disclose all Directorships (including dormant companies).
- Declaration of interest process to be extended to include requirement that Members specify role within memberships - observer, member, volunteer, Committee member, Board member or Trustee.
- Officers' declaration of interest to include requirement to declare if they or a close family member, or any person or organisation acting on their behalf, are on the Board, management committee or other controlling group of an organisation with which the Council has significant dealings.
- Review is currently being undertaken of the external bodies that have appointed Members, including added value, and updating of the Constitution.
- MO to undertake enquiries with company secretaries as necessary to ascertain basis of Members trustee/Directorship interests within charitable organisations or companies, and rationale. To seek amendment of Articles of Association or resignation of Council directorships if necessary.
- Members required to update Register of Interests in accordance with the Code of Conduct, and in addition, annually, which is opportunity to reference any close personal associates/roles etc. Additionally, declarations of interest made by members at meetings. This includes lay/independent members.
- Politically Restricted Post Register for Officers maintained and Political Restrictions on Local Government Employees Policy available to employees on CeriNet. Register of Politically Restricted Posts published on Council website.
- Dispensations forms for members updated in 2022.
- MO meets with political group leaders quarterly to consider their new duties to uphold standards of conduct of Members in their group.
- Political group leaders to cooperate with the Ethics and Standards Committee as required in pursuance of their new duties.

- Political group leaders to complete template setting out actions undertaken to evidence compliance with their new duties.
- Local Resolution Procedure for Members: ungrouped/unaffiliated Member receives Council Chair/Vice Chair' advice/support.
- The Ethics and Standards Committee has received training on its new duties (from May 2022) under the Local Government and Elections (Wales) Act 2021 ('2021 Act').
- The Terms of Reference of the Development Management Committee (formerly Development Control Committee) have been revised to clearly state its purpose, role and responsibilities, and how it links to Corporate Priorities.
- The Operational Procedures document for the Development Management Committee has been revised. A 'cooling-off' process has been established in order to review planning applications, which may, if approved, be a significant departure from policy.
- The Scheme of Delegations contains criteria for applications, which must be referred to the Development Management Committee, and those applications that can be delegated to the Corporate Lead Officer.
- A Protocol for Good Practice for Councillors at Development Management Committee has been produced and included in the Constitution.
- A good working relationship exists with all key regulators.
- The Constitution is subject to regular reviews, with ongoing updates as required, including presenting proposed changes to Cross Party Constitution Working Group, to make recommendations on changes to Constitution to Council. MO/Governance Officer report to Council to update delegations and Constitution.
- The Corporate Strategy 2022-2027 includes Corporate Well-being Objectives setting out the Council's priorities and high-level objectives with supporting actions on an annual basis.
- The Well-being and Improvement Objectives build on the priority areas identified in the Corporate Strategy 2022-2027 and are reviewed annually These are developed in consultation with the public and Members.
- A mandatory E-learning training module, on the Well-Being of Future Generations Act 2015 ('WFGA') must be completed by all Staff
- Members' standards and conduct matters considered by the Council's Ethics and Standards Committee. Public meetings held regularly, and chaired by an independent person-determine dispensations, and consider strategic/policy issues and receive updates from PSOW Findings & APW cases. Committee and Members are advised by the MO & Standards Officer.
- Annual Ethics & Standards Committee Report reported to Council in October 2022.
- Governance & Audit Committee meets regularly to consider governance and external regulator reports. Chaired by non-executive member.
- Governance and Audit Committee carry out a benchmarking exercise annually to provide further assurance on the review of the Annual Governance Statement ('AGS') process. IA review and report on the process annually.
- Effective 'Strategy to Counter Fraud, Corruption and Bribery (to include Anti-Money Laundering)' in place (updated June 2021).
- Internal Audit Annual Report on Counter Fraud presented to Governance and Audit Committee at year-end.
- Ethics Audit undertaken during 2019. Follow up Internal Audit of Council's arrangements regarding ethics also in progress (currently in review).

- Whistleblowing Policy available to Employees and Contractors (has been reviewed and is currently awaiting approval).
- A mandatory E-learning training module on Whistleblowing must be completed by all Staff. The MO keeps a register of referrals and reports 6-monthly to the Overview and Scrutiny Co-ordinating Committee.
- Revised Corporate Concerns and Complaints Policy published 1.10.2021.
- All complaints are dealt with in accordance with the corporate procedures which include informal and formal stages and these are communicated to Staff on a regular basis.
- The complaints system is monitored by the Corporate Complaints and Freedom of Information Manager.
- Annual Complaints Report considered by the Governance and Audit Committee and Cabinet prior to approval by Council. Includes Lessons Learned from complaints received.
- Agenda/Minutes for all committees published on the Council's Website, including disclosures of interests.
- Cabinet Decision Notices published on the Council's Website.
- Preparation for publication of delegated decisions register ongoing.
- Register of Contracts published on Council Website.

### **Demonstrating strong commitment to ethical values**

- Ethics and Standards Committee championing ethical compliance to ensure that public have trust and confidence that Members and Officers work to highest ethical and moral standards.
- The Ethics and Standards Committee has been proactive, leading on training sessions and putting procedures in place for dispensation arrangements. The structure has recently been reviewed to improve efficiency and effectiveness.
- Officers such as Internal Auditors, sign an annual Code of Ethics affirmation.
- Follow up Internal Audit of Council's arrangements regarding Ethics also in progress (currently in review).
- Carmarthen County Council undertook an independent audit of ethics within the Council during 2019. Follow up Internal Audit of Council's arrangements regarding ethics in progress (currently in review).
- Employee Handbook is reviewed annually, is available on CeriNet, sets out the expected Employee behaviour and includes the Code of Conduct for Local Government Employees.
- Training on equality and diversity and recruitment and selection including equal opportunities is mandatory for all Ceredigion County Council Managers.
- All Staff must complete an e-learning module on Equality & Diversity.
- Standard Terms and Conditions for all Suppliers of Goods and services include conditions relating to Equality and Diversity and are available on the Council's website.
- Procurement Strategy 2018-2022 was approved by Council 19<sup>th</sup> June 2018.
- Procurement training also being rolled out to Staff.
- Council Recruitment Policy and DBS Policy.
- Training Needs Analysis Questionnaire has been circulated by Council newsletter to Staff requesting opinion on ethical culture of Council & training module planned in response to feedback.

## Respecting the rule of law

- Council Constitution.
- Terms of reference are included in the Constitution.
- Consideration is being given to the Data Protection Principles, and processing of personal information in the context of Council Committees and all Members.
- Training for all Members on Introduction for Council, including GDPR.
- Statutory powers and legal implications included in every decision-making Cabinet report.
- Legal and Financial advice/implications is provided on all appropriate reports for decision.
- The MO and Legal Services and the IA Service are available to advise as appropriate.
- The MO attends Leadership Group/Cabinet/Council meetings and routinely attends many public meetings, as required, subject to availability. In the absence of the MO, the Deputy MO will attend Cabinet and Council meetings.
- The MO has direct access to the CE and reports to Council generally and as part of statutory duty.
- The MO operates an 'open' door policy for Members wishing to receive 'conduct' and 'governance' advice.
- Job descriptions & person specifications clearly define the roles and responsibilities required of posts.
- Members' Role descriptions set out their respective responsibilities.
- Compliance with CIPFA's Statement on the Role of the Chief Financial Officer in Local Government (CIPFA, published 13 April 2016).
- Compliance with CIPFA's Statement on the Role of the Head of Internal Audit in Public Service Organisations (CIPFA, published 9 April 2019) & contribution published in CIPFA's accompanying Putting Principles into Practice document (2019).
- Financial Regulations and Financial Procedure Rules (Document F Constitution).
- Contract Procedure Rules (Document G in the Council's Constitution).
- Compliance with Specific Codes e.g. Internal Auditors' Public Sector Internal Audit Standards ('PSIAS', March 2017)
- Members of Governance and Audit Committee updated on fraud including IA annual counter fraud report.
- Statutory Officers accountable to the Chief Executive ('CE') and the Council.
- Regular meetings between CE, S.151 Officer & MO.
- Corporate Manager – Internal Audit ('CMIA') has free & unfettered access to Members and Officers at all levels, and right of access as per Council's Constitution and Internal Audit Charter.
- An Officer in the IA team is an accredited Counter Fraud Technician, a second officer is now also undertaking the qualification.
- An Officer in the IA team holds a CIPFA Certificate in Investigative Practices ('CCIP').
- Council complies with Audit Wales's annual National Fraud Initiative requirements, currently co-ordinated by Internal Audit.
- Monitoring and response to fraud alerts (NAFN, wider networks, peers, etc).
- Membership and active participation in professional networks and groups (Tisonline, KHub, etc).

