# **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.

haviours	Evidence	Expected	///		1
		'		core	Action
uncan Hall / Alex Jenkins the Council's website, intranet site (CeriNet) under Councillor Resources, and in the Constitution.	the Council's website, intranet site (CeriNet) under Councillor Resources, and in the Constitution.  • Members Code of Conduct Flowchart (updated in 2016).	Codes of Conduct	7/	/8	Acceptable - Minor adjustments may be required.  MO to continue to advise
ing in the public interest is ibly and consistently monstrated thereby tecting the reputation of	<ul> <li>awaiting approval) available along with all Corporate policies and strategies via Council website/<u>CeriNet</u>.</li> <li>Mandatory Induction and follow-up training on Code of Conduct</li> </ul>	Individual Sign-off with regard to compliance with the code	<b>✓</b>	l C	Members further on the Code of Conduct.  MO to continue to advise Chief Officers further on the
organisation	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.	Induction for new Members and Staff on standard of behaviour expected	<b>✓</b>		need to declare: <ul> <li>close personal</li> <li>associations with</li> <li>other Officers or</li> </ul>
Lea Tra Co La	Training supported by recent review of Council's Strategy on Counter-Fraud, Corruption & Bribery (to include Anti-Money Laundering).  • Follow up Internal Audit of Council's arrangements regarding	Performance appraisals otherwise known as Personal Development Reviews	<b>✓</b>		Members, Ongoing review on Chief Officers business declarations
	<ul> <li>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>Disciplinary Policy (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>Declaration of Interest and Hospitality 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 and Members 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> <li>Declaration of interest process to be extended to include requirement regarding related-parties: that officers and</li> </ul>				Review Members holding directorships, trusteeships, or memberships MO to consider member feedback and added value.  Dispensations forms for Members updated  Appraisals recommenced  Reviewed Code of Conduct for Officers to be issued once approved.  Officers to complete a Mandatory Ethics/Fraud etraining module once completed & approved.
ic d ir ib n	1 Ensuring Members and cers behave with integrity lead a culture where ng in the public interest is ply and consistently nonstrated thereby ecting the reputation of	Resources, and in the Constitution.  Members Code of Conduct Flowchart (updated in 2016).  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 prepared scenarios for training. 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Specific declaration/ return required if this includes/does not include 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.  Update advice on Council Employees' Declarations and Registration of Interests news email updates published.  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 3rd March 2022, 28th June 2022 and 5th 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.  Chief Officers informed through CeriNet system news update of MO email re declaring interests and Hospitality and reminder to Chief Officers sent.  Review is currently being undertaken of the external bodies that have appointed Members, including added value, and also 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. Also to seek amendment of Articles of Association or resigna	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
an opportunity to make reference to any close personal	

This now includes lay/independent members of the Ethics & Standards Committee and Governance & Audit Committee. Register of Interests booklet published for each Member on Council Website. Proactive regular advice and reminders sent to Members and Officers as required. MO to advise Officers further on the need to declare interests in organisations which actually, or may conflict with Council interests including: Contractors; School Governors; Clerk to Town and Community councils; o Members of Town and Community councils; and School Governors. • MO to advise Officers further on the need to declare: o Directorships; and Other employment Including whether conflicting with the Council's interests or Dispensations forms for Members updated (2022). • Professional Qualified Officers and Teachers have to meet their professional body/organisation requirements. • Members complete a HR training module. • Training on standards of behaviour is provided to Managers for Staff. • MO circulates to political group leaders updates/decisions from the Adjudication Panel for Wales • 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

• The Operational Procedures document for the Development

• The Scheme of Delegations contains criteria for applications, which must be referred to the Development Management

Management Committee has been revised.

been revised.

	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.				
Elin Prysor A1.2 Ensuring Members take the lead in establishing specific standard operating principles or values for the Organisation and its Staff and	<ul> <li>A good working relationship exists with all key regulators.</li> <li>The Corporate Strategy 2022-2027 includes Corporate Wellbeing Objectives 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</li> </ul>	Standards reflect WG Public Service Values	<b>~</b>	7/8	Acceptable - Minor adjustments may be required.  Planning/Development Management Committee governance actions/documents established, training to be provided and progress to be reviewed during 2022-2023.  Audit Wales Planning Service Follow-Up Review ongoing. Any recommendations will be responded to
that they are communicated and understood. These should build on the Seven Principles of Public Life (the Nolan Principles)	<ul> <li>Report 2021-22 on 15.12.22.</li> <li>Code of Conduct for Members (2016).</li> <li>Register of Members' interests available from the Council's Democratic Services 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> <li>A Protocol for Good Practice for Councillors at Development Management Committee has been produced and included in the Constitution.</li> </ul>	Communicating shared values with Members, Staff, the community and partners	<b>✓</b>		
Elin Prysor / Lowri Edwards A1.3 Leading by example and using these standard	<ul> <li>Minutes for all committees contain Declarations of Interest-Officers and Members.</li> <li>The Constitution is subject to regular reviews, with ongoing</li> </ul>	Leadership values set out by WG are followed	✓	9/10	Good - Overall governance considered compliant and meets best practice. No
operating principles or values as a framework for decision	updates as required, including presenting proposed changes	Decision making	✓		further action required.
making and other actions	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	practices Declarations of interest made at meetings	<b>√</b>		
	need. Council approved amendments on 3.3.22, 8.7.22 and 20.10.22	Conduct at meetings	✓		
	<ul> <li>A comparison exercise was undertaken of the Current Constitution against the Model Constitution issued by WLGA,</li> </ul>	Shared values guide decision making	<b>✓</b>		
	with changes made where necessary to ensure the Council's constitution remains up to date.	Develop and maintain an	<b>√</b>		
	<ul> <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> </ul>	effective standards committee			
	<ul> <li>Task and Finish Group (T&amp;F group) to develop actions that will improve the Planning Service including decision making.</li> </ul>				

•	The Terms of Reference of the Development Management
	Committee have been revised to clearly state its purpose, role
	and responsibilities, and how it links to Corporate Priorities.
•	An Operational Procedures document for the Development
	Management Committee has been revised.
•	A Protocol for Good Practice for Councillors at Development
	Management Committee has been produced and included in the Constitution.
	Development Management Committee Scheme of
	Delegations has been revised to allow it to better focus on
	more strategically important and major applications.
•	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 'cooling-off' 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.
•	Chief Officer annual Declarations of Interest.
	Corporate Strategy (2022-2027) contains the priorities of the
	Council.
•	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. 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.
•	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.
•	Code of Conduct Training provided to all Members following the Local Elections 2022.
•	Committee and Members are advised by the MO & Standards Officer.
	Ethics and Standards Committee engage actively in the
	training of Members.
	Standards Conference 2018 jointly hosted by Powys &
	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.

	•	Annual Ethics & Standards Committee Report reported to Council in October 2022.				
	•	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.				
	•	IA review and report on the process annually. Governance & 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.				
	•	Governance and Audit Committee Annual Report reported to Council on 23.9.2021 and approved.				
	•	Covid-19 Governance Structure 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.  Record of Decisions, made by the Covid-19 Leadership Group				
		('Gold Command') published on the Council's Website.				
Elin Prysor/Alun Williams A1.4 Demonstrating, communicating and embedding the standard	•	Effective 'Strategy to Counter Fraud, Corruption and Bribery (to include Anti-Money Laundering)' updated and approved by Council 17.6.21(minutes confirmed 23.9.21).	Anti-fraud and corruption policies are working effectively	✓	9/10	Good - Overall governance considered compliant and meets best practice. No further action required
operating principles or values through appropriate policies	•	Internal Audit Annual Report on Counter Fraud presented to Governance and Audit Committee at year-end. Last report presented 6.6.22.	Up-to-date register of interests	<b>✓</b>	-	Delegated Decisions
and processes which are reviewed on a regular basis to		Register of Members' interests available from the Council's Democratic Services.	(Members and Staff) Up-to-date register if	✓	_	Register to be published.
ensure that they are operating	•	Declarations of interest/hospitality for Officers, as required.	gifts and hospitality		-	Continued monitoring of the
effectively		MO circulates reminder re interest/hospitality declarations to Staff quarterly.	Whistleblowing policies are in place	<b>✓</b>		Mandatory e-learning take up of Whistleblowing
	•	NFI match highlights Staff who are directors of companies that have dealings with the Council – any non-declarations	and protect individuals raising			module.  Whistleblowing Policy has
	•	investigated by IA and reported to MO.  Chief Officer Declarations of interest updated annually.  Politically Restricted Post Register for Officers maintained and Political Restrictions on Local Government Employees Policy	Whistleblowing policy has been made available to	✓	_	been reviewed and updated - to be presented to Overview and Scrutiny
		available to employees on CeriNet. Register of Politically Restricted Posts published on Council website. Ethics/Fraud training provided 2021forming a basis for e-	members of the public, employees, partners and			Committee and Cabinet for approval. Revised Officer Code of
		learning module for all Staff, and IA & Governance Services	contractors			Conduct and Declaration of
		working with Learning & Development to prepare scenarios for training.	Complaints policy and examples of	<b>✓</b>		Interest forms to be presented to Scrutiny Committee
	•	Training supported by recent review of Council's Strategy on Counter-Fraud, Corruption & Bribery (to include Anti-Money Laundering).	responding to complaints about behaviour			Report on generic
		Lauria offing j.	Changes/improvem ents , as a result of	✓	-	whistleblowing activity to be presented to Overview and

