

**AUDIT COMMITTEE – 22<sup>nd</sup> July 2019**

**ANNUAL GOVERNANCE STATEMENT 2018/19**

**1. Purpose of the Report**

1.1 To consider the Annual Governance Statement for 2018/19, attached as Appendix One to this report.

**2. Recommendation**

**2.1 The Committee is asked to consider and approved the Annual Governance Statement for 2018/19 for final ratification by Full Council.**

**3. Background**

3.1 The process and guidance that underpins the Annual Governance Review (AGR) for 2018/19 was considered by the Audit Committee on 17th January 2018 prior to the AGR commencing with officers.

**4. The Annual Governance Statement 2018/19**

4.1 The AGS is attached as Appendix One to this report. The statement outlines the following:

- i. The purpose of the Governance Framework;
- ii. The Governance and Internal Control Framework;
- iii. The process of annually reviewing the effectiveness of the Governance and Internal Control Framework; and,
- v. Identifying development and improvement opportunities arising from the Annual Governance Review, to be addressed in 2017 / 18.

**5. Review Process**

5.1 The AGS is an important document as it is one form of providing assurances to residents and other stakeholders, including the Councils partners, that its decision making processes and procedures have integrity.

5.2 In order to ensure the AGS Action Plan contain relevant and significant governance issues, the following criteria have been applied when considering and determining if an issue is significant:

- It has seriously prejudiced or prevented the achievement of the Authority's objectives;
- It has resulted in the need to seek additional funding to allow it to be resolved, or has resulted in significant diversion of resources from another aspect of the business;
- It has led to a material impact to the accounts;
- It is identified in the Head of Internal Audit's report
- The Authority requires progress / action reports
- It has attracted media or public attention and has seriously affected the reputation of the Authority; and / or
- It has resulted in formal action by the S151 officer or Monitoring Officer.

5.3. An action plan has been prepared to capture the issues raised throughout the review process. This document will form the basis for Audit Committee monitoring throughout the year. The action plan is

provided to the Audit Committee as Appendix One to the AGS itself. An update of the action plan will be reported to the Audit Committee throughout the year ahead.

## **6. Financial Implications**

- 6.1 There are no direct financial implications arising through the preparation and publication of the Council's Annual Governance Statement.
- 6.2 However, the draft statement includes an assessment as to the extent to which the Council's financial and other internal control related procedures are being complied with.

## **7. Risk Management Considerations**

- 7.1 The Council's Risk Management Strategy forms one of the key elements of the Council's Internal Control Framework.

## **8. Consultations**

- 8.1 The statement was developed through a comprehensive evaluation process which has included input from the Council's Corporate Assurance Group and the Council's Senior Management Team (SMT).

## **9. List of Appendices**

- 9.1 Appendix One: Annual Governance Statement 2018/19 and Action Plan

## **10. Background Papers**

- 10.1 Previous Audit Committee reports covering the monitoring of the AGS Action Plan, the Council's Local Code of Corporate Governance and the Council's Annual Governance Review Process for 2018/19.

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**Date:** 9<sup>th</sup> July 2019

# BARNSLEY METROPOLITAN BOROUGH COUNCIL

## ANNUAL GOVERNANCE STATEMENT 2018/19

### 1. **Scope of Responsibility**

- 1.1 Barnsley Metropolitan Borough Council is responsible for ensuring that its business is conducted in accordance with the law and all relevant standards and that public money is safeguarded and properly accounted for.
- 1.2 The Council also has a duty under the Local Government Act 1999 to put in place arrangements to secure continuous improvement in the way its functions are implemented, having regard to a combination of economy, effectiveness and efficiency.
- 1.3 In discharging this overall requirement, the Council is responsible for putting in place proper arrangements for the governance of its affairs and facilitating the effective exercise of its functions including the management of risk.
- 1.4 The Council has approved and adopted a Local Code of Corporate Governance, which is consistent with the principles of the CIPFA / SOLACE framework detailed in their report 'Delivering Good Governance in Local Government (2016 Edition)' insofar as the Council will:
- Principle A.** Behave with integrity, demonstrating strong commitment to ethical values and respect the rule of law;
  - Principle B.** Ensure openness and comprehensive stakeholder engagement;
  - Principle C.** Define outcomes in terms of sustainable economic, social and environmental benefits;
  - Principle D.** Determine the intervention necessary to optimise the achievement of intended outcomes;
  - Principle E.** Develop the entity's capacity including the capacity of its leadership and the individuals within it;
  - Principle F.** Manage risk and performance through robust internal controls and strong public financial management; and
  - Principle G.** Implementing good practice in transparency, reporting and audit to deliver effective accountability.
- 1.5 A copy of the Council's Local Code of Corporate Governance can be found on the [Council's Internet site](#). This document was last considered and approved by the Councils Audit Committee at their meeting dated 17<sup>th</sup> January 2018. As no material changes were required, the Audit Committee was not asked to consider a revised Local Code of Corporate Governance during 2018/19.

## **2. Purpose of the Governance Framework**

- 2.1 The governance framework comprises the systems, processes, culture and values by which the Council is directed and controlled. It also includes the activities through which it is accountable to, engages with and leads the community. It enables the Council to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate, cost effective services.
- 2.2 The system of governance and internal control is a significant part of the framework and is designed to manage risk to a reasonable level. It cannot eliminate all risks relating to the failure to achieve policies, aims and objectives and can therefore only provide reasonable and not absolute assurances regarding overall effectiveness. The system of governance and internal control is based on an ongoing process of risk review. The review of risk is designed to identify and prioritise risks towards the achievement Council policies, aims and objectives and to evaluate the likelihood and potential impact of those risks being realised. The Council's approach to risk is to manage and mitigate risks to acceptable levels in an efficient, effective and economic way.

## **3. The Governance Framework**

- 3.1 The scope of the governance and internal control framework spans the whole range of Council activities. The following sections consider the various main components of the Council's governance framework and the activities within each of them. It should be noted that the job roles, titles and organisational structures in this AGS reflect the Council's arrangements during 2018/19.
- 3.2 In order to help inform the next steps on our improvement journey (and to also identify improvement opportunities that relate to the Council's own governance and control environment) the Council were involved in a corporate peer review involving an expert team that came on site between Tuesday 26<sup>th</sup> February and Friday 1<sup>st</sup> March 2019.
- 3.3 Through a set of one to one and group interviews with employees, Elected Members, partners and our community, the peer team explored the following core components:
- Understanding of the local place and priority setting;
  - Leadership of place;
  - Financial planning and viability;
  - Organisational leadership and governance;
  - Capacity to deliver; and
  - Specific focus on the council's approach to children with [special educational needs and disabilities \(SEND\)](#).
- 3.4 The outcomes of the review are detailed in sections 8.1.4 to 8.1.9 of this document and are also included within the AGS Action Plan attached at Appendix One to this document.