- Nominated Council Officers undertake various fraud training to maintain knowledge and expertise.
- Where appropriate, successful prosecutions publicised on Council website (and in local press).

## **B. Ensuring openness and comprehensive stakeholder engagement:**

### **Openness**

- All Council, Cabinet and Committee meetings open to the public and agendas and papers published on the Council website (with the exception of exempt reports exempt information as defined by the 1972 Local Government Act).
- Council and Cabinet meetings are broadcasted.
- In accordance with the requirements of the LGEW Act 2021, arrangements have been made to enable hybrid meetings to be held from May 2022. New equipment has been installed in the Chamber. Council and Cabinet meetings are being broadcasted on the Council's Facebook pages. Members of the public can attend to view meetings remotely or in person.
- All Statutory Annual Reports, Statements of Accounts and Improvement Progress Reports are all published within timescales and are available on the Council's website.
- Freedom of Information Act publication scheme.
- A host of service areas are available online including council tax self-service and information.
- The Council's goals and values are set out in the Corporate Strategy 2022-2027.
- Ceredigion County Council Website.
- MO and Ethics & Standards generic email addresses created.
- Regular and timely responses to the press and other enquiries to Management and members as well as comprehensive FOI responses.
- Review of the FOI Publication scheme in progress.
- Freedom of Information Policy (March 2018).
- Corporate Complaints and Freedom of Information Manager in post.
- Complaints and Freedom of Information Privacy Notice.
- An Overview and Scrutiny Public Engagement Protocol ( 2018) (Document N Constitution) has been approved by Council and has been used on several occasions.
- Protocol for speaking at the Development Management Committee in place (Part 4 Document I Constitution).
- Protocol for access by Cabinet Members to Overview and Scrutiny Committee approved by Council (Part 5 Document M2 Constitution).
- Integrated Impact Assessment ('IIA') tool and guidance to inform effective decision making have been developed and are being implemented.
- Council / Cabinet report template updated to include reference to legal implications, staffing implications, property / asset implications and risks and to reflect the new Corporate Strategy 2022 - 2027.
- Standard templates and guidance for reporting to Council, Cabinet and Overview and Scrutiny Committees are used and all include the IIA results.
- A Protocol is in place for working relationships between Members and Officers (e.g. Officer-Member Protocol). (The Constitution Part 5).



- A calendar of dates of meetings including forward work programmes of the Council, Cabinet and Committees are published on the Council's website.
- Organisational Awareness training available as an optional module of the Corporate Manager Programme, which includes information relating to the decision making process, Wellbeing of Future Generations Act, Equalities, Welsh Language and the use of the IIAs.
- The Engagement and Consultation Checklist assists with decision making around whether or not to undertake a consultation regarding a proposed change and guidance on dissemination of consultation results is available to Officers.
- IIA conclusions reported to Council, Cabinet and Overview and Scrutiny. 8 IIAs went to Cabinet from 01.04.2022 to 07.12.2022 (2022-23 part year).
- The Council, in collaboration with partners, has carried out significant engagement to produce the Public Service Board's ('PSB') Well-being Assessment and Local Well-being Plan.
- Well-being objectives for 2022-23 have been set in order to deliver the Corporate Strategy 2022-2027.
- Corporate Complaints Policy has been reviewed, new Policy presented to Corporate Resources Overview & Scrutiny Committee 7.7.21 and to Council 23.9.2021, and Revised Concerns and Complaints Policy and Procedures 2021, its implementation and publication approved by Council.
- Social Services Complaints Policy and Procedure has been reviewed.
- Consultation Decision making tool (Consultation Tree and flowchart) have been developed and includes the use of feedback.
- Consultations are published on the Corporate section of the Council Website.
- Consultations are promoted through social media
- Guidance has been issued on the Ceredigion Council intranet to all Staff to follow with regards to the dissemination of feedback to decision makers. Recent indications are that significant progress is being made in this area by Officers.

### **Engaging comprehensively with institutional stakeholders**

- Public Services Board Terms of Reference available on the Council Website and PSB Project Groups Terms of Reference available. Scrutiny arrangements for the PSB have been put in place.
- Joint engagement and consultation exercises are held. Collaborative projects are running with institutional stakeholders with clear governance arrangements in place.
- Engagement with Service Users List including stakeholders with whom the authority should engage is in place and Engagement and Participation Policy.
- Collaboration Standards for New Strategic Projects Guidance and Templates are available.

Partnerships Include:

- PSB;
- West Wales Regional Partnership Board;
- Community Safety Partnership;
- Mid and West Wales Safeguarding Board; and
- Growing Mid Wales.
- Partnerships such as Growing Mid Wales have been established with governance arrangements. Growing Mid Wales Joint Overview and Scrutiny Committee has been established.

- Regular reporting of partnership meetings and activity to Leadership Group and Cabinet.
- Partnership metrics are subject to internal review, where appropriate.
- Legal Team is actively involved in drafting and reviewing Terms of Reference for Inter Authority Agreements ('IAAs') and formal committees.
- A suite of documents have been developed that relate to strategic collaboration projects that the Authority is considering entering into. The documents include guidance, standards and numerous templates for varying stages of collaboration projects.

### **Engaging stakeholders effectively, including individual citizens and service users**

- A new Engagement and Participation Policy for Ceredigion County Council, 'Talking, Listening and Working Together,' has been prepared and was agreed through the democratic process in Autumn 2022.
- A Community Engagement, Consultations and Partnerships Page has been created on CeriNet, which includes links to Engagement and Participation Policy, Engagement and Consultation Checklist, Engagement with Service Users and Consultation Decision Making Tool.
- All IAs for Cabinet are assessed by the Equalities and Inclusion Manager, including whether effective engagement, involvement and consultation has taken place and informed strategic decision making process.
- Public Engagement Tool Kit.
- IA Tool Kit.
- Summary reports on consultation and engagement activities are reported back to Members and service users.
- We have worked in partnership with Local Authorities and Public Services across Mid and West Wales on the review of our Strategic Equality Plans. A joint question set and engagement and consultation framework was produced and as a result, feedback was obtained from people with protected characteristics.
- Minutes of engagement groups with people with protected characteristics.
- Effective Community involvement carried out with the well-being assessment work.
- Effective Community involvement carried out with service users from different backgrounds to inform the new Strategic Equality Plan.
- Corporate Communications Strategy 2019-2022 is currently under review and a new Strategy will be developed in 2023.
- Dissemination of consultation results and reports on completed consultations and engagement exercises are posted on the Council's public consultations webpage in order to provide feedback to the public.
- Processes have been introduced to monitor feedback e.g. any consultation/engagement reports are presented to Scrutiny and Cabinet to inform their decision-making.
- Feedback from engagement and how people's views have been taken into account is recorded in the IAs.
- A Well-being assessment (PSB) has been carried out that will inform the development of the PSB's Local Well-being Plan, which will be published in May 2023.
- An annual report on progress made against the Council's Well-being objectives and Corporate priorities in published on the Council Website.

- UNCRC – United Nations Convention on the Rights of the Child have been adopted by the Council.
- Participation Standards have been adopted by Council.