of Council's arrangements regarding Ethics also in progress (currently in review).  • Whistleblowing Policy available to Employees and Contractors (updated 2018 – awaiting approval) on CeriNet and is updated as necessary.  • MO is the Corporate Lead Officer ('CLO'), and advises Whistle-blowers, as appropriate.  • A mandatory E-learning training module on Whistleblowing must be completed by all Staff. The MO keeps a register of interests were	✓ ✓	Committee.
<ul> <li>Whistleblowing Policy available to Employees and Contractors (updated 2018 – awaiting approval) 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</li> </ul> Officers code of conduct refers to a requirement to declare interests Minutes show declarations of		
(updated 2018 – awaiting approval) on CeriNet and is updated as necessary.  • MO is the Corporate Lead Officer ('CLO'), and advises Whistle-blowers, as appropriate.  • A mandatory E-learning training module on Whistleblowing  conduct refers to a requirement to declare interests  Minutes show declarations of		
as necessary.  • MO is the Corporate Lead Officer ('CLO'), and advises Whistle-blowers, as appropriate.  • A mandatory E-learning training module on Whistleblowing  requirement to declare interests  Minutes show declarations of		
<ul> <li>MO is the Corporate Lead Officer ('CLO'), and advises         <ul> <li>Whistle-blowers, as appropriate.</li> <li>A mandatory E-learning training module on Whistleblowing</li> <li>declare interests</li> <li>Minutes show declarations of</li> </ul> </li> </ul>	✓	
Whistle-blowers, as appropriate.  • A mandatory E-learning training module on Whistleblowing  Minutes show declarations of	✓	
A mandatory E-learning training module on Whistleblowing declarations of	✓	
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must be completed by all Ctaff The MO keeps a register of interests were		
must be completed by all Staff. The MO keeps a register of interests were		
referrals and reports 6-monthly to the Overview and Scrutiny sought and		
Co-ordinating Committee. appropriate		
All complaints are dealt with in accordance with the corporate declarations made		
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.		
Revised <u>Corporate Concerns and Complaints Policy</u> published		
1.10.2021.		
Improvements are implemented as a result of complaints		
/recommendations received.		
Council Complaints and Freedom of Information Privacy		
Notice.		
Annual Complaints Report considered by the Governance and		
Audit Committee and Cabinet prior to approval by Council,		
presented to Council and noted.		
Annual Complaints Report includes Lessons Learned from		
complaints received.		
Ethics and Standards Committee and all other committee		
agendas/minutes contain disclosures of interests.		
Minutes for all committees published on the Council's Website.		
<u>Cabinet Decision Notices</u> published on the Council's Website.		
Preparation for publication of delegated decisions register		
ongoing. Development Management Committee delegated		
decisions published for each Development Management		
Committee.		
Register of Contracts published on Council Website.  Necessary changes to Constitution regarding Covernance and		
Necessary changes to Constitution regarding Governance and  Audit Constitution and 2004 And appropriate the C		
Audit Committee per 2021 Act approved by Council 23.9.21,		
3.3.22, 8.7.22 and 20.10.22.		
The Terms of Reference of the Development Management		
Committee have been revised.		
The Operational Procedures document for the Development		
Management Committee/Development Management		
Committee has been revised.		
A Protocol for Good Practice for Councillors at Development		
Management Committee has been produced and included in		
the Constitution.		

		<ul> <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> </ul>				
A2 Demonstrating strong commitment	Elin Prysor A2.1 Seeking to establish,	Ethics and Standards Committee championing ethical compliance to ensure that public have trust and confidence	Scrutiny of ethical decision making	<b>✓</b>	9/10	Good - Overall governance considered compliant and
to ethical values	monitor and maintain the organisation's ethical standards and performance	that Members and Officers work to highest ethical and moral standards.	Championing ethical compliance at governing body level	<b>√</b>		meets best practice. No further action required.
Elii A2 bel and all org	Elin Prysor A2.2 Underpinning personal behaviour with ethical values and ensuring they permeate all aspects of the organisation's culture and operation	<ul> <li>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.</li> <li>Officers such as Internal Auditors, sign an annual Code of Ethics affirmation.</li> <li>Internal Audit Charter approved by Governance &amp; Audit Committee 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> <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>	Provision of ethical awareness training	✓	9/10	Good - Overall governance considered compliant and meets best practice. No further action required. All actions have commenced and are on-going
	Geraint Edwards A2.3 Developing and maintaining robust policies and procedures which place	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</u> <u>Employees.</u>	Appraisal processes take account of values and ethical behaviour	<b>√</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
	emphasis on agreed ethical values	Training on equality and diversity and recruitment and selection including equal opportunities is mandatory for all	Staff appointments policy	<b>√</b>		ratifier action required.
providers of some behalf of the required to a		<ul> <li>Ceredigion County Council Managers.</li> <li>All Staff must complete an e-learning module on Equality &amp; Diversity.</li> <li>Procurement Strategy 2018-2022 was approved by Council</li> </ul>	Procurement policy	<b>√</b>		
		<ul> <li>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>				
	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	<ul> <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> </ul>	Agreed Values in partnership working -Statement of business ethics communicates commitment to	<b>✓</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.

		contractors of the Council), Anti-Slavery Annual Statement 2019-2020 and Code of Practice Ethical Employment in Supply Chains.	-Ethical values feature in contracts with external service providers Protocols for partnership working	<b>✓</b>		
rule of law	Elin Prysor/Arwyn Morris A3.1 Ensuring members and Staff demonstrate a strong commitment to the rule of the law as well as adhering to	<ul> <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 for all Members on Introduction for Council, including GDPR) following the May 2022 Elections.</li> </ul>	Statutory provisions  Statutory guidance is followed	✓ ✓	7/8	Acceptable - Minor adjustments may be required.  Training provided to all
	relevant laws and regulations	<ul> <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> <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>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>	Constitution			Members regarding their responsibilities in relation to Data Protection Principles .  Privacy notices for Councillors being developed to be provided by Data Protection Officer
	Elin Prysor / Duncan Hall / Alex Jenkins 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.	<ul> <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</li> </ul>	Job descriptions/specific ations Compliance with CIPF's statement on the role of the Chief Financial Officer in local government (CIPFA 2016) Terms of reference	✓ ✓	9/10	Good - Overall governance considered compliant and meets best practice.  CMIA to complete professional qualification

					1	
		accompanying Putting Principles into Practice document (2019)).	Committee support	<b>V</b>		
		Terms of reference are included in the Constitution.				
		Reporting to Governance and <u>Audit Committee</u> .				
		Financial Regulations and Financial Procedure Rules				
		(Document F Constitution).				
		Contract Procedure Rules (Document G in the Council's Constitution).				
		Codes of Conduct (see above).				
		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.      Correspond Management Internal Audit (CMIA') has feen 8.				
		<ul> <li>Corporate Manager – Internal Audit ('CMIA') has free &amp; unfettered access to Members and Officers at all levels, and</li> </ul>				
		right of access as per Council's Constitution and Internal Audit				
		Charter.				
		Register of Members' Interests published on the Council				
		Website.				
		• .				
Elin Prysor / Duncan Ha		Chief Officers provide support and advice to Members.	Record of legal	<b>✓</b>	9/10	Good - Overall governance
A3.3 Striving to optimise use of the full powers	tne	Reporting requires financial and legal advice/implications to be	advice provided by Officers			considered compliant and meets best practice. No
available for the benefit	of	included in reports/decisions which are published as appropriate.	Officers			further action required.
citizens, communities ar		арргорпасо.				Tarurer deuerr required.
other stakeholders						
Elin Prysor		The MO has direct access to the CE and reports to Council	MO provisions &	✓	9/10	Good - Overall governance
A3.4 Dealing with breac	hes of	generally and as part of statutory duty.	151 Officer			considered compliant and
legal and regulatory		The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends all Cabinet  The MO or a nominated representative attends and the cabinet attends attend	provisions			meets best practice. No
provisions effectively		meetings and Council Meetings. The MO operates an 'open' door policy for Members wishing to receive 'conduct' and				further action required.
		'governance' advice.	Record of legal	✓		
		The MO & S.151 Officer have monthly meetings with the CE.	advice provided by			
		The MO & S.151 Officer are key members of Leadership	Officers			
		Group.				
		Items reported to Members for decisions through Cabinet,	Statutory provisions	<b>√</b>	+	
		Council and Committees are subject to legal and financial				
		advice which will be referenced within each report.				
		Statutory powers and legal implications included in every decision making Cabinet report.				
		<ul><li>decision making Cabinet report.</li><li>Legal and Financial advice/implications is provided on all</li></ul>				
		appropriate reports for decision.				
		<ul> <li>The MO and Legal Service are available to advise in advance</li> </ul>				
		and at meetings.				
		· · ·	1	1	1	1