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

##### 4.1 **Behaving with Integrity**

4.1.1 Barnsley Metropolitan Borough Council (BMBC) has developed an organisational culture that is based on the principles of its '[Future Council](#)' model. The journey towards Future Council began in 2013 and is intended to shape the organisation into a customer focused, modern, efficient and business minded Council.

4.1.2 Since 2013, there have been large scale innovation and improvements in how the Council operates. This includes a change to community working, with more people getting involved and helping in their local areas. Organisationally, we are stronger, more customer focused and more sustainable in the face of increasing pressures and reducing budgets.

4.1.3 In the next few years, the Council will focus on long term issues including driving growth, helping the people most in need and helping local communities to thrive. This focus on long term planning will assist the Council in understanding and responding to future challenges, such as:

- **Driving growth** – investments to support changes and growth in high priority areas like our town centre development and motorway junction business parks;
- **Early help** - giving people the help they need as early as possible and supporting communities and residents to do more for themselves;
- **Communities working together** – recognising our community assets in our planning, design and delivery arrangements;
- **Brexit** – preparing for Brexit and managing any challenges;
- **Technology** – establishing a digitally confident Council that includes its local communities to ensure Barnsley maximises the opportunities that technology brings; and
- **Improvement and growth fund** – driving change through investment and innovation.

4.1.4 Although financial austerity is very much a challenge for the Council, the opportunities to grow, to do things differently and to use new technology are really positive. The Council is slicker, stronger and more efficient as a result of its Future Council model and these ongoing plans ensure the Council continues with the progress that has already been made in creating a thriving and vibrant economy, helping people to achieve their potential and developing strong, resilient communities.

4.1.5 There are a number of activities that the Council continues to focus on to assist in changing the way we work:

- **Clear Vision and Values** – we have developed these together and they define what we are trying to achieve in our communities and for our customers;
- **Customer Focus** – we will understand all of our customer needs and put them at the heart of everything we do;
- **Commercial and Business Acumen** – we will focus on outcomes and making every penny count, removing bureaucracy and running the organisation really well for our customers and residents;
- **Efficient Delivery of Projects and Programmes** – we have strengthened and standardised our approach to Projects and Programmes and we are better at working together to ensure accountability and value for money;

- **Innovative and Managed Risk Taking** – we will remove barriers to change, encourage, support and empower our employees to develop great new ideas and implement improvements;
- **Learning Organisation** – we will invest in our employees, recognise success and achievement and become stronger from our mistakes;
- **Leaders at every Level** – we will have leaders at every level of the organisation who are highly skilled and able to inspire and empower their teams to respond effectively to local needs;
- **Flexible Workforce** – we will ensure our employees are healthy, agile, skilled and flexible so that we can continue to meet our customer’s needs;
- **Working with our Partners, Communities and Residents** – we will work better together to identify and meet local needs by joining up our work and playing to our different strengths;
- **Enabling Organisation** – we will enable our partners, communities and residents to do more for themselves, rather than stepping in when we are not needed or where others can do something better than we can.

4.1.6 The Council’s four main values, detailed in the [Councils Performance Management Arrangements](#) are as follows:

- We are Proud;
- We are Honest;
- We will be Excellent; and
- We are a Team.

4.1.7 BMBC has a Whistleblowing Policy which forms an element of the Council’s [Anti-Fraud and Corruption arrangements](#). The Whistleblowing Policy is supported by two senior managers who are designated contact officers. The Councils [Audit Committee](#) oversees the effectiveness of these arrangements on a regular basis. The Council’s Internal Audit Section takes the lead in promoting preventative measures as well as having a role in investigating matters brought to its attention.

## 4.2 Demonstrating a strong commitment to Ethical Values

4.2.1 BMBC has a Member Panel in place to consider any allegations of misconduct where the [Monitoring Officer](#) determines the need to undertake a formal investigation. The Monitoring Officer exercises their judgement in consultation with three independent persons who have been appointed as part of the 2011 Localism Act. This panel comprises three Elected Members chosen from those Members who comprise the [Appeals, Awards and Standards Panel](#) by the Monitoring officer in consultation with the Chairperson of the Panel. The majority of Members are selected from a political group that is different to that of the Member who is the subject of the complaint.

4.2.2 The Council has developed and adopted formal Codes of Conduct which define the standards for both personal and professional behaviour for [Elected Members](#) and [officers](#). Formal induction training packages have been developed for Members and officers that include mandatory training regarding areas such as information governance and financial and procurement responsibilities. Both Elected Members and officers are required to register relevant interests as required by law, and by the relevant Code of Conduct. The Council maintains a [Register of Councillor Interests](#) and Councillors are obliged to keep their registration up to date and inform the Monitoring Officer of any changes within 28 days of the relevant event. The need for disclosure of any conflicts of interest is a

standard agenda items at all Council meetings and [Standing Orders](#) require a member to withdraw where they have a disclosable pecuniary interest as defined by law.

### **4.3 Respecting the Rule of Law**

- 4.3.1 The Council has designated the Executive Director of Core Services as the Monitoring Officer. It is the function of the Monitoring Officer to ensure compliance with established policies, procedures, laws and regulations and to oversee its arrangements in respect of complaints relating to ethical standards.
- 4.3.2 The Executive Director of Core Services attends, or is represented by a senior lawyer, at all meetings of [Cabinet](#) and [Council](#). A senior lawyer is always in attendance at meetings of the [Planning Regulation Board](#) and [Licensing Regulatory Board](#) and as the Clerk to any Appeal meetings.
- 4.3.3 All decision making reports take account of a number of control factors including risk and ,legal considerations as well as financial, policy and performance implications. The Council's [Senior Management Team](#) (SMT) reviews all significant reports prior to them being included on the Cabinet agenda and discusses the forthcoming Cabinet agenda a week prior to the meeting to address any particular issues arising from the reports on the agenda. As such, any decisions taken by Cabinet Members, under their delegated powers, are subject to prior scrutiny by SMT.
- 4.3.4 All Cabinet decisions are subject to scrutiny by the [Overview and Scrutiny Committee](#).
- 4.3.5 All documents that require execution by the Executive Director of Core Services require evidence of appropriate authority either via a decision made by an Elected Member or delegated approval.
- 4.3.6 Legal implications regarding consultation and statutory quality obligations are addressed specifically as part of the Council's budget setting process. The Monitoring Officer and the Service Director (Finance), who acts as the [Section 151 Officer](#), are aware of the statutory duties to report in respect of concerns and unauthorised activity/ expenditure and consult with each other periodically in relation to their complementary statutory roles.
- 4.3.7 There is a periodic review of decision making and 'authority to act' roles through the role of the Internal Audit section and where appropriate, by external regulators such as the [Information Commissioner](#), the [Surveillance Commissioner](#) and the [Local Government Ombudsman](#).