### **C. Defining outcomes in terms of sustainable, economic, social and environmental benefits:**

#### **Defining outcomes**

- The Council's Corporate Well-being Objectives are included in the Council's Corporate Strategy 2022-2027 and are reviewed each year and reported in the Self-assessment and Annual Review of Performance and Well-being Objectives Annual Report published on the Ceredigion County Council website.
- The purpose and the vision of the Council have been determined by Council and is contained in the Corporate Strategy 2022-2027. This strategy illustrates how the authority will support and promote the well-being of the citizens of Ceredigion.
- All Planning arrangements reflect the Golden Thread and make the links to Corporate plans including;
  - Business Plans;
  - Strategic Plan;
  - Corporate Performance Management Reporting; and
  - Well-being and Improvement Objectives.
- Performance information is outlined in the Council's Self-assessment and Annual Review of Performance and Well-being Objectives Annual Report .
- Business Plans are prepared on an annual basis and are monitored quarterly by a Performance Board, which includes Cabinet members and the Chairs and Vice Chairs of the Overview and Scrutiny Committees and Chair of the Governance and Audit Committee.
- Budget setting subject to detailed scrutiny by the five Overview and Scrutiny Committees.
- The Medium Term Financial Plan is in place.
- Quarterly performance arrangements provide a challenge protocol to ensure outcomes are delivered.
- Business planning process includes resource allocation.
- Cross-Party Transformation and efficiency Group monitors the budget savings and delivery of services within budgets.
- Corporate performance management arrangements include quarterly assessment of risks to the achievement of outcomes or service delivery.
- Risk management includes risk logs for;
  - Business Plans (Level 1); and
  - Service Plans (Level 2).
- Local performance measures are included in Business and service delivery plans.
- Capital Plans include;
  - Rights of Way;
  - Highways;
  - Annual Budget Plan; and
  - Transformation.
- The Risk Management Policy and Strategy and the Risk Management Framework was approved by Cabinet on 24 September 2019.

- Risk Management training to be rolled out to Members and Senior Managers.
- Risk management e-learning package has been developed for all other Staff and training took place in 2019, with workshop with insurers arranged for senior Managers.
- Publication of service performance, including costs and value for money data is routinely considered within service reports.

### **Sustainable economic, social and environmental benefits**

- The appointed Auditor considers the Council's arrangements to secure economy, efficiency and effectiveness. In his letter he has stated that the Council has complied with its responsibilities to the use of its resources.
- The most recent Audit of the Council's Improvement Plan (2020-2021) was issued in November 2020. The report concluded positively that the Council discharged its duties and has acted in accordance with Welsh Government guidance sufficiently to discharge its duties.
- A capital appraisal form is completed for new capital projects, which covers the requirement for the project, and is used to assess value for money and the revenue implications of major projects.
- Capital Investment Strategy is contained within the Medium Term Financial Strategy.
- The Authority has undertaken the following steps towards the implementation of the Well-being of Future Generations (Wales) Act 2015:
  - Prepared well-being objectives and statement;
  - Embedded the Well-being Goals and Sustainable; development principal into the business planning process
  - Developed a new IIA tool and guidance;
  - Established a Well-being of Future Generations Act group and action plan;
  - The Constitution is continually monitored and reviewed;
  - PSB assessment of Local Well-being published in March 2017;
  - Scrutiny arrangements agreed for PSB;
  - Cabinet Reports, to include the Social/economic/ environmental impact assessment;
  - A mandatory e-learning module on the Act has been developed and promoted to all Council Staff;
  - an Equality, community and Welsh language Impact Assessment must be undertaken on all school restructuring proposals as required under the Welsh Government School Organisation Code; and
- Members have contributed to The Future Generations Officer Scrutiny Framework in relation to the WFGA.
- Wales procurement policy statement is aligned to the Council's Procurement Strategy 2018-2022.
- The Council wide WFGA Group Action Plan.
- Strategic Equality Plan 2020-2024.
- Welsh Language Standards.
- Annual Welsh Language Standards monitoring report.
- A mandatory E-learning training module on Welsh Language Awareness must be completed by all Staff.
- Members provided with Welsh Language Awareness and Equalities Training as part of their Induction Programme.

## **D. Determining the interventions necessary to optimise the achievement of the intended outcomes:**

### **Determining interventions**

- The IIA tool and guidance is available and training has been rolled out for Officers and Members.
- Corporate project management group has been established to formalise project development and management.
- Standard reporting templates are used in decision making process.
- Organisational Awareness training available as an optional module of the Corporate Manager Programme, which includes information relating to the decision-making process, Wellbeing of Future Generations, Equalities, Welsh Language and the use of the IIAs, Head of Democratic Services and MO (CLO-Legal & Governance) advise as necessary.
- Risk Management Policy, Strategy and Framework with training programme for Members, Senior Management and Managers, published on CeriNet and available to all Members of Staff. Documents amended to reflect additional risks and background information to make informed decisions. Corporate Risk Register reported regularly to Governance and Audit Committee.
- Medium Term Financial Strategy has been regularly updated.
- Consultation decision tree tool includes a guidance section on dissemination of consultation results.
- Finance challenge regarding savings on Council Website.

### **Planning interventions**

- Corporate Performance Management arrangements include quarterly:
  - Weekly leadership Group meetings;
  - Quarterly reporting of progress against level 1 Business Plans;
  - Quarterly Performance Board meetings; and
  - Quarterly Executive Panel Meetings.
- A calendar is used to report deadlines and Board/Executive Panel dates are published with reports.
- All major collaboration projects have established governance and management arrangements including risk management.
- All projects considered by Corporate Project Management Panel, which is also attended by IA and is an effective forum for advice/challenge and highlighting risks as Service areas develop projects, including collaboration projects.
- The Corporate Project Management Panel helps ensure projects give early consideration to: the Well Being and Future Generations Act; to other guidance; to finance, procurement, governance and legal arrangements; to HR implications; Health & Safety; and Audit. Improve project arrangements prior to reporting to the Development Group and other authorisation processes. This also helps identify capital requirements for inclusion in future capital programmes.
- Ensuring Staff with project management skills are available.
- Account will be taken of legislative changes e.g. work is ongoing in relation to implementing legislative changes such as LGEW 2021 Act changes and considering/monitoring risks facing each partner when working collaboratively, including shared risks. Meetings are being held and preparation being carried out, for example, regarding the 2021 Act's requirement for Corporate Joint



Committees, including potential and shared risks (a CJC group has been established, with the first meeting held on 19th April 2021, to consider the requirement to establish the Mid Wales CJC in accordance with the 2021 Act).

- Appropriate Joint Scrutiny arrangements are in place in relation to the Growing Mid Wales Board. Similarly, the Mid Wales Corporate Joint Committee will have Sub appropriate arrangements in place (Joint Scrutiny, Standards and Governance and Audit Committee)- arrangements in compliance with legislation and its Standing Orders.
- Local performance indicators have been established and approved for each service element and included in the service plan and are reported upon regularly.
- The Business Planning process for 2022-23 is being implemented with Level 1 Business Plans shared with the Performance and Research Team.
- Performance measures have been identified within each Level 1 Business Plan that have in turn translate into the reporting Dashboard for each service. These measures have been closely scrutinised and have received final sign-off from senior leadership. Services report against these measures as part of the performance management process for the year.
- Business Plans include budget and finance information and form part of the quarterly Corporate Performance Management arrangements.
- Budget Framework in place.
- Service Accountancy – Budget monitoring takes place.
- Financial Regulations and Financial Procedure Rules (Document F Constitution) along with Budgetary Control Guidance are all up to date. Chief Officer Assurance Statements. The internal controls in place are subject to regular review by Internal Audit, in accordance with the annual risk-based audit plan.
- Changes through the corporate savings plan have been through a robust governance process to ensure that all savings all link to the desired outcome.
- Community Benefits is embedded in our Processes and Policies and has been regularly applied, monitored and reported upon. Well-being of Future Generations (Wales) Act is integrated into our processes.

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

##### **Developing the entity's capacity**

- Corporate and line management induction is now in place. Corporate induction and Corporate Manager Development plans were introduced in April 2018 and revised in October 2022. Corporate induction sessions are part of these requirements, all new Staff must attend an induction session. Senior Managers present within these face-to-face or virtual sessions.
- CeriNet (the HR intranet and resource to Staff and management) is continually reviewed and improved for effectiveness.
- Learning & Development is now managed via the Ceri system offering opportunities to all Staff.
- Ongoing annual Personal Performance scheme – Performance Reviews link to Corporate and strategic objectives.
- The Corporate Performance Management arrangements provide the forum for performance management's needs and thereafter preparing action plans for delivery of corporate improvements in performance review of Staff. These have

been further strengthened with the introduction of annual appraisals for all Staff via the Ceri HR system.

- Induction programme is provided for new Members. Ongoing training is arranged for specific issues e.g. Treasury management.
- Members attend various events, seminars and conferences (see above).
- Personal Development Review process in place for Members.
- Utilisation of research and benchmarking exercises.
- The Ceri HR payroll system has ensured that meaningful data on Staff is now available to Managers on a monthly basis in order to monitor costs turnover and absence.
- Effective operation of partnerships which deliver agreed outcomes.
- Effective Partnerships have been developed in a number of areas and services including:
  - School Improvement;
  - Health & Social care; and
  - Waste.
- Additional partnerships are included in the strategic Collaboration Projects List.
- Strategic workforce planning is undertaken utilising the Strategic workforce planning tool kit and is completed by all service areas. The Workforce Plan 2022-2027 is currently being developed and will be published once approved by Cabinet in early 2023. Once in place, annual updates on progress of the workforce plan are reported to scrutiny.