Elin Prysor / Alex Jenkins A3.5 Ensuring corruption and misuse of power are dealt with effectively	<ul> <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> </ul>	Effective Counter- fraud and corruption policies and procedures	<b>√</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
	<ul> <li>Effective External Audit, Internal investigations.</li> <li>Whistleblowing Policy (in process of review) and Disciplinary</li> </ul>	Local test of assurance (where	<b>✓</b>		•
	<ul> <li>Policy.</li> <li>An Officer in the IA team is an accredited Counter Fraud Technician, a second officer is now also undertaking the</li> </ul>	appropriate)			
	qualification.  • An Officer in the IA team holds a CIPFA Certificate in				
	<ul> <li>Investigative Practices ('CCIP').</li> <li>Council complies with Audit Wales's annual National Fraud Initiative requirements, currently co-ordinated by Internal Audit.</li> </ul>				
	<ul> <li>IA annual report on Counter Fraud presented to Governance and Audit Committee at year-end (last presented 6.6.22).</li> </ul>				
	<ul> <li>Monitoring and response to fraud alerts (NAFN, wider networks, peers, etc).</li> </ul>				
	<ul> <li>Membership and active participation in professional networks and groups (Tisonline, KHub, etc).</li> </ul>				
	<ul> <li>IA offer advice to services on implementation of new systems and processes to ensure effective internal controls maintained.</li> </ul>				
	<ul> <li>Nominated Council Officers undertake various fraud training to maintain knowledge and expertise.</li> </ul>				
	<ul> <li>Where appropriate, successful prosecutions publicised on Council website (and in local press).</li> </ul>				
	<ul> <li>Covid-19 grant payments audited prior to payment (as easier to stop a payment than recover it).</li> </ul>				
	Key financial control audits added to audit plan, to check controls, governance & risks whilst staff working from home.  All a provide audit plans are address are provided and the control of the plans are address.				
	<ul> <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>	s			

		herefore should ensure openness in their activities. Clear, tru		unication a	and consul	tation should be used to
		ndividual citizens and service users, as well as institutional st		/N/		A 1:
Sub-principles	Behaviours	Evidence	Expected	√/X	Score	Action
B1 Openness	Alun Williams B1.1 Ensuring an open culture through demonstrating, documenting and communicating	<ul> <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</li> </ul>	Annual Report FOI publication scheme	<b>✓</b>	7/8	Acceptable - Minor adjustments may be required
	the organisation's commitment to openness	<ul> <li>council tax self-service and information.</li> <li>The Council's goals and values are set out in the</li> </ul>	Online Council Tax information	<b>√</b>		FOI policy and EIR policy both updated. Review of the FOI Publication Scheme is
		<ul> <li>Corporate Strategy 2022-2027.</li> <li>Ceredigion County Council Website.</li> <li>Council and Cabinet meetings are broadcasted.</li> </ul>	Authorities Goals & Values	<b>V</b>		in progress.
		<ul> <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>Freedom of Information Policy (March 2018).</li> <li>Corporate Complaints and Freedom of Information Manager in post.</li> <li>Complaints and Freedom of Information Privacy Notice.</li> </ul>	Authority website	<b>✓</b>		
	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> <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 Public Engagement Protocol (2018) (Document N Constitution)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 Constitution).</li> <li>Protocol for access by Cabinet Members to Overview and Scrutiny Committee approved by Council (Part 5 Document M2 Constitution).</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 - 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	developed and are being implemented.	Decision making protocols Report pro-forma	✓ ✓	9/10	considered compliant and meets best practice. No
	public records and explanations to stakeholders and being explicit		✓	further action required.		

about the criteria, rationale and considerations used. In due course, ensuring that the impact and consequences of those decisions are clear	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.  • Where appropriate, items reported for decisions through	in reaching decisions  Meeting reports show details of advice given  Discussion between	✓ ✓	_	
	<ul> <li>and financial advice which will be referenced within each report.</li> <li>A Protocol is in place for working relationships between mer</li> </ul>	members and Officers on the information needs of members to support decision making			
	<ul> <li>(The Constitution Part 5).</li> <li>The Protocol of Good Practice has been created in order to support Members of the Development Management Committee in ensuring that determination</li> </ul>	Agreement on the information that will be provided and timescales	<b>√</b>		
	<ul> <li>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> </ul>	Calendar of dates for submitting, publishing and distributing timely reports adhered to.	<b>✓</b>		
	<ul> <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,</li> </ul>				
	Equalities, Welsh Language and the use of the IIAs.			ļ	
Alun Williams B1.4 Using formal and informal consultation and engagement to	The Engagement and Consultation Checklist assists     with decision making around whether or not to     undertake a consultation regarding a proposed change	Well-being strategy (PSB) and statement (LA)	<b>✓</b>	7/8	Acceptable - Minor adjustments may be required
determine the most appropriate and effective interventions/	and guidance on dissemination of consultation results is available to Officers.	Use of consultation feedback	<b>✓</b>		Engagement and
courses of action	<ul> <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</li> </ul>	usions reported to Council, Cabinet and and Scrutiny. 8 IIAs went to Cabinet from 22 to 07.12.2022 (2022-23 part year).  acil, in collaboration with partners, has carried	<b>√</b>		Participation Policy completed 2022
	<ul> <li>Service Board's ('PSB') Well-being Assessment and Local Well-being Plan.</li> <li>Well-being objectives for 2022-23 have been set in order to deliver the Corporate Strategy 2022-2027.</li> <li>Corporate Complaints Policy 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</li> </ul>	Citizen survey	х		