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

### **5.1 Openness**

- 5.1.1 The [Council Constitution](#) sets out how the Council makes decisions and the procedures that are followed to ensure that its rules are efficient, effective, transparent and accountable to local people. The Constitution sets out rules governing the manner in which the Council conducts its business.
- 5.1.2 The Constitution includes the [Scheme of Delegation](#) in which functions and decision making responsibilities are allocated between Full Council, Cabinet, individual Cabinet Members, Regulatory Boards, Committees as well as officers.
- 5.1.3 The Council's Officer Code of Conduct and Member Code of Conduct encourages the effective transaction of business by setting out the respective roles of Elected Members and officers and provides guidelines for good working relationships between them.
- 5.1.4 A limited number of items of business (e.g. approving the level of Council Tax) must be approved by Full Council. For other decisions, the [Leader](#) and Cabinet have decision making powers that support the priorities and [structures of Future Council](#).
- 5.1.5 In order to comply with the Government's [Local Government Transparency Code](#) we make sure that local people can see and access data regarding:
- How we spend our money;
  - How we use Council assets;
  - How we make decisions; and
  - General issues that are important to local people.
- 5.1.6 The Council is committed to providing high quality services for all its customers and this is recognised through our vision of working together for a brighter future and a better Barnsley. The Council understands the benefit of listening to all of our customers in order to achieve the above by taking account of their views and learning from their experiences to ensure that the services we provide are developed in accordance with what our customers need. Customers can provide the Council with feedback in a variety of ways but can do this formally through the Customer Feedback, Information and Improvement Team who ensure that a customer's feedback is acknowledged, registered and responded to.
- 5.1.7 The Council advises customers online how they can make a [complaint, compliment or comment](#) and provides information on what will happen with the feedback they make. A copy of the Council's annual customer feedback report is also available and provides information on the customer feedback received and the learning identified from complaints.

## **5.2 Engaging comprehensively with Institutional Stakeholders**

- 5.2.1 When working in partnership with others, the existence of sound governance arrangements helps to ensure that shared goals are achieved and resources are controlled in an effective manner.
- 5.2.2 A governance review was undertaken to identify and agree our key partnership boards. The main partnership boards are the Health and Wellbeing Board, the Barnsley Economic Partnership, the Safer Barnsley Partnership, the Safeguarding Boards and the Children's Trust. The emphasis for these partnership arrangements ensures partner agencies actively contribute towards, and are responsible for the delivery of, shared outcomes for Barnsley. As part of our Community Engagement Strategy work, we also completed a stakeholder mapping exercise and created a log of key stakeholders for consultation purposes.
- 5.2.3 Council officers and Elected Members are nominated as Council representatives when dealing with significant partnering organisations. Partners are encouraged, where appropriate, to align their objectives with the Council's ambitions to ensure a coordinated approach to the delivery of high quality, efficient and effective services that are in accordance with the arrangements of the Council.
- 5.2.4 A practical Partnership Governance Framework is in place to assist Partnership Lead Officers in providing suitable assurances that the partnership is making a valuable contribution to the Council's objectives and priorities and is a well governed and controlled relationship. The development of this document has been driven by the outcomes of previous Annual Governance Review's.
- 5.2.5 A review of Partnership Risk was undertaken in September 2018 and determined that the majority of Business Unit risk registers do include a suitable consideration of partnership risks and that no partnership risk was assessed as being 'red'.
- 5.2.6 The [Sheffield City Region](#) (SCR) benefits from its own governance arrangements that were supported by BMBC during 2018/19. BMBC provided internal control support functions such as meeting's administration, human resources, health and safety and internal audit which are delivered to the SCR via a service level agreement.

## **5.3 Engaging with individual Citizens and Service Users more effectively**

- 5.3.1 All Elected Members must be accountable to their communities for the decisions that they have taken including the rationale behind them. BMBC is subject to review through the annual external audit of its financial statements and by comparing our performance management outcomes against national standards and targets.
- 5.3.2 Elected Members and officers are subject to a code of conduct. Additionally, where maladministration may have occurred, the aggrieved person can appeal to their local Elected Member or directly to the Local Government Ombudsman.
- 5.3.3 The Council has numerous arrangements in place to communicate with its customers and wider stakeholders including the use of social email such as [Facebook](#) and [Twitter](#). The Area Council and Ward Alliance arrangements also encourage community involvement, engagement and participation.
- 5.3.4 Whilst the journey to become a more customer focused, modern and business minded Council began in 2013 with the inception of the 'Future Council' model, the Council remains committed to

the delivery of new, improved ways of working as detailed in the Council's [Corporate Plan 2017 – 2020](#). These include:

- A genuine focus on customers by putting them at the heart of what we do;
- A re-shaped organisation, designed to deliver what we have promised;
- New, innovative ways of working that deliver sustainable services; and
- More people getting involved locally, making their communities stronger.

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

### 6.1 Defining outcomes

6.1.1 The Council has identified the following priorities or outcomes, which are detailed in the Corporate Plan 2017 – 2020:

▪ **Thriving and Vibrant Economy:**

We are inwardly investing in order to build Barnsley's economy to achieve the following outcomes:

- ✓ Create more and better jobs and good business growth;
- ✓ Increase skills to get more people working;
- ✓ Develop a vibrant Town Centre;
- ✓ Strengthen our visitor economy; and
- ✓ Create more and better housing.

▪ **People Achieving their Potential:**

We are creating a healthier, safer and better educated population to achieve the following outcomes:

- ✓ Every child attends a good school and is successful in learning and work;
- ✓ Reducing demand through access to early help;
- ✓ Children and adults are safe from harm; and
- ✓ People are healthier, happier, independent and active.

▪ **Strong and Resilient Communities:**

We are helping people get the most out of where they live now and in the future to achieve the following outcomes:

- ✓ People volunteering and contributing towards stronger communities;
- ✓ Protecting the Borough for future generations by recycling and using renewable energy; and
- ✓ Customers can contact us easily and use more services online.

6.1.2 The progress made towards these outcomes are detailed in the [Council's Performance Management reports](#) which include a 'RAG' rating against each outcome and a detailed narrative against each individual area of activity.

6.1.3 The [Council's Medium Term Financial Strategy](#) (MTFS) supports the delivery of the Council's key priorities by setting the financial framework over a three year period. . It does this by identifying a number of key assumptions and constraints that are regularly tested to ensure they remain robust and accurate. The Council's MTFS also sets the framework for the compilation of Service Business Plan's. Each Business Plan considers issues such as finance, workforce and equalities to ensure appropriate risks are identified and mitigated to acceptable levels. Under Section 25 of the Local Government Act 2003, the S151 Officer is required to report on the robustness of estimates made for the purposes of setting budgets and the adequacy of the proposed financial reserves which is reviewed through the annual reporting of the [Councils Statement of Accounts](#).