### **Developing the capability of the entity's leadership and other individuals**

- The Leadership and Senior Officer structure has defined these roles, including how they integrate with each other.
- Joint meeting of senior Managers ensures that roles, responsibilities and accountabilities are clear.
- Job descriptions clearly define the roles and responsibilities required of posts.
- The Constitution sets out the roles and responsibilities of Members (Part 3.4 Table 4) and senior Officers (part 2 Article 2)
- The Strategic Planning Toolkit includes an element of succession planning and talent management.
- Learning and Development opportunities are offered to those within a Leadership role or who are aspiring leaders.
- A Scheme of Delegation (The Constitution Part 3.5) exists and clearly sets out responsibilities for Members and Officers.
- Protocols are in place for working relationships between Members and Officers (e.g. Officer-Member Protocol).
- Codes of Conduct for Officers and Members are in place.
- Member Officer working groups in place and working effectively.
- Contract Procedure Rules ('CPR') (Part 4 Document G Constitution) and Financial Regulations and accompanying financial procedures (Part 4 Document F Constitution) are reviewed on a regular basis e.g. CPR updated March 2019.
- The Council's Constitution sets out the functions and responsibilities of the Leader and Chief Executive.
- The Corporate structure of the Council has been established to ensure that the Statutory Officers are able to perform their roles effectively.
- The CE is responsible for reviewing this structure, as necessary.

- Democratic Services Committee agreed the revised set of Member Role Descriptions, designed to be used alongside Welsh member Development (Competency) Framework, of Welsh Local Government Association ('WLGA') Framework.
- Member Role Descriptions and Person Specifications presented to Council.
- Comprehensive Induction Programme for Members (new and old) undertaken following the Local Elections 2022.
- Access to courses/information briefings on new legislation.
- Provision of opportunities for ongoing skills and refresher training for Officers.
- Members Workshops arranged, as necessary.
- Personal reviews for Officers.
- Provision and ongoing review of opportunities for skills and refresher training for Members (see above), including Personal Development Review Scheme.
- Development/training done as part of person specifications for key finance and legal posts (mandatory qualification, job requirements).
- The Council aims to achieve the standard level for the Wales Charter for Member Support and Development.
- A process for Member Personal Development Reviews has been developed and the information used to develop a Members' Training Plan.
- Induction and Corporate Manager Development plans are in place.
- E-learning packages are regularly being developed and rolled out for mandatory and non-mandatory training for staff and Members.
- Performance Reviews are undertaken by all Staff as part of the Ceri system Performance Management module.
- The Corporate Performance Management arrangements provide the forum for performance management's needs and thereafter preparing action plans for delivery of corporate improvements in performance review of Staff.
- Induction programme is provided for new Members and new comprehensive induction programme has been provided post-election (from May 2022) with additional e-learning modules available. Ongoing training is arranged for specific issues. Members attend various events, seminars and conferences (see above).
- Scrutiny self-assessment undertaken annually.
- Succession planning is undertaken through discussions and actions within service areas and with partners this cannot always be evidenced. This will be further developed through the strategic workforce planning toolkit.
- Ceredigion Manager Programme offers personal development including governance arrangements and organisational knowledge.
- Members are encouraged and supported to complete Annual Reports, which are published on the Council's website.
- Chair of the Democratic Services Committee attends the National Network, facilitated by the WLGA.
- Chair of Governance and Audit Committee attends All Wales Governance and Audit Committee Chair's Networking Meetings to develop and compare role within Local Authorities.
- Staff development plans linked to appraisals have been strengthened with the introduction of the Performance Management module in Ceri.
- Implementing appropriate Human Resource policies and ensuring that they are working effectively.
- Smoke-Free Workplace Policy.
- Alcohol and Drug Misuse Policy.

- The Council has introduced a range of resources and options to enhance the health and well-being of Staff.
- Health and Well-being Strategy 2021-2026 has been introduced to support the improvement in the workforce health and well-being.
- The Council has appointed an Employee Health & Wellbeing Officer to coordinate and promote health and wellbeing within the workforce.
- A Care First employee assistance package has been introduced that offers:
  - Counselling service; and
  - Advice on financial, legal, consumer, eldercare, childcare and employment issues.
- Other support available for Staff includes:
  - Cognitive Behaviour Therapy Interactive health and wellbeing programme;
  - Eyecare scheme;
  - Childcare voucher scheme;
  - Iechyd Da; and
  - Mindfulness training for Staff and Managers.
- Counselling service is also available to Members.

## **F. Managing risks and performance through robust internal control and strong financial management:**

### **Managing risk**

- The Corporate Risk Management Framework and the Risk Management Policy and Strategy were approved by Cabinet on the 24<sup>th</sup> of September 2019 and continue to be updated.
- The Corporate Risk Register is considered at all Leadership Group, Corporate Lead Officers, Corporate Performance Management meetings and by the Governance and Audit Committee as a standing item. The Committee refers matters to Scrutiny Committees, where appropriate. This provides ongoing information and assurance that risks continue to be managed.
- All Risks are allocated to a Corporate Lead Officer (Risk Owner).
- Specific Project Risk Monitoring is undertaken.
- The Cross party Transformation and Efficiency Group regularly monitors Transformation Risks.
- Risk Management is integral to operational business planning Policy and Strategy setting.
- Project and transformation Risks are all logged.
- All Plans included Risk logs including:
  - The Medium term Financial Plan;
  - Business Plans (level 1); and
  - Service Plans (level 2).
- Corporate Risk Management arrangements are audited regularly.
- The management of risks is included in individual Services service/establishment audit programmes.
- 'Risks' form the basis of Internal Audit's audit programmes of work, as required by the Pentana audit management software system. Cabinet report template expanded to include risks and implications arising.

## Managing performance

- Corporate performance management is linked to the Well-being and Improvement Objectives, Corporate Strategy 2022-2027 and the PSB's plans. The Council also has many local indicators which helps it determine whether it has achieved the priorities in its Corporate Strategy 2022-2027.
- Council approved the Self-assessment and Annual Review of Performance and Well-being Objectives Annual Report 2021-22.
- Benchmarking information carried out as part of service re-modelling.
- External & internal assessments by:
  - Audit Wales;
  - Estyn;
  - Care Inspectorate Wales ('CSIW'); Investigatory Powers' Commissioner's Office ('IPCO'); and
  - Information Commissioner's Office ('ICO').
- Self-Assessment (Governance and Audit Committee) - self-assessment exercise discussed at 28.11.22 workshop and will be carried out in 2023.
- Individual Services carry out self-assessment through a performance matrix.
- IA undertake an annual self-assessment and have a 5-yearly independent external assessment / peer review as required by the PSIAS. EQA completed May 2022, report & resulting action plan presented to Governance & Audit Committee 27.9.22 along with the CMIA's Internal Audit Self Assessment.
- Cost performance (using inputs and outputs).
- A Corporate Performance Management Panel meets quarterly. All Corporate Lead Officers report to this Panel and the Dates for reporting are published in the report. The Chairs and Vice Chairs of the Overview and Scrutiny Committees attend with the principle that they can identify areas that require inclusion on their respective Forward Work Programmes.
- Chief Officers provide support and advice to Members and advice provided by Chief Finance Officer and MO.
- Scrutiny arrangements are in place which provide opportunities to challenge decision making and review the provision of services. The scrutiny function's aim is to provide added value to the continuous improvement agenda in their role as "critical friend". In addition, Overview and Scrutiny Committees also provide opportunities to undertake pre-decision and policy development work, which is a function of scrutiny, which has developed over recent years. The Council's aim is to scrutinise, where possible, before decisions are made.
- Training for Members on the role of Scrutiny and Scrutiny Chair and Vice Chair training provided.
- The Council's Overview and Scrutiny Co-ordinating Committee is responsible for taking an overview of the overall effectiveness of the PSB.
- Work undertaken with the Future Generations Office to develop a Scrutiny Framework in relation to the WFGA.
- A Corporate Performance Management Board meets each quarter, with Chairs of Scrutiny Committees invited to attend.
- Reporting dates are set at beginning of each year.
- Transformation and Risks are all referred to joint Local Government meetings and Panels.
- Financial monitoring is regularly undertaken throughout the Council under a devolved accountancy arrangement and formal reporting is made to Cabinet.