			Procedures 2021 its implementation and publication				
			<u>Procedures 2021, its implementation and publication</u> approved by Council.				
			<del></del>				
		•	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.				
		•	Further consultation includes:				
			A new Engagement and Equalities post has				
			been created through the restructure of the				
			Policy and Performance service; and				
			<ul> <li>All <u>current consultations</u> are available on the Council website; and</li> </ul>				
			Consultations 2020-2021.				
		•	Consultations are published on Corporate section of Council Website.				
		•	Due to Covid-19, Council has consulted remotely via video conferences and electronic surveys.				
			· · · · · · · · · · · · · · · · · · ·				
			<u>Consultations</u> 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.				
			•		,		
R2 Engaging	Alun Williams / Diana Davies		PSB Terms of Reference available on the Council	Communication and	✓	9/10	Good - Overall governance
B2 Engaging comprehensively	Alun Williams / Diana Davies B2.1 Effectively engaging with	•	PSB Terms of Reference available on the Council Website.	Communication and engagement	<b>✓</b>	9/10	Good - Overall governance considered compliant and
comprehensively	Alun Williams / Diana Davies B2.1 Effectively engaging with institutional stakeholders to ensure	•	Website.	Communication and engagement strategy	<b>V</b>	9/10	Good - Overall governance considered compliant and meets best practice. No
	B2.1 Effectively engaging with	•	Website. PSB Project Groups Terms of Reference available	engagement	<b>✓</b>	9/10	considered compliant and
comprehensively with institutional	B2.1 Effectively engaging with institutional stakeholders to ensure	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held	engagement	<b>✓</b>	9/10	considered compliant and meets best practice. No
comprehensively with institutional	B2.1 Effectively engaging with institutional stakeholders to ensure that the purpose, objectives and intended outcomes for each stakeholder relationship are clear	•	Website. PSB Project Groups Terms of Reference available	engagement	<b>✓</b>	9/10	considered compliant and meets best practice. No
comprehensively with institutional	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	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All <u>current consultations</u> are available on the Council Website.	engagement	<b>✓</b>	9/10	considered compliant and meets best practice. No
comprehensively with institutional	B2.1 Effectively engaging with institutional stakeholders to ensure that the purpose, objectives and intended outcomes for each stakeholder relationship are clear	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All <u>current consultations</u> are available on the Council Website. Collaborative projects are running with institutional	engagement	<b>✓</b>	9/10	considered compliant and meets best practice. No
comprehensively with institutional	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	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All <u>current consultations</u> are available on the Council Website.	engagement	<b>✓</b>	9/10	considered compliant and meets best practice. No
comprehensively with institutional	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	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All <u>current consultations</u> are available on the Council Website. Collaborative projects are running with institutional stakeholders with clear governance arrangements in	engagement	<b>✓</b>	9/10	considered compliant and meets best practice. No
comprehensively with institutional	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	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All <u>current consultations</u> are available on the Council Website. Collaborative projects are running with institutional stakeholders with clear governance arrangements in place.	engagement		9/10	considered compliant and meets best practice. No
comprehensively with institutional	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	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All <u>current consultations</u> are available on the Council Website. Collaborative projects are running with institutional stakeholders with clear governance arrangements in place. Scrutiny arrangements for the PSB have been put in	engagement		9/10	considered compliant and meets best practice. No
comprehensively with institutional	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	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All <u>current consultations</u> are available on the Council Website. Collaborative projects are running with institutional stakeholders with clear governance arrangements in place. Scrutiny arrangements for the PSB have been put in place.	engagement		9/10	considered compliant and meets best practice. No
comprehensively with institutional	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	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All <u>current consultations</u> are available on the Council Website. Collaborative projects are running with institutional stakeholders with clear governance arrangements in place. Scrutiny arrangements for the PSB have been put in place. The <u>IIA tool and guidance</u> have been approved for	engagement		9/10	considered compliant and meets best practice. No
comprehensively with institutional	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	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All current consultations are available on the Council Website. Collaborative projects are running with institutional stakeholders with clear governance arrangements in place. Scrutiny arrangements for the PSB have been put in place. The IIA tool and guidance have been approved for implementation. Consultation Decision Tool (Consultation Decision Tree and flowchart have been developed and are available.	engagement strategy			considered compliant and meets best practice. No further action required.
comprehensively with institutional	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	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All current consultations are available on the Council Website. Collaborative projects are running with institutional stakeholders with clear governance arrangements in place. Scrutiny arrangements for the PSB have been put in place. The IIA tool and guidance have been approved for implementation. Consultation Decision Tool (Consultation Decision Tree and flowchart have been developed and are available. Engagement with Service Users List including	engagement strategy  Database of	✓ ·	9/10	considered compliant and meets best practice. No further action required.  Good - Overall governance
comprehensively with institutional	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  Diana Davies B2.2 Developing formal and	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All <u>current consultations</u> are available on the Council Website. Collaborative projects are running with institutional stakeholders with clear governance arrangements in place. Scrutiny arrangements for the PSB have been put in place. The <u>IIA tool and guidance</u> have been approved for implementation. Consultation Decision Tool (Consultation Decision Tree and flowchart have been developed and are available. <u>Engagement with Service Users List</u> including stakeholders with whom the authority should engage is	engagement strategy  Database of stakeholders with	✓ ✓		considered compliant and meets best practice. No further action required.  Good - Overall governance considered compliant and
comprehensively with institutional	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  Diana Davies B2.2 Developing formal and informal partnerships to allow for	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All current consultations are available on the Council Website. Collaborative projects are running with institutional stakeholders with clear governance arrangements in place. Scrutiny arrangements for the PSB have been put in place. The IIA tool and guidance have been approved for implementation. Consultation Decision Tool (Consultation Decision Tree and flowchart have been developed and are available. Engagement with Service Users List including stakeholders with whom the authority should engage is in place and Engagement and Participation Policy.	engagement strategy  Database of stakeholders with whom the authority	✓		Good - Overall governance considered compliant and meets best practice. No further action required.
comprehensively with institutional	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  Diana Davies B2.2 Developing formal and informal partnerships to allow for resources to be used more	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All current consultations are available on the Council Website. Collaborative projects are running with institutional stakeholders with clear governance arrangements in place. Scrutiny arrangements for the PSB have been put in place. The IIA tool and guidance have been approved for implementation. Consultation Decision Tool (Consultation Decision Tree and flowchart have been developed and are available. 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	Database of stakeholders with whom the authority should engage and	✓		considered compliant and meets best practice. No further action required.  Good - Overall governance considered compliant and
comprehensively with institutional	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  Diana Davies B2.2 Developing formal and informal partnerships to allow for resources to be used more efficiently and outcomes achieved	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All current consultations are available on the Council Website. Collaborative projects are running with institutional stakeholders with clear governance arrangements in place. Scrutiny arrangements for the PSB have been put in place. The IIA tool and guidance have been approved for implementation. Consultation Decision Tool (Consultation Decision Tree and flowchart have been developed and are available. 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.	Database of stakeholders with whom the authority should engage and for what purpose	✓		Good - Overall governance considered compliant and meets best practice. No further action required.
comprehensively with institutional	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  Diana Davies B2.2 Developing formal and informal partnerships to allow for resources to be used more	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All current consultations are available on the Council Website. Collaborative projects are running with institutional stakeholders with clear governance arrangements in place. Scrutiny arrangements for the PSB have been put in place. The IIA tool and guidance have been approved for implementation. Consultation Decision Tool (Consultation Decision Tree and flowchart have been developed and are available. 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:	Database of stakeholders with whom the authority should engage and for what purpose and a record of an	✓ ·		Good - Overall governance considered compliant and meets best practice. No further action required.
comprehensively with institutional	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  Diana Davies B2.2 Developing formal and informal partnerships to allow for resources to be used more efficiently and outcomes achieved	•	Website.  PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All current consultations are available on the Council Website.  Collaborative projects are running with institutional stakeholders with clear governance arrangements in place.  Scrutiny arrangements for the PSB have been put in place.  The IIA tool and guidance have been approved for implementation.  Consultation Decision Tool (Consultation Decision Tree and flowchart have been developed and are available.  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;	Database of stakeholders with whom the authority should engage and for what purpose and a record of an assessment of the	✓		Good - Overall governance considered compliant and meets best practice. No further action required.
comprehensively with institutional	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  Diana Davies B2.2 Developing formal and informal partnerships to allow for resources to be used more efficiently and outcomes achieved	•	Website. PSB Project Groups Terms of Reference available Joint engagement and consultation exercises are held All current consultations are available on the Council Website. Collaborative projects are running with institutional stakeholders with clear governance arrangements in place. Scrutiny arrangements for the PSB have been put in place. The IIA tool and guidance have been approved for implementation. Consultation Decision Tool (Consultation Decision Tree and flowchart have been developed and are available. 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:	Database of stakeholders with whom the authority should engage and for what purpose and a record of an	✓		Good - Overall governance considered compliant and meets best practice. No further action required.

		o <b>M</b> i	id and West Wales Safeguarding Board; and				
		o Gi The form PSB has structure partnersh A review	rowing Mid Wales. al review of partnerships that sit under the been completed. The new partnership has been operational since June 2018 and the nips will be reviewed on a periodic basis. of the Community Safety Partnership was en in 2019 and was subject to scrutiny.				
	Alun Williams / Diana Davies B2.3 Ensuring that partnerships are based on:  • trust  • a shared commitment to change • a culture that promotes and accepts challenge among	Advice proutside be Regular rocabinet. Partnershestablishe	ovided to Members and Officers serving on	Well-being strategy	✓	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
	<ul> <li>partners and</li> <li>that the added value of partnership working is explicit</li> </ul>	Leadersh Scrutiny a Partnersh appropria Legal Tea reviewing Agreeme A suite of to strateg considerii guidance varying si Executive Growing	ip Group and Cabinet.  arrangements in place for the PSB.  nip metrics are subject to internal review, where	Partnership protocols	<b>✓</b>		
stakeholders effectively, including individual citizens and service users	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	Consultate Members The Enga Engagem The newly Policy our method of will use so ensure the the most commitme consider matter of discussio paper cop and Well-	tion Decision Tree and flowchart for Staff and have been developed.  agement and Consultation Checklist tent and Participation Policy 2022  by adopted Engagement and Participation thines our approach of applying the best of engagement according to the situation. We everal different methods of engagement to at we engage with all people in Ceredigion in suitable manner. Included in this is a that our engagement exercises must how to engage with non-digital users as a priority. Examples of this are in-person ns, telephone discussions and provision of the piece of relevant documents at Council Libraries being Centres.  Linity Engagement, Consultations and	Record of public consultations  Partnership framework  Public Service Boards Terms of Reference	✓ ✓	7/8	Acceptable Minor adjustments may be required  A new Engagement and Participation Policy, 'Talking, Listening and Working Together' has been published. Implementation of this policy to be considered before action complete.
			nity Engagement, Consultations and hips Page has been created on CeriNet, which				

	<ul> <li>includes links to Engagement and Participation Policy, Engagement and Consultation Checklist, Engagement with Service Users and Consultation Decision Making Tool.</li> <li>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.</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>Public Engagement Tool Kit</li> <li>Engagement with Service Users List.</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 current consultations 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>				
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> <li>The Engagement and Consultation Checklist</li> <li>Corporate Strategy (2022-2027).</li> <li>Engagement and Participation Policy has been approved.</li> <li>Public Engagement Tool Kit.</li> <li>Engagement with Service Users List.</li> <li>IIA Tool Kit.</li> <li>Social Media Policy (revised Aug 2018).</li> <li>Guidelines on Corporate Branding (May 2019).</li> <li>Minutes of structured engagement meetings and events.</li> </ul>	Evidence of structured stakeholder discussions Communications strategy	✓ ✓	9/10	Good - Overall 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> <li>Corporate Communications Strategy 2019-2022 is currently under review and a new Strategy will be developed in 2023.</li> <li>Overview and Scrutiny Public Engagement Protocol (2016) (Document N Constitution).</li> <li>Social media is being used to seek the public's views on matters being considered by Overview and Scrutiny Committees.</li> <li>IIA Tool Kit.</li> <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> </ul>	Communications and engagement strategy  Effective community involvement	✓ ✓	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.