6.1.4 The MTFS also includes a brief section which considers the financial implications relating to relationships with key partners.

## **6.2 Sustainable Economic, Social and Environmental Benefits**

- 6.2.1 The Council ensures that it considers the impact of its decisions in terms of economic, social and environmental consequences and requires all [decision making reports](#) to include an appropriate analysis of issues such as financial , health and safety, consultation, local people / service user, risk management, equality and social inclusion implications.
- 6.2.2 The Council has an [Equality and Diversity Policy](#) which sets out the Councils commitment, together with the specific responsibilities of employees, managers and Elected Members in implementing the policy and meeting our [Public Sector Equality duties](#). Furthermore, the Council's [Equality Strategy](#) sets out how the policy and Public Sector Equality duties are put into practice.

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

### **7.1 Determining Outcomes**

7.1.1 The Council ensures its decision makers are able to make informed and evidence-based decisions through the development of objective, decision making reports. These reports include an analysis of available options (including a 'preferred' option) and consider the potential financial, resource and risk implications of any decisions that are to be made.

7.1.2. The Council values feedback from our stakeholders and this is gathered by undertaking service specific consultations and engagement throughout the year. In 2019, a resident engagement exercise is planned which will help shape the Council's future plans.

### **7.2 Planning Interventions**

7.2.1 In terms of strategic planning, the Council has benefitted from two thematic Boards. These are comprised of partners from across the Borough who have an interest in delivering the outcomes associated with the thematic Board as follows:-

- Health and Wellbeing Board seeks to agree Health and Wellbeing related strategies and works with all relevant organisations to join up health and social care across the Borough. The Board is made up of Elected Members and officers of the Council, representatives from Barnsley's Clinical Commissioning Group (CCG) as well as other health providers which represent the interests of patients and service users. Representatives from other organisations that have an impact on Health and Wellbeing, such as South Yorkshire Police, have also attended these meetings; and
- Barnsley Economic Partnership (BEP) brings together a group of high level, influential people from the public and private sectors with the skills and experience to assist with the delivery of Barnsley's [Jobs and Business Plan](#). The BEP looks to contribute towards the rebalancing of the economy by stimulating private sector job growth through enterprise, business growth and inward investment.

7.2.2 The effectiveness of interventions is considered and assessed as part of the Council's Performance Management arrangements. Performance Reports include a brief narrative relating to the activities and outputs of the Health and Wellbeing Board and BEP.

### **7.3 Optimising the achievement of Intended Outcomes**

7.3.1 The Council's activities are considered at a strategic level through the development of the Council's MTFs and complementary [Service and Financial Planning arrangements](#). These set out the context in which the Council operates in terms of significant financial pressures arising from ongoing austerity measures and changes to local government funding arrangements. They also attempt to ensure that the activities of the Council and its key partners are aligned and that appropriate resources are in place to enable the delivery of intended outcomes.

7.3.2 The Council has developed a Business Unit Framework to ensure that it is a sustainable and evolving organisation despite reducing resources. This is complemented by the Council's [Future Council 2020 Plan](#) which sets out the journey towards a more modern, efficient and business minded organisation through planned change, improvement and growth. In response to austerity

measures, the Council has made £92M efficiency savings up to March 2019 with a further efficiency savings still required to deliver a balanced position over the medium term. In order to maintain a balanced, sustainable budgetary position in the context of these challenges, we have also developed a [Commercial Strategy](#) that the Council's Commercial Board are tasked with ensuring is embedded within services.

7.3.3 The Council procures a variety of goods and services in accordance with EU, UK and local regulations which are set out in the [Council's Procurement Policies \(CPR\)](#). The CPR was subject to a robust review during 2018/2019 and this has led to a number of improvements including a revised content and format.

7.3.4 In terms of delivering social value, the Council developed and launched its policy/statement during 2018/2019. Over the next year, 2019/2020, the Council will concentrate on the full adoption and implementation of embedding social value into working practices and decision making including the Council's procurement processes and evaluation.

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

### 8.1 **Developing Organisational Capacity**

8.1.1 The Organisational Improvement Strategy 2017-2020 sets out plans for the future to ensure that the Council is efficient and effective and is in the best possible position to support the achievement of its priorities. Building on the previous Future Council Strategy, the 2017/20 [strategy](#) is built around ten One Council priorities and focuses on four key areas of improvement. These areas of improvement will enable us to continue to drive changes forward at a pace to ensure we meet the demands required of a modern environment. The areas of improvement are:

- **Culture and behaviour change** – Continue to build and develop a healthy and positive organisational culture to ensure we are a customer focused, modern, efficient and business minded Future Council;
- **Efficient and effective processes and technology** – Ensure our processes and procedures are reflective of a modern Council and provide efficiency and value for money as well as supporting creativity and innovation. Provide reliable and efficient technology to mobilise our workforce and members and enable better and more efficient ways of working;
- **Agile, healthy and engaged workforce** – Ensure our workforce is healthy, resilient and able to work flexibly to meet the needs and expectations of our customers. Ensure our employees and members are engaged, motivated, empowered, able to share ideas and get involved in decision making to shape the future organisation; and
- **Developing the skills of our workforce and Elected Members** – Ensure that our employees and Elected Members take ownership for their own learning and development and have the right skills, knowledge and behaviours to perform effectively in their role in order to support the achievement of our priorities and meet our customers' needs.

8.1.2 Performance is monitored by the Organisational Improvement Board to ensure we are making sufficient progress and improvements against our priorities.

8.1.3 A number of service areas make use of benchmarking opportunities to measure performance and consider and compare this information to ensure the Service is delivering efficient and effective value for money services.

8.1.4 In order to help inform the next steps on our improvement journey, the Council invited the LGA to carry out a Corporate Peer review.

8.1.5 An expert team was on site late February / early March 2019 and through a set of one to one and group interviews with employees, elected members, partners and our community, sought to explore the following core components:-

- Understanding of the local place and priority setting;
- Leadership of place;
- Financial planning and viability;
- Organisational leadership and governance;
- Capacity to deliver; and
- Specific focus on the council's approach to children with [special educational needs and disabilities \(SEND\)](#).

8.1.6 The Peer Review findings concluded that:-

**“Barnsley Council is a high performing Council with clear and tangible ambitions for its residents, communities and stakeholders.”**

The Review team also acknowledged challenges facing the Council from 2020 and the change in leadership of the Chief Executive that may result in a change of direction for the organisation.

8.1.7 In terms of potential improvement, the Peer Review also made the following recommendations for the Council to consider:-

- Continue to communicate with staff particularly with changes in leadership;
- Clarify, simplify and re-iterate Council priorities and initiatives;
- Consider rationalising plans post 2020;
- Revisit the corporate risk register;
- Grow the neighbourhood model;
- Make the local economy more inclusive;
- Improve engagement with parents regarding SEND outcomes; and
- Drive forward with digital transformation.