Monitoring is also incorporated in to the quarterly performance management reports.

- Accounting practices - Codes of Practice are complied with. Prudential Indicators are prepared and reported to Council and monitored throughout the year. Regular budget monitoring takes place throughout the year. IA also reviews controls over income collection and monitoring.
- Business/Service plans are monitored to ensure delivery outcomes are achieved.

### **Robust internal control**

- Risk Management Policy and Strategy and the Risk Management Framework were approved by Cabinet on 24 September 2019.
- Updates in relation to Business Continuity and Civil Contingencies arrangements submitted on a regular basis in line with the Corporate Risk Register, Risk CORP04.
- Business Continuity and Civil Contingencies Group meet quarterly.
- Regular meetings of the Emergency and Business Continuity Management Group take place to review Corporate and Service Area Emergency and Business Continuity Arrangements and Plans as well as recommendations arising from past incidents and exercises to evidence risk, identify emerging trends, and document any lessons learnt for follow up.
- The annual Internal Audit Plan is risk-assessed and takes account of Council aims and objectives, and corporate policies and procedures; to include a review of the Risk Management corporate arrangements, and testing the mitigating controls in place for a sample of risks noted in the Corporate Risk Register
- Internal Audit Strategy & Annual Plan 2021-2022 approved by Governance and Audit Committee 10 March 2022 & continues to take account of additional risks presented by the pandemic.
- IA's annual audit plan can address any necessary re-prioritisation of work, allowing IA to be reactive to any changes in risk within the Council.
- Regular Quarterly Internal Audit Progress Reports to Governance and Audit Committee for monitoring (e.g. Internal Audit Progress Report for period 1 July 2022 to 30 September 2022 presented to Governance & Audit Committee on 17 January 2023).
- Internal audit reports issued to Managers highlight the risks of not implementing any IA recommended actions. Fundamental & significant recommended actions are followed up and reported to Governance and Audit Committee. If CMIA considers that any fundamental risks have not been addressed by a Manager this is reported to Governance and Audit Committee who has the discretion of requesting that Manager to attend & explain reasoning for non-compliance.
- Summary of work and audit opinion on assurance provided annually in Internal Audit Annual Report at year-end. IA Annual Report for 2021/22 approved by Governance & Audit Committee 6 June 2022.
- Follow-up IA reviews to monitor implementation of required actions.
- Internal controls, risk & governance processes are monitored according to the Internal Audit Charter (last version approved by Governance & Audit Committee 19/1/22) & the Annual Internal Audit Strategy and Plan.
- The appointed Auditor considers the Council's arrangements to secure economy, efficiency and effectiveness in his letter he has stated that the Council has complied with its responsibilities to the use of its resources.
- Risk evaluation always appears on agendas.

- Compliance with the Code of Practice on Managing the Risk of Fraud and Corruption ('CIPFA', 2014).
- Internal Auditors have procedures in place if fraud discovered.
- An Officer in the IA team is an accredited Counter Fraud Technician, and a second officer is also currently undertaking the qualification.
- An officer in the IA team holds a CIPFA Certificate in Investigative Practices ('CCIP').
- 'Strategy to Counter Fraud, Corruption and Bribery (to include Anti-Money Laundering)' updated and approved by Council 17 June 2021 (minutes confirmed 23 September 2021) has been written with regard to the Code of Practice & updated to ensure all requirements are included.
- IA undertakes counter fraud work where required (as well as dealing with the discovery of fraud as considered earlier).
- Council complies with Audit Wales's annual National Fraud Initiative requirements, currently co-ordinated by IA.
- IA presents Counter-Fraud Report to Governance and Audit Committee annually (2021/22 Counter-Fraud Report presented to Governance & Audit Committee on 6 June 2022).
- Monitoring and response to fraud alerts (NAFN, wider networks, peers, etc);
- Membership and active participation in professional networks and groups (Tisonline, KHub, etc);
- IA offer advice to services on implementation of new systems and processes to ensure effective internal controls maintained;
- Nominated Council Officers undertake various fraud training to maintain knowledge and expertise;
- Where appropriate, successful prosecutions publicised on Council website (and in local press)
- IA's annual audit plan can address any necessary re-prioritisation of work, allowing IA to be reactive to any changes in risk within the Council.
- The AGS contains the CMIA's annual opinion on assurance.
- The IA function is headed by a CMIA who is currently studying to gain an IIA qualification, they have considerable local government experience, and are supported by a team with appropriate knowledge and skills. Regular reporting to Governance and Audit Committee on the activity of IA is undertaken. Robust risk-based forward work programme and business planning is in place.
- IA evaluates and improves the effectiveness of risk management, control & governance processes in accordance with PSIAS, which is self-assessed and reported to Governance and Audit Committee annually along with any improvements required. A peer review is undertaken every 5 years the most recent having been completed in May 2022. The report and resulting action plan were presented to Governance & Audit Committee on 27 September 2022.
- IA provides an individual assurance to Managers after each audit review – these are then used to provide an overall corporate level of assurance annually, which feeds in to the AGS.
- A re-structure of IA was implemented in May 2019, and another in November 2020. The service has been fully resourced since 1 December 2020.
- Two members of the team are currently pursuing the Institute of Internal Auditors' professional training qualification.
- Governance and Audit Committee self-assessment - self-assessment exercise underway
- Regular meetings between CMIA and Chair of Governance and Audit Committee.

- Meetings as necessary between MO & Chair of Governance and Audit Committee.
- Regular meetings between MO & CMIA.
- Regular meetings between MO, CMIA & Audit Wales when necessary.
- Regular Meetings between Governance and Audit Committee Members and external regulator Audit Wales (with and without Officers).

## Managing data

- ICT and Digital Strategy for 2018-2022 has been approved
- All policies are up to date including; (all approved in February 2019).
  - Data Protection & GDPR Policy;
  - Information Security Policy; and
  - Records Management Policy.
- A mandatory E-learning training module on Information Security must be completed by all Staff.
- A mandatory E-learning training module on Data Protection must be completed by all Staff.
- Designated Data Protection Officer.
- Corporate Lead Officer Customer Contact is the Senior Information Risk Owner ('SIRO') and has attended appropriate training for that role.
- The following responsible Officers are identified:
  - IT Security Officer ('ITSO'); and
  - Information and Records Management Officer ('IRMO')
- In addition the following groups/committees consider Information security:
  - Corporate Data Protection Group; and
  - Emergency & Business Continuity Meeting.
- External assessments to include compliance with Code of Conduct.
- Regular Internal Audit of data protection Registration requirements.
- Procedures following Audit Wales audit have been implemented.
- Officers are considering the introduction of privacy notices in relation to applications to all Members, including the Development Management Committee.
- Training has been scheduled for Members on their obligations under the GDPR as part of the new Member training and a section on said legislation is now included in the protocol for Members in planning.
- Ceredigion County Council signed Wales Accord on the Sharing of Personal Information ('WASPI') and therefore uses WASPI framework for Information Sharing Agreements.
 

\*\*\*The Accord is a common set of principles and standards under which partner organisations will share personal information. Organisations who adopt the Accord will show their commitment in meeting the agreed conditions, obligations and requirements within the framework.
- In most cases agreements are forwarded to the Data Protection Officer.
- There is also a public register on WASPI Website.
- Regular external Assessments e.g. Compliance with Code of Conduct.
- Internal performance monitoring and evidence.
- Cross matching data happens across the different services.
- Performance Indicator values are validated with evidence.
- Retention Schedule –now published on intranet.