	<ul> <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> <li>Corporate Communications Strategy 2019-2022 is currently under review and a new Strategy will be developed in 2023.</li> <li>Summary reports on consultation and engagement activities, which are reported back to Members and service users.</li> <li>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.</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	<b>✓</b>	9/10	Good - 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	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.	Processes for dealing with competing demands within the community for example consultation	<b>✓</b>	9/10	Good - 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> <li>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.</li> <li>The Corporate Well-being Objectives are included in the Council's Corporate Strategy 2022-2027 and are reviewed each year.</li> <li>An annual report on progress made against the Council's Well-being objectives and Corporate priorities in 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 - Overall governance considered compliant and meets best practice. No further action required.

C. Defining outcomes	s in terms of sustainable eco	nomic, social, and environmental benefits			
		vernment's responsibilities mean that it should define and plan outcome			
		nd outcomes, and remain within the limits of authority and resources. In of this process and in balancing competing demands when determining			
Sub-principles	Behaviours		Expected	√/X Sco	
C1 Defining outcomes	Alun Williams C1.1 Having a clear vision which is an agreed formal statement of the organisation's purpose and	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.	Well-being statement and objectives	9/1	Good - Overall governance considered compliant and meets best practice. No further action required.
intended outcomes containing appropriate performance indicators, which provides the basis for the organisation's overall strategy, planning and other decisions	Strategy 2022-2027. This strategy illustrates how the authority will support and promote the well-being of the citizens of Ceredigion.	Vision used as a basis for corporate and service planning	<b>√</b>		
	Alun Williams / Diana Davies C1.2 Specifying the intended impact on, or	rolled out for Officers and Members.	Community engagement and involvement	9/1	Good - Overall governance considered compliant and meets best practice. No further action required.
	changes for, stakeholders including citizens and service users. It could be immediately or over the	order to provide a user-friendly resource for Officers when	Corporate & service plans	✓	
	course of a year or longer	Updates on the budget savings and the work of the     Development Group are reported to the Cross Party     Transformation and Efficiency Consultative Group.	Well-being plan (PSB) and well- being statement (LA)	<b>√</b>	
	Alun Williams C1.3 Delivering defined outcomes on a sustainable basis within the resources that will be available	Performance information is outlined in the Council's Self-	Regular reports on progress	√ 9/1	Good - Overall governance considered compliant and meets best practice. No further action required.

			T		1	1
	Alun Williams C1.4 Identifying and managing risks to the achievement of outcomes	<ul> <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> <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;</li> <li>Business Plans (Level 1); and</li> <li>Service Plans (Level 2).</li> </ul>	Performance trends are established and reported upon Risk management Protocols	✓ ✓	9/10	Good - 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> <li>Local performance measures are included in Business and service delivery plans.</li> <li>Capital Plans include; <ul> <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 Risk management protocols	✓ ✓	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
C2 Sustainable economic, social and environment benefits	1	<ul> <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	<b>✓</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.

	<ul> <li>Capital Investment Strategy is contained within the Medium Term Financial Strategy.</li> <li>The Authority has undertaken the following steps towards the implementation of the Well-being of Future Generations (Wales) Act 2015:         <ul> <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 IIA tool and guidance;</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 assessment of Local Well-being 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>			
C2.2 Duncan Hall Taking a longer-term view with regard to decision making, taking account of risk and acting transparently	<ul> <li>Wales procurement policy statement is aligned to the Council's Procurement Strategy 2018-2022.</li> <li>The IIA tool and guidance is available and used to support decision-making.</li> <li>All reports and minutes are published in a timely manner and</li> </ul>		9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
where there are potential conflicts between the organisation's intended outcomes and short-term factors such as the political	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.  • Pre-decision Scrutiny encouraged where possible.  • The Medium Term Financial Strategy.	I		
cycle or financial constraints	• The Corporate Strategy 2022-2027. • The Transformation Programme.  Discussion between Members and Officers on the information need Members to supple decision making	s of		
	Record of decision making and supporting mater			

Alun Williams / Diana Davies. C2.3 Determining the wider public interest associated	•	Public Services Board <u>Local Well-being Plan</u> was published in May 2018. All reports and <u>minutes</u> are published in a timely manner and are open for inspection. All meetings are held in public, subject	Well-being Plan (PSB)	<b>√</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
with balancing conflicting interests between achieving the various economic, social	- 1	to the consideration of exempt information as defined by the 1972 Local Government Act. Advice given by MO.  Engagement and Consultation Checklists are available on	Record of decision making and supporting materials	<b>√</b>		
and environmental benefits, through consultation where possible, in order to ensure appropriate trade-offs	•	CeriNet. The Council wide WFGA Group Action Plan. IIA tool and guidance.	Protocols for consultation	<b>✓</b>		
Alun Williams/Lowri Edwards C2.4 Ensuring fair and equal access to services	•	Strategic Equality Plan 2020-2024.  Annual Strategic Equality Plan monitoring report 2021-2022 has been approved and has been published on Council website.  Welsh Language Standards.  Annual Welsh Language Standards monitoring report.  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.  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.	Develop protocols to ensure fair access and that statutory guidance is followed		9/10	Good - Overall governance considered compliant and meets best practice. No further action required.

D. Determining the in	terventions necessary to opt	timise the achievement of the intended outcomes				
important strategic cho be achieved in a way tl	ice that local government has	providing a mixture of legal, regulatory, and practical interventions. to make to ensure intended outcomes are achieved They need robubetween the various types of resource inputs while still enabling effect optimised.	st decision-making med	hanisms to	ensure th	at their defined outcomes can
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	<ul> <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</li> </ul>	Discussion between Members and Officers on the information needs of Members to support decision making	<b>√</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
	including the risks associated with those options. Therefore ensuring	module of the Corporate Manager Programme, which includes information relating to the decision making process, Wellbeing of Future Generations, Equalities, Welsh Language and the	Decision making protocols	<b>~</b>		
	best value is achieved however services are provided  • Risk Management Policy, Strate by Cabinet 24.9.10) with training Senior Management and Manavailable to all Members of Streflect additional risks and backinformed decisions. Corporate	use of the IIAs, Head of Democratic Services and MO (CLO- Legal & Governance) advise as necessary.	Option appraisals	✓		
		<ul> <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>	Agreement of information that will be provided and timescales	<b>✓</b>		
	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> <li>Medium Term Financial Strategy has been regularly updated the current version dated 2021/22 Onwards approved by Council 5.3.2021.</li> <li>Consultation decision tree tool includes a guidance section on dissemination of consultation results.</li> <li>Finance challenge regarding savings on Council Website.</li> </ul>	Financial Strategy	<b>✓</b>	9/10	Good - 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> <li>Corporate Performance Management arrangements include quarterly:         <ul> <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.	<b>✓</b>	9/10	Good - 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	•	Corporate Communications Strategy 2019-2022 currently being reviewed. A new strategy will be developed in 2023. The Ceredigion PSB has a Local Well-being Plan that has been developed and delivered jointly with external stakeholders and partners.  An Assessment of Local Well-being has been undertaken by the PSB that has fed the Local Well-being Plan and the Council Well-being Objectives for future years.	Communication and engagement strategy  Public Service Board well-being plans	✓	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
Alun Williams D2.3 Considering and monitoring risks facing each partner when working collaboratively including shared risks	•	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.  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	Partnerships/collabo ration framework  Risk management protocol	✓	9/10	Good - 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.
Russell Hughes-Pickering D2.4 Ensuring arrangements are flexible and agile so that the mechanisms for delivering outputs can be adapted to changing circumstances	•	Corporate Project Management Group has been established to formalise project development and management.  Ensuring Staff with project management skills are available.  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 & Safety; and Audit. Improve project arrangements prior to reporting to the Development Group and other authorisation processes.	Planning protocols	<b>✓</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.