8.1.8 The detailed recommendations from the full report are being transformed into an action plan along with timescales for completion. An overview of this is included within the AGS Action Plan which is attached at Appendix One to this document.

8.1.9 The LGA Corporate Peer Challenge process includes a follow up visit within the next two years. The purpose of the visit is to help the Council assess the impact of the peer challenge and demonstrate the progress it has made against the areas of improvement and development identified by the peer team. The Council's action plan will provide the evidence on how the recommendations have been tackled and resolved, where applicable.

## **8.2 Developing the Capability of the Organisations Leadership and other Individuals**

8.2.1 A robust performance framework has been developed and aligned to the priorities and outcomes included in our Corporate Plan. Performance for all areas of the Council is measured on a regular basis with progress reported into Cabinet quarterly. Areas of performance are subject to further scrutiny through the Council's Overview and Scrutiny Commission.

8.2.2 Individuals are able to identify how they contribute to the Council's priorities and objectives through business plans, team plans and individual performance objectives set during the annual Performance Development Review (PDR) process. Progress against these objectives are reviewed regularly throughout the year at one-to-one and supervision meetings and quarterly against the performance framework. Personal development requirements are also identified and discussed at PDR and one-to-one/ supervision meetings to ensure individuals are able to achieve their potential and contribute to the delivery of Council's priorities.

8.2.3 The Barnsley Leadership Programme continues to develop the leadership skills and behaviours of Council officers with over 650 employees completing the programme to-date. The programme is linked to the Chartered Management Institute Certificate in Leadership and Management enabling employees to formalise their skills with an accredited professional qualification if they wish to do so.

- 8.2.4 A corporate development offer is available to all employees to develop their skills for both now and in the future. Key focus areas for this offer include developing digital skills, commercial awareness and a practical approach to using coaching conversations to support and encourage people to fulfil their potential.
- 8.2.5 Effective two-way communication between employees and the organisation is enabled through regular activities including employee surveys and employee engagement events ('Talkabouts'). These activities provide employees with an opportunity to raise concerns, share ideas and get involved with decision making and improvements to shape the future organisation.
- 8.2.6 A Corporate Health and Safety Committee, chaired by the Head of Corporate Health, Safety and Emergency Resilience, is in place and includes membership from a number of employee representatives. The Committee meets on a regular basis and includes within its terms of reference, consideration of the following activities:
- Accident and incident statistics;
  - Occupational health statistics;
  - Health and Safety Audit Reports;
  - The development, introduction and monitoring of health and safety management systems;
  - The effectiveness of health and safety training; and,
  - The adequacy of safety and health communication and publicity within the workplace.

**9. Principle F: Managing risks and performance through robust internal control and strong public financial management.**

**9.1 Managing Risk**

- 9.1.1 The Council's [Risk Management Framework](#) (RMF) does not seek to eliminate risk or adopt a risk averse approach but aims to ensure the Council has the capability and awareness to manage acceptable levels of risk in the pursuit of agreed objectives. The RMF includes the Policy Objective Statement and the Risk Management Strategy which set out how the Council seeks to embed a risk based culture into its normal business activities. The RMF was reviewed and updated in 2018 and approved by the Audit Committee in December 2018. The RMF is a key element in the implementation of good governance arrangements that forms part of the Council's Annual Governance Review (AGR) process.
- 9.1.2 The Council's [Strategic Risk Register](#) (SRR) is intended to be a robust and dynamic document that sets out the culture and tone for risk management across the Council. The engagement of SMT in the risk management process through their ownership and review of the SRR demonstrates a strong commitment to embedding risk management 'from the top'. The risks in the SRR are owned by SMT with the management of individual risks and measures to mitigate risks allocated to specific officers. The SRR is subject to a six-monthly review and the outcomes are reported to the Audit Committee and subsequently, Cabinet.
- 9.1.3 The SRR was updated in October 2018, and again in March 2019, with the Audit Committee and Cabinet approving the outcomes of these reviews. Strategic Risk Management was also considered as part of the 2019 Peer Review and a further review of the current risk arrangements is currently being undertaken with the support of an external consultant to deliver recommended improvements in 2019/20.
- 9.1.4 Individual Business Units also operate and benefit from maintaining Operational Risk Registers (ORR) which relate to the key risks for their services. These risk registers are aligned to individual Business Unit Business Plans. Service Directors are asked to review these risk registers on a bi-annual basis and following each review there is an expectation that 'red' risks (in terms of 'current' and 'target' risk assessments) are escalated to Business Unit Management Teams for further consideration. All Operational Risk Registers are now located in the Council's document management system, SharePoint, with relevant officers able to access these documents electronically.
- 9.1.5 Risk management is an essential part of the Council's decision making report structure and it is expected that all decision making reports include a section on the risk implications of the decision in hand.

## **9.2 Managing Performance**

9.2.1 The Council measures its performance against the key priorities and outcomes included in the Corporate Plan 2017 – 2020. Underpinning this is a performance management framework that consists of three elements:

1. The Corporate Plan Priorities;
2. The Corporate Health of the Organisation; and,
3. Directorate Performance.

9.2.2 Each quarter, the Council produces a [performance report](#), summarising the performance against the priorities and outcomes.

9.2.3 Through effective contract management, the Council is also able to identify and assess the performance of its partners and contractual relationships.

## **9.3 Effective Overview and Scrutiny**

9.3.1 The Overview and Scrutiny Committee (OSC) is responsible for reviewing and challenging the decisions made by the Council's Cabinet and Executive Officers. The Committee meets monthly and consists of 26 Elected Members, 3 members of the public (referred to as co-opted members) and a Parent Governor Representative. It monitors the work and performance of the Council as well as other organisations (e.g. local healthcare providers) to ensure the effective delivery of local services and appropriate safeguarding arrangements are in place to protect vulnerable adults and children in the Borough. The Committee also sets up smaller 'Task and Finish' groups which supports the work of the Committee by undertaking more detailed investigations on specific topics.

## **9.4 Robust Internal Control**

9.4.1 The Council's system of internal controls are designed to support the achievement of corporate objectives and outcomes whilst ensuring that there is an appropriate level of compliance in terms of laws, regulations and internal arrangements. The internal control framework aims to act as a robust control measure against risks such as the loss of assets, fraud, misuse of equipment and the misuse of data and information.

9.4.2 The Council benefits from a [suite of policies](#) in respect of counter fraud and corruption activities including a Whistleblowing Policy, anti-Money Laundering Policy and an anti-Bribery Policy.

9.4.3 The Council's Audit Committee is made up of four Elected Members and five independent people. This ensures that the Council is complying with its rules and regulations for governance and finance, including value for money of Council services.