## **Strong public financial management**

- The current Medium Term Financial Strategy ('MTFS') was established during the 2013-14 year and fundamentally updated and approved by Council on the 24th February 2016. The Current MTFS is that of 2018/2019 Onwards, but has now been amended to reflect the 2021/2022 provisional revenue settlement and updated to:
  - Reflect the impact of Covid-19
  - Reflect 'Boosting Ceredigion's Economy – A Strategy for Action 2020-35'
  - Amend the transformation savings plan
  - Project forward cost pressures
  - Reflect data changes, regulations, plans, policies and strategiesand is being presented to Cabinet for approval 23.2.2021 for approval to then be presented to Council on 5.2.2021.
- This now includes a policy framework for setting the budgets annually as well as a three-year plan. The MTFS features as a corporate risk that is updated at least three times a year. The annual budget setting also included a risk assessment. The Council is responding to the proposal in the 2016 Wales Audit Office (now Audit Wales) Annual Improvement Report, and considering the report in light of the MTFS through ensuring that the Council's financial management arrangements are sufficiently robust to meet the significant challenges ahead.
- A Strategic Plan has been developed and has improved the programme of work necessary to consider service priorities whilst addressing financial constraints.
- An annual budget project plan/timetable is established to ensure that a balanced budget is approved within the statutory period in accordance with the Council's budget framework.
- Regular budget reports are taken to Cabinet and Leadership Group throughout the year and operational budgets are monitored on a monthly basis.
- Budget monitoring is regular throughout the year, within services, to Cabinet and to Member Officer working groups e.g. Development Group and CMG and transformation programme savings to the Cross Party Transformation and Efficiency Consultative Group.
- Quarterly Executive Panel meetings take place if required with Corporate Lead Officers together with the Leader of the Council, the CE, Corporate Lead Officer for Finance and Cabinet Member with Finance responsibility.

## **G. Implementing Good Practices in transparency, reporting and audit to deliver effective accountability:**

### **Implementing good practice in transparency**

- Council's Website.
- Council and Cabinet meetings are broadcasted.
- Standard templates for Cabinet, Scrutiny and Council.
- Compliance to the Welsh language Standards.
- Use of Modern.Gov for publishing agendas and Councillor Information.
- Councillors' contact details, attendance records, Committee membership and Declarations of Interests available on the Council's Website.
- Councillors' annual reports available on the Council's Website.

- Overview and Scrutiny Annual Report available on the Council's Website.
- Democratic Services Annual Report available on the Council's Website.
- Equipment has been installed in the Council Chamber to enable hybrid meetings to be held, as per the Local Government and Elections Act 2021. The Council provides alternative ways for citizens to access information if they don't have access to digital services. The Citizen can telephone the Council's Contact Centre or visit its Libraries where public access to computers are available or free 4G Wi-Fi to allow anyone to use their own device.

### **Implementing good practices in reporting**

- The County Council's Self-assessment and Annual Review of Performance and Well-being Objectives Annual Report is published on the Ceredigion County website to inform Ceredigion citizens what activities and actions the Council undertakes in support of its Well-being and Improvement Objectives. This also forms part of the Council's self-assessment. A summary plan is also available in public offices for our citizens.
- Annual financial statements are published on the Council's Website.
- Council's AGS evidences how it complies with the seven core Governance Framework Principles and sub-principles contained in the Framework and in the Local Code of Corporate Governance, including how it puts in place proper arrangements for the governance of its affairs, facilitates the effective exercise of its functions, and makes arrangements for risk management (the Governance Framework was developed in 2010 and has been revised in accordance with the CIFA/SOLACE Delivering Good Governance in Local Government Framework 2016). In compliance also with Local Government (Wales) Measure 2009 and The Well-being of Future Generations (Wales) Act 2015.
- Assessment of the framework for corporate governance carried out to ensure compliance. Decision by Council whether AGS approved alongside Statement of Accounts.
- AGS shared with accounts, reviewed and updated with Members and Officers providing a wider engagement process.
- Council's Local Code of Corporate Governance demonstrates how it has the necessary corporate governance arrangements in place to perform effectively. The Local Code of Governance is a public statement that sets out the way the Council will meet that commitment.
- Financial implications are a requirement for inclusion in all Cabinet Meeting reports. Financial Regulations and Financial Procedure Rules (Document F Constitution), Contract Procedure Rules (Document G Constitution) are all up to date.
- Accounting practices - Codes of Practice are complied with Prudential Indicators are prepared and reported to Council and monitored throughout the year. Regular budget monitoring takes place throughout the year. IA also reviews controls over income collection and monitoring.

### **Assurance and effective accountability**

- A good working relationship exists with Welsh Government and external regulators, including Audit Wales, Estyn, CIW, Financial Services Authority ('FSA') and Food Standards Agency as key regulators.



- Audit Wales Protocol documented and procedures in place to ensure all 'Management Response Forms' from each Audit Wales report addressed and that Service responses are presented to Leadership Group, Governance and Audit Committee and Audit Wales.
- Regarding monitoring of progress of actions/recommendations, Governance Officer is Audit Wales point of contact for ongoing governance related MRFs/governance matters. Corporate Performance and Improvement Officer is point of contact for performance related MRFs/performance matters. This system is set out in a Protocol, approved by Leadership Group and presented to Governance and Audit Committee, with updated version (to reflect that the Corporate Performance and Improvement Officer is in post) presented to Governance and Audit Committee 9.9.2021 Meeting.
- Monthly meetings are also being held between Performance Officers & Audit Wales and can be arranged with other officers as necessary. Regular dialogue is maintained with representatives from Audit Wales.
- Recommendations from Audit Wales are taken forward in the Corporate Performance Management arrangements.
- All Audit Wales reports presented to Leadership group and Governance and Audit Committee, which monitors implementation of corrective actions required.
- Monitoring of progress of Actions process has been developed.
- Chief Internal Auditor (CMIA) is currently studying to gain an IIA qualification, and has considerable local government experience, and is supported by a team with appropriate knowledge and skills.
- The Audit Manager is undergoing an IIA qualification.
- and two auditors are developing ICT auditing skills.
- IA Officers are undergoing audit qualifications to enhance knowledge, skills and competency.
- A re-structure of IA was implemented in May 2019, and another in November 2020 and April 2022. The service has been fully resourced since 1 June 2022.
- A new CMIA has been in place from 1 January 2022, and has considerable experience in IA, and is supported by a knowledgeable & skilled Audit Manager.
- The role of CMIA has free and unfettered access to the Chair of the Governance & Audit Committee and both meet regularly during the year.
- Robust risk-based forward work programme and business planning is in place.
- Regular reporting to Governance & Audit Committee on the activity of IA is undertaken, i.e. quarterly Internal Audit Progress Reports to Governance & Audit Committee for monitoring progress performance and improvement and summary of work and audit opinion on assurance provided annually in Internal Audit Annual Report at year end. Follow-up reviews undertaken to monitor corrective actions are implemented.
- Internal Audit Charter regularly reviewed and approved by Governance & Audit Committee (last version approved by Audit Committee 19/1/22).
- CMIA provides annual objective opinion on assurance placed on Council's risk management, control and governance processes, based on the individual assurances given to Managers after each audit review, & feeds into the AGS.
- Compliance with PSIAS reported annually to Governance & Audit Committee with resultant improvement plan. Peer review of assessment every five years (latest review completed May 2022 by Anglesey County Council, report and resulting improvement plan were presented to Governance & Audit Committee on the 27 September 2022).

- IA's mission is to enhance & protect organisational value by providing risk-based & objective assurance, advice & insight. This is detailed in the internal Audit Charter, which also states IA's right of access (as per the Council's Financial Regulations/Constitution).
- Partnership and Accountability agreements are established in collaborative projects.

#### **4 Opinion on the level of assurance that the governance arrangements can provide**

The Corporate Manager - Internal Audit (CMIA) prepares an Annual Internal Audit Report at year-end, which is usually presented to the Governance and Audit Committee at its June meeting. The report sets out the individual and collective outcomes of the audit reviews undertaken during the year, and provides the overall audit opinion of assurance based on this audit work. The assurance provided also takes into account progress in implementing improvements, consideration of the risk register and assurances provided in reports issued by external regulators. The scope of audit work and how the need to constantly reprioritise to ensure sufficient work is undertaken for the assurance is detailed in the report.

The Annual Report at year-end contains the results of the internal audit annual self-assessment of the service, based on CIPFA's LG Application Note's template. This was subject to an external peer review in May 2022, and an external assessment is planned to be repeated every five years, as required by the Public Sector Internal Audit Standards (PSIAS). The resultant improvement plans from these assessments are included in the quarterly Progress Reports presented to the Governance and Audit Committee and reviewed annually in the Annual Internal Audit Report.

The Improvement Plans identify improvements made and planned against the recommendations arising from the assessments, along with the results of the service's Quality Assurance Improvement Programme as required by the PSIAS to ensure the Governance and Audit Committee is able to monitor the service's progress.