		•	Helps identify capital requirements for inclusion in future capital programmes.				
	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	•	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.	Local performance indicators have been established and approved for each service element and included in the service plan and are reported upon regularly	<b>✓</b>	9/10	Good - 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	•	The Corporate Performance Management arrangements include  O Weekly leadership Group meetings; O Quarterly reporting of progress against level 1 Business Plans; O Quarterly Performance Board meetings; and O Quarterly Executive Panel Meetings.	Reports include detailed performance results and highlight areas where corrective action is necessary	<b>✓</b>	9/10	Good - 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	•	Business Plans include budget and finance information and form part of the quarterly Corporate Performance Management arrangements.  Budget Framework.  Service Accountancy – Budget monitoring.	Evidence that budgets, plans and objectives are aligned	<b>✓</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
	Duncan Hall D2.8 Informing medium and long-term resource planning	•	Financial Regulations and Financial Procedure Rules (Document F Constitution) along with Budgetary Control Guidance are all up to date. Chief Officer Assurance	Budget guidance and protocols	✓	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
	by drawing up realistic estimates of revenue and capital expenditure aimed at developing a sustainable		Statements. The internal controls in place are subject to regular review by Internal Audit, in accordance with the annual risk-based audit plan.  Medium-term financial Strategy.	MTFS	✓		
	funding strategy	•	Corporate Strategy 2022-2027. Internal Audit Strategy & Plan 2022/2023 approved by Governance & Audit Committee 10 March 2022.	Corporate Plans	✓		
D3 Optimising achievement of intended outcomes	Duncan Hall D3.1 Ensuring the medium term financial strategy integrates and balances service priorities, affordability and other resource constraints	•	Changes through the corporate savings plan have been through a robust governance process to ensure that all savings all link to the desired outcome.	Feedback surveys and exit/decommissionin g strategies Changes as a result	✓	9/10	Good - 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	•	Financial Regulations and Financial Procedure Rules (Document F Constitution) along with Budgetary Control	Budget guidance and protocols	<b>√</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.

cost of operations over the medium and longer term	<ul> <li>Guidance are all up to date. Chief Officer Assurance Statements.</li> <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	<ul> <li>Medium Term Financial strategy 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	<b>~</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
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		Long term trends are taken into account  Can this be evidenced?	<b>✓</b>		
Duncan Hall D3.4 Ensuring the achievement of 'social value' through service planning and commissioning. The Public Services (Social Value) Act	<ul> <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 Achievement of social value is monitored and	✓ ✓	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
2012 states that this is "the additional benefit to the communityover and above the direct purchasing of goods, services and outcomes"		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
Sub-principles E1 Developing the entity's capacity	Geraint Edwards E1.1 Reviewing operations, performance and use of assets on a regular basis to ensure their continuing effectiveness	<ul> <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>CeriNet (the HR intranet and resource to Staff and management) is continually reviewed and improved for effectiveness.</li> <li>Learning &amp; Development in 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</li> </ul>	Regular reviews of activities, outputs and planned outcomes	✓/X ✓	9/10	Action  Good - Overall governance considered compliant and meets best practice. No further action required.
		<ul><li>(see above).</li><li>Personal Development Review process in place for Members.</li></ul>				
	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> <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	<b>✓</b>	9/10	Good - 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> <li>Effective operation of partnerships which deliver agreed outcomes.</li> <li>Effective Partnerships have been developed in a number of areas and services including:</li> <li>School Improvement;</li> <li>Health &amp; Social care; and</li> <li>Waste.</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 - 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	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.	Workforce Plan Organisational development plan	✓ ✓	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
E2 Developing the capability of the entity's leadership and other individuals	Elin Prysor / Geraint Edwards E2.1 Developing protocols to ensure that elected and appointed leaders negotiate with each other regarding their respective roles early	<ul> <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</li> </ul>	Job descriptions	<b>~</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
	on in the relationship and that a shared understanding of roles and objectives is maintained	<ul> <li>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>	CE and leader pairings have considered how best to establish and maintain effective communication	<b>✓</b>		
	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	<ul> <li>A Scheme of Delegation (The <u>Constitution</u> 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</li> </ul>	Scheme of delegation reviewed at least annual in the light of legal and organisational changes	<b>✓</b>	9/10	Good - Overall governance considered compliant and meets best practice.  Delegated Decision Register to be published
	the governing body	<ul> <li>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>	Standing orders and financial regulations which are reviewed on a regular basis		0/10	
	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> <li>The Council's <u>Constitution</u> 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	<b>V</b>	9/10	Good - 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	nocratic Services Committee agree nber Role Descriptions, designed to sh member Development (Compete sh Local Government Association ( nber Role Descriptions and Person sented to Council	be used alongside ency) Framework, of 'WLGA') Framework Specifications			
Elin Prysor/Lowri Edwards/Geraint Edwards 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:  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 —ensuring personal, organisational and system- wide development through shared learning, including lessons learnt from governance weaknesses both internal and external	inprehensive Induction Programme is undertaken following the Local Electronian modules available to Member omplete.  The ess to courses/information briefings vision of opportunities for ongoing straining for Officers.  The ess workshops arranged, as nects on and ongoing review of opportes her training for Members (see above elopment Review Scheme.  The elopment/training done as part of prinance and legal posts (mandatory direments).	ctions 2022 ers and are encouraged s on new legislation. kills and refresher essary. unities for skills and ove), including Personal erson specifications for		9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
Lowri Edwards/ Geraint Edwards	Council aims to achieve the standarter for Member Support and Devel		<b>√</b>	9/10	Good - Overall governance considered compliant and

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> <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 CeriNet as a HR intranet and resource to Staff and management has improved effectiveness. Industrian</li> </ul>	Members induction and on-going training and development programme Mentoring and peer support programmes	✓ ✓		meets best practice. No further action required.
	<ul> <li>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 postelection (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>	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> <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 Ceri self-service.</li> <li>Mangers 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  • recognise when outside expert advice is required  • promote trust • work in partnership • lead the organisation • act as a community leader		9/10	Good - Overall governance considered compliant and meets best practice. No further action required.

		Efficient systems and technology used for effective support	<b>✓</b>		
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> <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	<b>✓</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
Alun Williams E2.8 Ensuring that there are structures in place to	<ul> <li>Engagement with Service Users list.</li> <li>Engagement and Participation Policy.</li> <li>Scrutiny Public Engagement Protocol (2016) (Document N</li> </ul>	Citizens and residents panel	<b>✓</b>	9/10	Good - Overall governance considered compliant and meets best practice. No
encourage public participation	Constitution) 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	Stakeholder forum terms of reference	<b>√</b>		further action required.
	given due consideration before final versions are agreed.  Service User focus groups.  Survey regarding self-assessment completed by Scrutiny.	Communication and engagement strategy	✓		
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> <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> </ul>	Reviewing individual member performance on a regular basis taking account of their attendance and considering any training or development needs	<b>✓</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
	<ul> <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>	Peer Reviews	Х		
Geraint Edwards E2.10 Holding Staff to	Strategic Workforce planning toolkit includes the identification of training and learning needs for all service areas.	Training and development Plan	✓	9/10	Good - Overall governance considered compliant and
account through regular performance reviews which take account of training or	<ul> <li>Performance Appraisals record training and development needs via the Ceri system.</li> <li>Staff development plans linked to appraisals have been</li> </ul>	Staff development Plans linked to appraisals	<b>√</b>		meets best practice. No further action required.
development needs	strengthened with the introduction of the Performance Management module in Ceri.	Implementing appropriate human	✓		

Geraint Edwards/Lowri Edwards 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  • Human Resource policies • 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 well-being 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; • Childcare voucher scheme;		Implementing appropriate Human Resource policies and ensuring that they are working effectively.	resource polices and ensuring that they are working effectively		
<ul> <li>Mindfulness training for Staff and Managers.</li> <li>Counselling service is also available to Members.</li> </ul>	Edwards 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	<ul> <li>Smoke-Free Workplace Policy.</li> <li>Alcohol and Drug Misuse Policy.</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 Care First employee assistance package has been introduced that offers:</li> <li>Counselling service; and</li> <li>Advice on financial, legal, consumer, eldercare, childcare and employment issues.</li> <li>Other support available for Staff includes:         <ul> <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> </ul>	Human Resource	9/10	considered compliant and meets best practice. No

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

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.

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.

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.