## **9.5 Managing Data**

9.5.1 The Council has information governance accountabilities that are required to be in place in accordance with legislation and accreditation standards such as the Data Security and Protection toolkit (formally the Information Governance toolkit) and Public Services Network accreditation. The Data Security and Protection toolkit is in use by the Council and is an online self-assessment tool used for publishing the standards of good practice that organisations must comply with regarding information governance.

- 9.5.2 In May 2018 the General Data Protection Regulations (GDPR) came into force alongside the Data Protection Act 2018. Significant work was undertaken to review data protection practices, processes in detail across the Council and develop various forms of training and awareness. Given the nature of the Council's activities, a senior officer was appointed as the statutory Data Protection Officer (DPO) to independently assess the Council's compliance with the GDPR and Data Protection Act.
- 9.5.3 In addition to the DPO, the Council's Information Governance arrangements are overseen by the Council's Senior Information Risk Owner (SIRO), a role undertaken by the Executive Director Core Services. The SIRO also chairs the Council's Information Governance Board which takes the lead in the development of policies, procedures, training arrangements and lessons learned from previous information governance incidents.
- 9.5.4 In his independent role, the DPO undertook a number of assurance reviews to provide assurances to the Information Governance Board and the Audit Committee regarding the Council's compliance with GDPR. The key issues arising from this work are described in Section 11.
- 9.5.4 The Council responds to a significant number of information access requests as a result of the Freedom of Information Act 2000, the Environmental Information Regulation 2004, the Data Protection Act 2018 and General Data Protection Regulations.

Information on how to make a request for information is available online and can be seen below:

- [Non- personal information \(Freedom of Information and Environmental Information\);](#)
- [Personal information \(individual information rights\).](#)

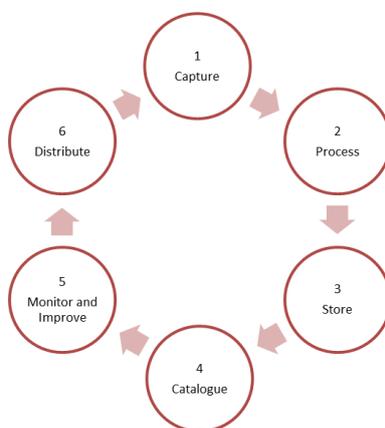
- 9.5.5 During October 2017, the Council welcomed a consensual audit of its personal data processes by the Information Commissioners Office (ICO). The ICO recognised the strong leadership and good practice the Council has embedded and cited the online training provision, comprehensive case management system for processing Freedom of Information requests and the Council's Records Management base, Shortwood, as examples of this good practice. In total, 109 recommendations were made for the Council to act upon, with the majority being classed as medium or low priority. An action plan was developed by the Council and facilitated by Internal Audit, the Information Governance Board and the Audit Committee. The ICO subsequently carried out a follow up audit and concluded that the recommendations had been acted upon satisfactorily. The review is now complete.
- 9.5.6 In preparation for the General Data Protection Regulations (GDPR), which came into effect on the 25th May 2018 (alongside a new UK Data Protection Act), the Council specifically addressed the following issues:-
- The individual rights of our customers;
  - The changes to accountability and governance surrounding information management;
  - The appointment of a Data Protection Officer;
  - Processes relating to breach notifications;
  - Reviewing and updating policies; and
  - Rolling out training and awareness to all employees.

9.5.7 The Council has endorsed a [Data Management Policy](#) that sets out the vision and principles at a strategic level for effectively managing data, and treating data as a critical asset to the organisation.

9.5.8 The policy principles include:-

- Corporate data is owned by Barnsley MBC and, as such, all staff are responsible for appropriately respecting and protecting the data assets generated by the Council;
- Data should be safeguarded according to GDPR / other legislative principles but should otherwise be shared where there is need within the organisation unless there is an explicit legal, commercial or operational reason for restricting access to non-person-identifiable data. Data is an asset which belongs to the Council, not a specific department or individual;
- The Business Improvement and Intelligence team within the Business Improvement and Communications business unit are responsible for defining the corporate policies and procedures governing data management, including this policy;
- The Information Governance Board is the assigned authority for decision-making with respect to the policy and associated practices. Any exceptions to the policy must be approved and documented by the Board;
- The organisational structure and service management supports sustainable improvements in data management practices and is responsible for improving data quality. Services responsible for creating and processing data will play an active role in remedying identified defects and will resource improvement initiatives as a priority;
- Appropriate training and a staff toolkit will be provided but it is the responsibility of service managers to ensure that training is undertaken by relevant staff; and
- Staff are responsible for understanding their own obligations with respect to data management and quality. Staff are also responsible for safeguarding and managing information particularly the quality of data and a critical part of the Data Management framework will be to monitor and improve data quality.

9.5.9 To facilitate the implementation of the policy and principles, the Business Improvement and Intelligence service has a technical team that will guide customers through the practicalities of processing their data through the Data Management Framework:



9.5.10 Through processing key priority data via the framework and adhering to the policy, it is anticipated that the organisation will realise the benefits of managed data including:

- ✓ Increased efficiency within the organisation by reducing redundant effort to collect and source data;
- ✓ Improve the effectiveness of decision making based on a sound evidence base and reduces the potential by others to challenge those decisions legally or otherwise;
- ✓ Provides a means by which to measure the effectiveness of service delivery, operations and strategy;
- ✓ Enables the targeting of limited resources to specific areas of need, and provides the evidence base for doing so;
- ✓ Through the creation of a Data Warehouse, it provides a mechanism for joining and analysing data for business intelligence purposes and opens up the opportunities to re-use data and quickly deploy new digital services;
- ✓ Fulfils statutory and contractual functions; and,
- ✓ Improve opportunity to leverage external funding.

## 9.6 Strong Public Financial Management

9.6.1 The Council has a pragmatic approach to the management of finances and endeavours to ensure that it's spend represents value for money. This approach is intended to support the achievement of short term operational performance and longer term strategic outcomes. Strategies including the Council's [Value for Money](#) and Commercial strategies underpin both long and short term objectives.

9.6.2 The Council's Service Director (Finance) acts as the Section 151 officer and ensures that the Council benefits from robust financial advice and is compliant in terms of its accounting and fiduciary responsibilities. This includes ensuring that financial management is embedded within the annual Business and Service Planning processes which includes the control and mitigation of financial risk.

9.6.3 In terms of financial management, the 2019 Peer Review Team concluded that:

**“The Council has a strong financial grip on both its expenditure and performance against its planned savings programme”.**

## **10. Principle G: Implementing good practices in Transparency, Reporting and Audit to deliver Effective Accountability.**

### **10.1 Implementing good practice in Transparency**

10.1.1 The Council's commitment to be a customer focused organisation is underpinned by ensuring that customers are aware of how they can make a request for information from the Council for both personal information and for information about the Council. Information is published on the Council's website which advises customers on how they can make a request:

- Non- personal information ([Freedom](#) of Information and Environmental Information); and
- Personal information (individual information [rights](#)).