A Report on the Annual Governance Statement 2022-2023 Progress and Current Year Action Plan was provided to the Governance and Audit Committee on 3 June 2021.

The Quarter 1 Internal Audit Progress Report 1/4/2022-30/6/2022 (presented to the Governance and Audit Committee on 27 September 2022 and subsequent periods expected on 17 January 2023, 9 March 2023 and 21 June 2023) include the actions taken to date to achieve the identified proposed improvements.

The Internal Audit staffing structure has been at full complement during the year 2022-2023.

On 10 March 2022, the CMIA also presented to the Governance and Audit Committee the Internal Audit Strategy and Plan for 2022/23. This is designed to ensure a sufficient area of coverage is undertaken to support the annual opinion on the effectiveness of the systems of governance, risk management and internal control across the Council. The Internal Audit Strategy and Plan for 2022/23 summarised the work areas the Internal Audit Section aimed to concentrate their time on during the year, taking account of the situation due to the pandemic.

The service has been provided on a more reactive basis this year, as with the previous year, due to the various risks introduced from necessary changes in the Council's working practices, such as the issuing of one-off grants, set-up of groups to target specific areas of change, more staff working from home, etc. Internal audit work has been assessed on an on-going basis with regular consideration given to the Council's changing needs and priorities. In addition to this reactive work, assurance for 2022/23 is placed on planned reviews either carried forward or undertaken during the year to assess the annual level of assurance for the Council. All actions taken have been consistent with the guidance note issued by the Internal Audit Standards Advisory Board. In addition, more resources have been dedicated to developing the assurance mapping system to provide additional support to the assurance provided at year-end.

The Council has, for example, had an urgent obligation to award various grants to eligible businesses in the County, and due to potential fraudulent claims, Internal Audit has continued to review a sample of applications prior to payment (easier to stop payments than recover after), adding value to the Council's operations due to changing circumstances, as supported by Internal Audit Standards Advisory Board guidance notes.

The CMIA concluded in her 2021/22 Annual Report presented to the Governance and Audit Committee on 06/06/2022 that the Council has a satisfactory framework of governance, risk management and internal controls in place to manage the achievement of the organisation's objectives during the year, based on:

- the number, scope and assurances from internal and external sources during the year to 31 March 2022, and
- the acceptance of actions by management (where available).

Due to the on-going effect of the pandemic, it should be noted that, as with the previous year, no schools were reviewed during the year. However, certain checks have been undertaken whilst auditing the EIG and PDG grants.

The Annual Governance Statement will be the subject of review by Audit Wales to ensure that it is consistent with their knowledge and with legislation. In addition, the Internal Audit section undertakes an annual independent review of the Annual

Governance Framework and the method of scoring and evidence, as noted in Point 2 above.

The Council's Corporate Lead Officer - Customer Contact acts as the Authority's Senior Information Risk Owner and also has responsibility for Data Protection and ICT Security.

The SIRO Forum traditionally included subject matter experts: E.g. Facilities, Data Protection, IT Security, Head of IT, Legal, HR and some departmental representation. This meets every quarter to discuss information risk and information management issues.

The current key roles and scrutiny of Information Assets are as follows:

- An IT Security Officer ('ITSO') who advises on data security and external advisers and consultants are employed from time to time to test and advise on the Authority's security arrangements;
- An Information and Records Management Officer ('IRMO') advises on legal compliance and ensures that policies and procedures are in place and are being adhered to;
- Corporate Data Protection (known internally as Corporate Data Protection / FOI / EIR Group Meeting) meets quarterly and is chaired by the Head of Service Policy (Deputy HOS ICT&CS); and
- Annual Reports as required to the Council's Governance and Audit Committee.

Additionally:

- ITSO is the Vice-chair of Wales National Public Sector Security Forum (CymruWARP) which meets quarterly.
- IRMO Chairs the Information and Records Management Society Wales/Cymru and arranges events across Wales.
- IRMO is part of the WASPI - Mid and West Wales Quality Assurance Panel.

Following the Governance Framework review, overall governance arrangements are considered to be good on the basis that the majority of scores applied were 9/10.

The introduction of the Local Code for Corporate Governance outlining how the Council is committed to the core principles of the CIPFA/SOLACE delivering Good Governance in Local Government Framework provides guidance to all Members and Officers on the governance agenda.

Regular review of the Local Code of Governance will provide a high level of assurance that the governance arrangements are fit for purpose.

## 5 Issues identified for last year (2022-2023)

The following table records the actions that have been taken during 2022-23 to resolve the issues identified in the Annual Governance Statement for 2021-2022:

Note: Any actions not fully completed by the completion date will be carried forward into the 2023-2024 Action Plan

Issue	Action	Outcome / Progress to Date	Lead Officer	Completion Date
A1.1 Ensuring Members and Officers behave with integrity and lead a culture where acting in the public interest is visibly and consistently demonstrated thereby protecting the reputation of the organisation	<p>MO to continue to advise Members further on the need to declare hospitality/gifts.</p> <p>MO to continue to advise Chief Officers further on the need to declare:</p> <ul style="list-style-type: none"> <li>close personal associations with other Officers or Members, Ongoing review on Chief Officers business declarations</li> </ul> <p>MO and CLO Democratic Services to continue to review Members holding directorships, trusteeships, or memberships when appointed onto outside bodies, and committees, MO to consider member feedback and added</p>	<p>MO advising Members on need to declare hospitality/gifts is ongoing.</p> <p>MO advises members on need to declare close personal associations with other Officers or Members and will continue to do so.</p> <p>Ongoing review on Chief Officers business declarations is still in progress.</p> <p>Review of Members holding directorships, trusteeships, or memberships is ongoing.</p>	EP/LE	March 2023

Issue	Action	Outcome / Progress to Date	Lead Officer	Completion Date
	<p>value and continue to update Code of Conduct for Officers and Members</p> <p>Update Dispensations forms for Members</p> <p>Appraisals were halted due to Covid-19 Pandemic but have now recommenced (undertaken in May 2021 and continue to be held virtually).)</p> <p>Reviewed Code of Conduct for Officers to be issued once updated &amp; approved.</p> <p>Officers to complete a Mandatory Ethics/Fraud e-training module once completed &amp; approved.</p> <p>Planning/Development Management Committee governance actions/documents established, training to be provided and progress to be reviewed during 2022-2023.</p>	<p>MO to consider member feedback and added value.</p> <p>Dispensations form for members has been updated.</p> <p>Appraisals recommenced.</p> <p>Reviewed Code of Conduct for Officers to be issued once approved.</p> <p>Ethics/Fraud e-learning module still awaiting approval.</p> <p>Discussions are currently taking place with Audit Wales to support their Planning Service Follow-Up Review.</p>		



Issue	Action	Outcome / Progress to Date	Lead Officer	Completion Date
		Any recommendations will be responded to.		
A1.2 Ensuring Members take the lead in establishing specific standard operating principles or values for the Organisation and its Staff and that they are communicated and understood. These should build on the Seven Principles of Public Life (the Nolan Principles)	Planning/Development Management Committee governance actions/documents established, training to be provided and progress to be reviewed during 2022-2023.	Discussions are currently taking place with Audit Wales to support their Planning Service Follow-Up Review. Any recommendations will be responded to.	EP/LE	March 2023
A1.3 Leading by example and using these standard operating principles or values as a framework for decision making and other actions	Leadership Group to be updated on e-learning with HR reporting to Leadership Group.	Complete  Code of Conduct Training provided to all Members following the Local Elections 2022.	GE	March 2023 – Complete
A1.4 Demonstrating, communicating and embedding the standard operating principles or values through appropriate	Delegated Decisions Register to be published.	Work on publishing Delegated Decisions Register is still in progress.	EP/ HR	March 2023

Issue	Action	Outcome / Progress to Date	Lead Officer	Completion Date
policies and processes which are reviewed on a regular basis to ensure that they are operating effectively	<p>Continued monitoring of the Mandatory e-learning take up of Whistleblowing module. Currently lower than required.</p> <p>Whistleblowing Policy to be reviewed.</p>	<p>Continued monitoring of completion of mandatory Whistleblowing e-learning module.</p> <p>Whistleblowing policy has been reviewed and is awaiting approval by Overview and Scrutiny Co-ordinating Committee and Cabinet.</p>		
A3.1 Ensuring members and Staff demonstrate a strong commitment to the rule of the law as well as adhering to relevant laws and regulations	Further training to be provided to all Members regarding their responsibilities in relation to Data Protection Principles and privacy notices. Privacy notices for Councillors being developed and to be provided.	<p>Training has been provided to all Members regarding their responsibilities in relation to Data Protection Principles.</p> <p>Privacy notices for Councillors being developed</p>	EP/LE	March 2023