Sub-principles	Behaviour	Evidence	Expected	√/X	Score	Action
F1 Managing risk	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> <li>The Corporate Risk Management Framework was approved by Cabinet on the 24th 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> <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 - 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> <li>The Risk Management Policy and Strategy were approved by Cabinet 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 - Overall governance considered compliant and meets best practice. No further action required.
	Alun Williams F1.3 Ensuring that responsibilities for	All Risks are allocated to a Corporate Lead Officer (Risk Owner).	Risk management protocol	<b>√</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.

managing individual risks are clearly allocated					
Alun Williams F2.1 Monitoring service delivery effectively including planning,	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.	Performance map showing all key activities have performance measures	<b>√</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
and independent post- implementation review	<ul> <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-</li> </ul>	Benchmarking information	✓		
	<ul> <li>External &amp; Internal assessments by:</li> <li>Audit Wales;</li> <li>Estyn;</li> <li>Care Inspectorate Wales ('CSIW');Investigatory Powers'</li> </ul>	Cost performance (using inputs and outputs)	<b>√</b>		
	<ul> <li>Information Commissioner's Office ('ICO').</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</li> </ul>	Calendar of dates for submitting, publishing and distributing timely reports that are adhered to.			
Alun Williams / Lowri Edwards/Elin Prysor F2.2 Making decisions based on relevant, clear objective analysis and advice pointing out the implications and risks	<ul> <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> </ul>	Discussion between Members and Officers on the information needs of Members to support decision making	<b>√</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
inherent in the organisation's financial, social and environmental position and outlook	<ul> <li>All reports and minutes are published in a timely manner and are open for inspection including:</li> <li>Options for recommendations.</li> <li>Scrutiny Chairs are invited to take issues back to Cabinet</li> </ul>	Publication of agendas and minutes of meetings  Agreement on the	✓ ✓		
	Alun Williams F2.1 Monitoring service delivery effectively including planning, specification, execution and independent post-implementation review  Alun Williams / Lowri Edwards/Elin Prysor 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	F2.1 Monitoring service delivery effectively including planning, specification, execution and independent post-implementation review  **Formation Research**  **Corporate Strategy 2022-2027.*  **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 remodelling.**  **Letternal & internal assessments by:  **O Audit Wales;  **D Estyn;  **O Care Inspectorate Wales ('CSIW'); Investigatory Powers' Commissioner's Office ('IPCO'); and  **Information Commissioner's Office ('IPCO'); and Information Commissioner's Office ('IPC	P2.1 Monitoring service delivery effectively including planning, specification, execution and independent post-implementation review  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 remodelling.  External & internal assessments by:  Audit Walles;  Esternal & internal assessments by:  Audit Walles;  Esternal & internal assessment source 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 through a performance matrix.  IA undertake an annual 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. EAD 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 for submitting timely reports that are adhered to.  Calendar of dates for submitting, publishing and distributing timely reports that are adhered to.  Calendar of dates for submitting property in the property of the PSIAS. EAD 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 for the propertive as required by the PSIAS. EAD 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 for the propertive and the Dates for reporting are published and the Dates for reporting are published in the report. The Chairs and Vice Chairs of the Overview and Scrutiny Committees atten	Publication of determination for 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 remodelling.  • External & internal assessments by:  • Audit Wales; • Estyr; • Care Inspectorate Wales (*CSIW*):Investigatory Powers' Commissioner's Office (*IPCO*); and • Information Commissioner's Office (*ICO*).  • Self-Assessment (Sovernance 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.  • In undertake an annual self-assessment hrough a performance matrix.  • In Undertake an annual self-assessment and have a 5-yearly independent external assessment / peer review as required by the PSIAS. EOA 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 was exequired by the PSIAS. EOA 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 was exequired by the PSIAS. EOA 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 was required by the PSIAS EOA completed May 2022, report & resulting action plan presented to Governance & Audit Committee 27.9.22 along with the CMIA's Internal Audit Self Assessment.  • Coveriew and Scrutiny Committees attend with the principle that they can identify areas that require inclusion on their respective Forw	P2.1 Montoring service delivery effectively including planning, specification, execution and independent post-implementation review implementation review.  **PSP's plans. The Council also has many local indicators which helps is t determine whether it has achieved the priorities in its Corporate Strategy 202:2027.  **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 remodelling.**  **External & internal assessment by:  **Outlid Wales:  **Outlid Provided Wales:  **Outlid Wales:  **Outli

	<ul> <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	<ul> <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</li> </ul>	The role and responsibility for scrutiny has been established and is clear	<b>√</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
constructive challenge and debate on policies and objectives before,	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,	Agenda and minutes of scrutiny meetings	<b>✓</b>		
during and after decisions are made, thereby enhancing the organisation's	<ul> <li>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> </ul>	Evidence of improvements as a result of scrutiny Terms of reference	<b>V</b>		
performance and that of any organisation for which it is responsible	<ul> <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> </ul>	Training for Members	<b>✓</b>	_	
	<ul> <li>All agendas and minutes are published on the Council's website.</li> <li>Forward Work Programme published on the Council's website.</li> </ul>	Membership Public Service	✓ ✓		
	<ul> <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>Membership details for all Scrutiny Committees is available on the web.</li> </ul>	boards are subject to effective scrutiny			
	<ul> <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> </ul>				
	<ul> <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>				
Lowri Edwards/Alun Williams F2.4 Providing Members and senior management	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 Corporate Strategy 2022-2027.	Calendar of dates for submitting, publishing and distributing timely	<b>√</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
with regular reports on service delivery plans and on progress towards outcome achievement	<ul> <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</li> </ul>	reports that are adhered to			
	<ul><li>meetings and Panels.</li><li>Scrutiny Committees may request reports at any time.</li></ul>				

	Duncan Hall F2.5 Ensuring there is consistency between specification stages (such as budgets) and post-		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.  Financial implications are a requirement for inclusion in all Cabinet	Financial standards, guidance	<b>√</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
	implementation reporting (e.g. financial statements)	•	Meeting reports. <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.	Financial regulations and standing orders	<b>✓</b>		
		•	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.				
F3 Robust internal control	Alun Williams / Alex Jenkins F3.1 Aligning the risk	•	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	Risk management strategy	<b>✓</b>	9/10	Good - Overall governance considered compliant and meets best practice. No
	management strategy and policies on internal		arrangements submitted on a regular basis in line with the	Audit Plan 2018/19	<b>✓</b>		further action required
	control with achieving objectives	•	Business Continuity and Civil Contingencies Group meet quarterly. 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.  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.  The appointed Auditor considers the Council's arrangements to secure economy, efficiency and effectiveness in his letter he has	Audit reports	•		
		•	stated that the Council has complied with its responsibilities to the use of its resources.  The Council Objectives are aligned to Strategies.				

Alun Williams / Alex Jenkins F3.2 Evaluating and monitoring risk management and interi control on a regular bas			9/10	Good - Overall governance considered compliant and meets best practice. No further action required
Alex Jenkins F3.3 Ensuring effective counter fraud and anti-corruption arrangementare in place	<ul> <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> </ul> Compliance with the Code of Practice or Managing the Risk	1	9/10	Good - Overall governance considered compliant and meets best practice. No further action required

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> <li>IA presents Counter-Fraud Report to Governance and Audit Committee annually (2021/22 Counter-Fraud Report presented to Governance &amp; Audit Committee on 6 June 20226).</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> <li>AGS 2020/21 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 Co</li></ul>	Annual Governance Statement  Effective Internal Audit service is resourced and maintained		9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
Elin Prysor F3.5 Ensuring a Governance and Audit committee or equivalent	<ul> <li>Internal Auditors' professional training qualification.</li> <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	<b>✓</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.

group or function which is	group (until May 2022 when Lay Person shall be Chair, per 2021	Committees:		
independent of the	Act provisions).	Practical Guidance		
executive and	Ongoing preparation and implementation of changes affecting the	for Local Authorities		
accountable to the	Governance and Audit Committee in light of the 2021 Act. The	and Police (CIPFA,		
governing body: provides	Governance and Audit Committee was informed, in a report on	2013)		
a further source of	24.2.2021 Meeting, of the changes to their role regarding self-	,		
effective assurance	assessment reports of the Council, and regarding panel	Terms of reference	✓	
regarding arrangements	performance assessments, as well as the change of name, and			
for managing risk and	changes to the Chair/Vice Chair and composition.	Membership	<b>√</b>	
maintaining an effective	The Governance and Audit Committee's Terms of Reference were	Momborship		
control environment that	updated on 6 December 2018.			
its recommendations are	Update report on 2021 Act presented to Governance and Audit			
listened to and acted	Committee 3.6.2021, to include updating Governance and Audit	Training	<b>√</b>	
upon	Committee regarding changes to Constitution affecting Committee	Training		
'	including:			
	- Recruitment of lay members and the Mid Wales CJC			
	Governance and Audit Sub-Committee; and			
	- Regarding the Committee's functions relating to:			
	<ul> <li>reviewing and assessing the performance assessment of</li> </ul>			
	the Council;			
	<ul> <li>considering the Council's draft annual Self-Assessment</li> </ul>			
	report;			
	<ul> <li>considering any report from the Auditor General and</li> </ul>			
	Council's draft response;			
	o review of the Council's complaints handling function; and			
	role regarding Panel Performance Assessments (from			
	May 2022).			
	Changes made during 2021-2022 include preparations for:			
	- 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);			
	- change of name to 'Governance and Audit Committee;			
	- Membership to be 2/3 Councillors and 1/3 Lay Persons (as			
	defined in Act) – –recruitment completed (Council approved			
	appointments 9.12.21);			
	- Committee duty to appoint own Chair and Deputy Chair;			
	-Chair must be lay person –recruitment completed (Council			
	approved appointments 9.12.21) and Chair/Deputy Chair shall be			
	appointed from Lay Members;			
	-Deputy Chair must not be member of Local Authority Executive;			
	and			
	- In absence of Chair & Deputy only non-executive Members can			
	chair.			
	Size of Governance and Audit Committee review completed and			
	change of size from May 2022 approved (9).			
	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			