10.1.2 The Council is also required to publish information as part of the [Local Government Transparency Code 2015 and Freedom of Information Act 2005](#), which has been designed to make sure that local people can see and access data about:-

- How the Council spends its money;
- How Council assets are used;
- How the Council make decisions; and
- Issues important to local people.

A copy of the information we publish in line with the Local Government Transparency Code 2015 and Freedom of Information Act 2005 can be seen below:

- [Local Government Transparency Code 2015](#); and
- [Freedom of Information Act 2005](#).

10.1.3 The Council benefits from a [Social Media policy](#) which aims to maximise positive engagement with stakeholders by the Council and individual officers whilst protecting its own reputation and ensuring compliance with relevant standards and regulations.

### **10.2 Implementing Good Practice in Reporting**

10.2.1 It is important for the Council to be able to demonstrate that it has been able to deliver on its priorities and ambitions and that it has been able to deliver value for money outcomes. This is achieved through the publication of Performance Reports.

10.2.2 Performance reporting is complemented by the Council's [Statement of Accounts](#) report which is prepared and published in accordance with legislative requirements and the [Code of Practice on Local Authority Accounting in the United Kingdom](#). The External Auditor also provides a value for money opinion in addition to an opinion on the accounts themselves. The Council's Annual Statement of Accounts report is made available for local electors, stakeholders and other interested parties to inspect.

10.2.3 There is a legal responsibility to undertake (at least annually) a full review of the Councils own internal control and corporate governance arrangements and provide details of this review in the [Annual Governance Statement](#). This is complemented by an [improvement Action Plan](#) that is monitored by the Councils Audit Committee. This review is undertaken using the current CIPFA Good Governance Framework for Local Government (2016). It is likely that the findings from major

reports from the National Audit Office and the Committee on Standards in Public Life, due in early 2019, will influence any future frameworks relating to local authority governance reviews.

### **10.3 Assurance and Effective Accountability**

10.3.1 It is important that the Council is challenged, audited and reviewed both internally and externally to ensure that Council services, priorities and outcomes are making a positive impact on the Borough. Following such reviews, the Council ensures recommendations and are translated into operational actions that are achievable, measurable and have suitable accountability built into them. Where appropriate,

10.3.2 In order to deliver the Council's own vision and values, it is important that partnership working is carried out in a way that ensures robust governance arrangements are in place in terms of finance, resources and risk. A practical Partnership Governance Framework is in place to assist Partnership Lead Officers provide suitable assurances that the partnership is making a valuable contribution to the Council's objectives and priorities and that it is a well governed and controlled relationship.

## **11. Review of the Effectiveness of the Governance Framework**

### **11.1 Annual Governance Review**

11.1.1 Barnsley Metropolitan Borough Council has responsibility for conducting (at least annually) a review of the effectiveness of its governance framework, systems of internal control and risk management arrangements. The review of effectiveness is informed by the work of senior managers within the Council who have responsibility for the development and maintenance of the governance environment as well as the Head of Internal Audits (HoIA) annual report and comments made by external auditors and other regulators or inspectors.

### **11.2 Senior Management Team**

11.2.1 The Council's SMT is responsible for ensuring compliance with as well as improvement against the governance, risk and internal control framework. As part of this function, each member of SMT is provided with details of their Directorates assurance information for the year. This assurance information includes:

1. Significant and Fundamental Internal Audit recommendations that have been made to individual Business Units within the Directorate;
2. Significant and Fundamental Internal Audit recommendations that have been identified following 'themed' audits; and
3. Other Sources of Assurance information which has been sourced from Internal Control and Governance lead officers.

11.2.2 Following receipt of this information by each individual Service Director, each SMT member is then asked to provide assurances regarding the overall governance arrangements for their Directorate.

11.2.3 This information is then evaluated and, where appropriate, included in the Annual Governance Statement Action Plan.

### **11.3 Internal Control Arrangements**

11.3.1 The Council has adopted a comprehensive set of internal policies and procedures that govern key aspects of its operations as part of the drive to develop high quality local public services. Collectively, these are referred to as the Internal Control Framework.

11.3.2 Each of these policies, plans and procedures has a senior lead officer with overall responsibility for their maintenance and application.

11.3.3 Each element that makes up the Internal Control Framework is subject to cyclical, risk informed reviews by the Council's Internal Audit Section.

## 11.4 Internal Audit

11.4.1 The Peer Review team concluded that the Council's Internal Audit function is:

**“Well regarded and delivers good assurance for Members officers. The Audit function is regarded as being genuinely independent and is trusted to do the right thing for the Council.”**

11.4.2 The HoIA is responsible for providing assurances in regard to the robustness of the Council's internal control arrangement to the Audit Committee and provides an annual report on Internal Audit activity and performance to the Audit Committee. In terms of the 2018/19 report, the HoIA gave a controls assurance opinion of **adequate** in relation to the Council's systems and confirmed that no fundamental breakdown of any system had occurred.

11.4.3 In his report, the HoIA also outlined the significant pressures that the Council now operates under as a result of austerity and recognised that this has, in turn, prompted a change in the Council's risk appetite. Within this context, Internal Audit reviews continue to confirm that services retain a focus on embedding new operational and governance arrangements and also maintain an appropriate, risk-based and effective framework of controls. It is pleasing to report, therefore, that 73% of the completed audits resulted in a substantial or adequate assurance opinion which is an increase from 50% in 2017/18.

11.4.4 The engagement of senior management across the Council has once again been very good reflecting the positive approach to audit and the openness to invite challenge and support. Where Internal Audit work has highlighted more significant areas for improvement, these have generally been where management have requested an independent review by Internal Audit in order to identify key control, governance and risk issues and assist management in how best to deal with them.

## 11.5 Strategic Risk Management

11.5.1 During 2018/19, the Strategic Risk, Governance and Insurance Manager has supported (and where appropriate challenged) the management and development of the Council's SRR and has prepared a number of reports to SMT, Audit Committee and Cabinet regarding the outcomes of the bi-annual reviews of the SRR. Work has also included the promotion and embedding of good risk management practice throughout the Council and its partners.

11.5.2 Strategic Risk Management was also considered by as part of the 2019 Peer Review and a further review of the current risk arrangements is currently being undertaken with the support of an external consultant to deliver recommended improvements in 2019.