Issue	Action	Outcome / Progress to Date	Lead Officer	Completion Date
		and to be provided by Data Protection Officer.		
B1.1 Ensuring an open culture through demonstrating, documenting and communicating the organisation's commitment to openness	Completion of review of the FOI Publication Scheme, which is in progress.	FOI Policy and EIR Policy both updated. Review of the FOI Publication Scheme is in progress.	LE/AW/MNH	March 2023
B3.1 Establishing a clear policy on the type of issues that the organisation will meaningfully consult with or involve individual citizens, service users and other stakeholders to ensure that service (or other) provision is contributing towards the achievement of intended outcomes	<p>Due to the Covid-19 pandemic, decisions have needed to be made by Gold Command for emergency reasons (under the temporary executive function transfer of power in place until 31.8.2021 and for operational procedures under the Civil Contingencies Act 2004 following that date), therefore it has been impossible to consult physically in the community at present for many services, and consequently the scoring has been amended to reflect this.</p> <p>To continue to progress the review of the Community Engagement Policy that</p>	<p>Gold Command is no longer meeting.</p> <p>A new Engagement and Participation Policy, 'Talking, Listening and Working Together' has been published. Implementation of this policy to be reviewed before action complete.</p>	AW	March 2023

Issue	Action	Outcome / Progress to Date	Lead Officer	Completion Date
	will include provisions for how stakeholders are engaged in future.			
D2.3 Considering and monitoring risks facing each partner when working collaboratively including shared risks	<p>To continue to take into account legislative changes e.g. Local Government and Elections (Wales) Act 2021.</p> <p>To implement legislative changes, such as regarding the Local Government and Elections (Wales) Act 2021 and consider/monitor risks facing each partner when working collaboratively, including shared risks.</p>	<p>Work is ongoing to account for legislative changes.</p> <p>Risks facing each partner when working collaboratively will continue to be considered/monitored.</p>	AW/EP	March 2023
G3.1 Ensuring that recommendations for corrective action made by external audit are acted upon	Monitor progress of actions/recommendations.	Monitoring progress of actions/recommendations is ongoing.	EP/AW	March 2023

## 6 Agreed action plan for matters to be considered during 2023-2024

Following the implementation and review of the CIPFA/SOLACE Delivering good governance in Local Government Framework (2016) the following issues have been identified for resolution during 2023-2024:

Issue	Action	Outcome	Lead Officer	Completion Date
A1.1 Ensuring Members and Officers behave with integrity and lead a culture where acting in the public interest is visibly and consistently demonstrated thereby protecting the reputation of the organisation	<p>MO to continue to advise Members further on the Code of Conduct.</p> <p>MO to continue to advise Chief Officers further on the need to declare:</p> <ul style="list-style-type: none"> <li>close personal associations with other Officers or Members, Ongoing review on Chief Officers business declarations</li> </ul> <p>Review Members holding directorships, trusteeships, or memberships. MO to consider member feedback and added value. Reviewed Code of Conduct for Officers to be issued once approved.</p> <p>Officers to complete a Mandatory Ethics/Fraud e-training module once completed &amp; approved.</p>	Further embedding of behaviour with integrity.	EP/LE	March 2024

Issue	Action	Outcome	Lead Officer	Completion Date
	<p>Planning/Development Management Committee governance actions/documents established, training to be provided and progress to be reviewed during 2022-2023.</p> <p>Discussions are currently taking place with Audit Wales to support their Planning Service Follow-Up Review. Any recommendations will be responded to.</p>			
A1.2 Ensuring Members take the lead in establishing specific standard operating principles or values for the Organisation and its Staff and that they are communicated and understood. These should build on the Seven Principles of Public Life (the Nolan Principles)	<p>Planning/Development Management Committee governance actions/documents established, training to be provided and progress to be reviewed during 2022-2023.</p> <p>Discussions are currently taking place with Audit Wales to support their Planning Service Follow-Up Review. Any recommendations will be responded to.</p>	Further embedment of Standard Operation Principles and values, including their communication.	EP/LE	March 2024
A1.4 Demonstrating, communicating and embedding the standard operating principles	Delegated decision Decisions Register to be published – in progress.	Further embedment of Standard Operating principles and	EP/ HR	March 2024



Issue	Action	Outcome	Lead Officer	Completion Date
or values through appropriate policies and processes which are reviewed on a regular basis to ensure that they are operating effectively	<p>Continued monitoring of completion of mandatory Whistleblowing e-learning module.</p> <p>Whistleblowing policy has been reviewed and is awaiting approval by Overview and Scrutiny Co-ordinating Committee and Cabinet.</p> <p>Revised Officer Code of Conduct and Declaration of Interest forms to be presented to Scrutiny Committee</p> <p>Report on generic whistleblowing activity to be presented to Overview and Scrutiny Co-ordinating Committee.</p>	communication through publication of documents.		
A3.1 Ensuring members and Staff demonstrate a strong commitment to the rule of the law as well as adhering to relevant laws and regulations	Privacy notices for Councillors being developed and to be provided by Data Protection Officer.	Demonstrating strong commitment to rule of law. and adherence to relevant laws and regulations	EP/LE/AM	March 2024
A3.2 Creating the conditions to ensure that the statutory Officers, other key post holders and members are able to fulfil their	CMIA to complete professional qualification	Ensuring key post holders are able to fulfil their responsibilities in accordance	EP/AJ	March 2024

Issue	Action	Outcome	Lead Officer	Completion Date
responsibilities in accordance with legislative and regulatory requirements.		with legislative and regulatory requirements.		
B1.1 Ensuring an open culture through demonstrating, documenting and communicating the organisation's commitment to openness	Review of the FOI Publication Scheme is in progress.	Demonstrating commitment to openness.	LE/AW/MNH	March 2024
B3.1 Establishing a clear policy on the type of issues that the organisation will meaningfully consult with or involve individual citizens, service users and other stakeholders to ensure that service (or other) provision is contributing towards the achievement of intended outcomes	A new Engagement and Participation Policy, 'Talking, Listening and Working Together' has been published. Implementation of this policy to be considered before action complete.	Improving Community Engagement.	AW	March 2024
D2.3 Considering and monitoring risks facing each partner when working collaboratively including shared risks	To continue to take into account legislative changes e.g. Local Government and Elections (Wales) Act 2021.	Risk management and compliance with legislation to demonstrate commitment to rule of law.	AW/EP	March 2024

Issue	Action	Outcome	Lead Officer	Completion Date
	To implement legislative changes, such as regarding the Local Government and Elections (Wales) Act 2021 and consider/monitor risks facing each partner when working collaboratively, including shared risks.			
E2.2 Publishing a statement that specifies the types of decisions that are delegated and those reserved for the collective decision making of the governing body	Delegated Decision Register to be published.	Further clarity on which decisions are delegated through communication by way of publication.	EP	March 2024
G3.1 Ensuring that recommendations for corrective action made by external audit are acted upon	Monitor progress of actions/recommendations – ongoing action.	Assurances and managing risk.	EP/AW	March 2024

## **7 Conclusion**

The annual governance framework review measured progress against the new CIPFA/SOLACE Delivering Good Governance Framework (2016) and overall governance arrangements were found to be acceptable or good. The review confirmed that the Council's governance arrangements are effective and fit for purpose.

The Council has made good progress during the year with recorded achievements against each of the seven core principles.

The development of a Local Code of Corporate Governance bringing together all the local codes and documents together in one document provides assurance that there are clear governance arrangements in place.

The Council has identified a number of minor issues for resolution during 2023/24 and has set these out in an action plan for completion (as above). The actions taken as a direct result of the pandemic will be recorded, as appropriate.

## **8 Certification of Annual Governance Statement**

We propose over the coming year to take steps to address the above matters to further enhance our governance arrangements. We are satisfied that these steps will address the need for improvements that were identified in our review of effectiveness throughout the 2023/24 year and will monitor their implementation and operation as part of our next annual review. It is acknowledged that the pandemic may hinder some of these steps, which will be addressed and reported accordingly to Council in the 2023/24 AGS.