F4 Managing data  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.	completed, taking into account 2021 Act requirements and termination of term of office of current lay member.  Job Direction, Personal specification, and criteria approved by Council 10/12/20.  Governance and Audit Committee self-assessment - self-assessment exercise underway.  Reports and minutes are published on the Council's website.  Governance and Audit Committee Terms of Reference updated.  Membership details for Governance and Audit Committee and all Scrutiny Committees is available on the Council's website.  Regular meetings between CMIA and Chair of Governance and Audit Committee.  Meetings as necessary between MO & Chair of Governance and Audit Committee.  Meetings as necessary between MO & CMIA.  Regular meetings between MO and CMIA & Audit Wales when necessary.  Regular Meetings between Governance and Audit Committee Members and external regulator Audit Wales (with and without Officers)  Regular training / updates provided to Governance and Audit Committee.  Chair of Governance and Audit Committee attends Welsh Governance and Audit Committee Chair network group to develop and compare role within Local Authorities.  A New 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.  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 ('ITRO'); and Information and Records Management Officer ('IRMO')  In addition the following groups/committees consider Information security:  Cor	Data management framework and procedures Could we add the dates to the policies please Designated data protection officer  Data Protection policies and procedures	✓	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
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		<ul> <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> <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 WASPI Website.</li> <li>Regular external Assessments e.g. Compliance with Code of Conduct.</li> </ul>	Data sharing agreement  Data sharing register	✓ ✓	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
		***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.	Data processing agreements	<b>✓</b>		
	Arwyn Morris F4.3 Reviewing and auditing regularly the quality and accuracy of data used in decision making and performance monitoring	<ul> <li>Records Management Policy.</li> <li>Data Protection/GDPR Policy.</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 <u>published</u> 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	<b>√</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
			Data validation procedures What data validation is carried out	✓		
F5 Strong public financial management	Duncan Hall F5.1 Ensuring financial management supports both long-term achievement of outcomes and short-term financial and operational performance	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	Financial management supports the delivery of services and transformational change as well as securing good stewardship	<b>✓</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.

	<ul> <li>Reflect data changes, regulations, plans, policies and strategies         <ul> <li>and is being presented to Cabinet for approval 23,2,2021 for approval to then be presented to Council on 5.2.2021.</li> </ul> </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> <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	<b>√</b>	9/10	Good - 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						
		ecisions and delivering services are answerable for them. Effective ac				
		rstand and respond as the organisation plans and carries out its activ	ities in a transparent n	nanner. B	oth external	and internal audit contribute
to effective accountabil	lity. Behaviour	Evidence	Expected	✓/X	Sooro	Action
Sub-principles			Expected	✓ /∧ ✓	Score	Action
G1 Implementing	Lowri Edwards/Arwyn Morris/Alun Williams	Council's <u>Website</u> .  Council and Cabinat meetings are breadeasted.	Website	•	9/10	Good - Overall governance considered compliant and
good practice in	04 4 144 101	Council and Cabinet meetings are broadcasted.     Standard templates for Cabinet Scruting and Council.				meets best practice. No
transparency	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> <li>Standard templates for Cabinet, Scrutiny and Council.</li> <li>Compliance to the Welsh language Standards.</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 Roadmap 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>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</li> </ul>	Council meetings are webcast			meets best practice. No further action required.
		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.				
	Lowri Edwards G1.2 Striking a balance between providing the right	<ul> <li>Councillors' contact details, attendance records, Committee membership and Declarations of Interests available on the <u>Council's Website</u>.</li> </ul>	Councillors annual reports	<b>√</b>	considered complia	Good - Overall governance considered compliant and meets best practice. No
	amount of information to satisfy transparency demands and enhance public scrutiny while not being too onerous to provide and for users to understand	<ul> <li>Councillors' annual reports available on the Council's Website.</li> <li>Overview and Scrutiny Annual Report available on the Council's Website.</li> <li>Democratic Services Annual Report available on the Council's Website.</li> </ul>	Annual report	<b>✓</b>		further action required.

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	•	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.	Formal annual report which includes key points raised by external scrutineers and service users feedback on service delivery  Annual finance statements	✓ ✓	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
	Alun Williams G2.2 Ensuring Members and senior management own the results	•	Appropriate approvals. Corporate Performance Management arrangements. Ownership of planning and transformation.	Appropriate approvals	<b>√</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
	Elin Prysor 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)		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.  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).  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.	Annual Governance Statement	<b>√</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.
	Elin Prysor G2.4 Ensuring that the Framework is applied to jointly managed or shared service organisations as appropriate	•	AGS shared with accounts, reviewed and updated with Members and Officers providing a wider engagement process.	Annual Governance Statement	<b>√</b>	9/10	Good - 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	•	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.	Format follows best practice	✓	9/10	Good - 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	•	The current Procurement Strategy 2018-2022 was approved in 2018.  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.				
G3 Assurance and effective accountability	Elin Prysor G3.1 Ensuring that recommendations for corrective action made by external audit are acted upon	•	A good working relationship exists with 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,	Recommendations have informed positive improvement	<b>✓</b>	9/10	Good - Overall governance considered compliant and meets best practice.  Monitor progress of Actions/recommendations.
			Governance Officer is Audit Wales point of contact for outstanding Management Response Forms ('MRFs') for 2019/20 & 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.				
		•	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.				
	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		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	Compliance with CIPFA's Statement on the Role of the Head of Internal Audit (2010) and CIPFA 2019 statement on role of Internal Audit	<b>✓</b>	9/10	Good - Overall governance considered compliant and meets best practice. No further action required.  Internal Audit now fully staffed. Training is in progress.
	,		in November 2020 and April 2022. The service has been fully resourced since 1 June 2022.	Compliance with PSIAS	✓		

	•	A new CMIA has been in place from 1 January 2022, and has considerable experience in IA, and is supported by a	QAIP updated following EQA, and all actions either
		knowledgeable & skilled Audit Manager.	completed or in progress.
	•	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 <u>AGS</u> .	
	•	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, 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).	
challen inspect	elcoming peer ge, reviews and ions from regulatory	A good working relationship exists with the Welsh Government as key regulator. Regular dialogue is maintained with representatives from Audit Wales.  Recommendations from Audit Wales are taken forward in the	9/10 Good - Overall governance considered compliant and meets best practice. No further action required.
	and implementing nendations	Corporate Performance Management arrangements. The Council is learning and continually works towards improvement. Five-yearly external assessment of IA is undertaken as required	QAIP updated following EQA, and all actions either completed or in progress.
	•	by PSIAS. 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.	
	•	IA progress, performance & improvement is reported to Audit Committee quarterly.	

Elin Prysor	AGS.	Annual governance	✓	9/10	Good - Overall governance
G3.4 Gaining assurance	Members and Officers carry out a review of the AGS annually.	statement			considered compliant and
on risks associated with					meets best practice. No
delivering services through					further action required.
third parties and that this is					
evidenced in the annual					
governance statement					
Alun Williams / Diana	PSB's terms of reference and Well-being Plan	Public Service	✓	9/10	Good - Overall governance
Davies	Annual report from PSB.	Boards terms of			considered compliant and
G3.5 Ensuring that when	The Ceredigion County Council Overview and Scrutiny Co-	reference and well-			meets best practice. No
working in partnership,	ordinating Committee is responsible for taking an overview of	being plans			further action required.
arrangements for		Public service	✓		
accountability are clear	Partnership and Accountability agreements are established in	boards engage with			
and that the need for wider	collaborative projects.	scrutiny			
public accountability has					
been recognised and met					