## 11.6 Data Protection Officer (DPO)

11.6.1 The key role of the DPO is to provide the Council with assurances regarding compliance with GDPR and the Data Protection Act 2018. In order to do this, the DPO undertook a range of specific assurance reviews aimed at certain aspects of data protection and information governance activity. These reviews supplemented the work of the DPO during the year which incorporated the following:

- Input to the development of corporate training;
- Advice on policy review;
- Reviewing Data Protection Impact Assessments and signing them off;

- Receiving notifications of data breaches, advising and overseeing investigations and adjudicating upon any reporting to the ICO;
- ICO liaison and correspondence with complainants;
- Providing ad hoc guidance, support, challenge and input to new issues;
- 'Project' input for example into new Personnel files solution and attending the Digital Leadership Team; and,
- Reporting to the IG Board and Audit Committee.

11.6.2 The DPO presented this annual assurance report to the Information Governance Board in June 2019 and to the Audit Committee on 22<sup>nd</sup> July. In summary and taking a range of matters into account, the DPO provided an opinion regarding overall compliance and having reliable and embedded good practice in place as 'reasonable'.

## **11.7 External Audit, Assessment and Inspection**

11.7.1 In addition to the annual external audit of the Council's Statement of Accounts, Barnsley Metropolitan Borough Council is also subject to external assessment and regulation by auditors and service inspectorates such as OFSTED and the CQC. Services are responsible for ensuring that relevant findings from external audit or inspection activity informs the annual governance review which in turns underpins the production of the Annual Governance Statement.

11.7.2 In summary, the following principle sources of evidenced were considered when carrying out this review:

- Assurances provided from the 2019 Peer Review;
- Assurances provided by Service Directors and Executive Directors regarding the overall governance arrangements for Business Units and Directorates;
- Internal Audit Annual Report;
- Risk Management Annual Report;
- The actions taken on recommendations made through Annual Audit Letter;
- Key issues arising from the Annual Corporate Health and Safety Annual Report;
- The Local Government Ombudsman Annual Monitoring Report regarding complaints handled by BMBC;
- The independent Internal Audit annual review of Corporate Risk Management arrangements and the annual review of Annual Governance Arrangements;
- A review of the action taken and progress made in relation to the issues raised in the 2017/18 Annual Governance Statement and Associated Improvement Action Plan.

## **12. Significant Governance Issues**

12.1 Only the more significant and strategic governance and internal control issues should be included in the AGS. The following criteria have been applied when considering and determining if an issue is significant:

- It has seriously prejudiced or prevented the achievement of the Authority's objectives;
- It has resulted in the need to seek additional funding to allow it to be resolved, or has resulted in significant diversion of resources from another aspect of the business;
- It has led to a material impact in the accounts;
- It is identified in the Head of Internal Audit's report;
- The Authority requires progress / action reports;

- It has attracted media or public attention and has seriously affected the reputation of the Authority; and / or,
- It has resulted in formal action by the S151 Officer or Monitoring Officer.

12.2 The annual review of the Council’s governance, risk and internal control arrangements for 2018/19 has identified issues relating to:

- The 2019 Peer Review findings; and
- Improving compliance with GDPR and embedding good data protection practice.

12.3 The review has confirmed that the general level of compliance with the Council’s governance and internal control framework remains robust and effective.

12.4 There have been no significant events or developments relating to the governance system that occurred between the year-end and the date upon which the Statement of Accounts has been signed.

12.5 The scope of the governance review that has been undertaken to develop the AGS includes the consideration of group activities that relate to organisations such as Berneslai Homes and Penistone Grammar School Foundation Trust.

12.6 The review process has taken into account the action taken against control issues on previous Annual Governance Statements.

12.7 The Action Plan to be monitored during 2019/20 is comprised of the issues that have been carried forward from previous years as well as those identified from the 2018/19 review.

**13. Statement by the Leader of the Council and Chief Executive**

13.1 We are satisfied that the comprehensive review process undertaken has identified the relevant areas for attention over the forthcoming year. The Action Plan put in place will be monitored by the Councils Audit Committee will (when implemented) further enhance the Councils governance, risk and internal control framework.

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Councillor Sir Stephen Houghton CBE  
Leader of Barnsley MBC

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Sarah Norman  
Chief Executive of Barnsley MBC

Date:

Date:

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## **Glossary**

CIPFA – Chartered Institute of Public Finance and Accountancy  
SOLACE – Society of Local Authority Chief Executives  
BMBC – Barnsley Metropolitan Borough Council  
SMT – Senior Management Team  
SCR – Sheffield City Region  
ICO – Information Commissioners Office  
MTFS – Medium Term Financial Strategy  
H&WB – Health and Wellbeing Board  
BEP – Barnsley Economic Partnership  
CCG – Clinical Commissioning Group  
P&DR – Performance and Development Review  
RMF – Risk Management Framework  
SRR – Strategic Risk Register  
ORR – Operation Risk Register  
OSC – Overview and Scrutiny Commission  
SIRO – Senior Information Risk Owner  
GDPR – General Data Protection Regulations  
DPO – Data Protection Officer  
AGS – Annual Governance Statement  
AGR – Annual Governance Review  
HoIA – Head of Internal Audit  
OFSTED – Office for Standards in Education, Children's Services and Skills  
CQC – Care Quality Commission

Appendix One: Annual Governance Statement Action Plan 2018 / 19

Ref	Annual Governance Statement Action	Responsible Executive Director	Timescales	Current Position – Action Taken / Planned
1	Monitoring the implementation of management actions identified by the DPO to further improve compliance with the General Data Protection Regulations and embed good general data protection practice	Executive Director, Core Services	30/09/2019	<p><b>July 2019:</b>                      The Council's compliance with the Data Protection Act (DPA) 2018 and the General Data Protection Regulations (GDPR) is being monitored through the Information Governance Board alongside other areas of information governance and management.</p> <p>The Council's Data Protection Officer (DPO) reports to the Board, providing assurances regarding work being undertaken to embed revised procedures and processes to ensure compliance.</p> <p>A programme of independent assurance reviews has been completed that provided the Information Governance Board with information and assurances regarding compliance.</p> <p>The Information Governance Board will oversee the implementation of the agreed management actions to ensure improved compliance and the embedding of good data protection practice.</p> <p>The DPOs annual report has been considered by SMT and the Audit Committee.</p> <p>It is important to stress that it is the responsibility of all senior managers to ensure the personal data they use in the delivery of services is maintained in compliance with the Council's policies, the DPA 2018 and GDPR.</p>

Ref	Annual Governance Statement Action	Responsible Executive Director	Timescales	Current Position – Action Taken / Planned
2	Delivery of the improvement action noted within the 2019 Peer Review findings specifically to address recommendations relating to governance and risk.	Chief Executive	31/03/2020	<p><b><u>June 2019:</u></b> The Peer Review Action plan is currently being revised in response to feedback from SMT.</p> <p>The report and revised action plan is scheduled for Cabinet approval on 24<sup>th</sup> July. This is slightly later than planned to receive input from the new Chief Executive. However, a number of actions are already underway to address the key recommendations and observations in the Peer Review eg the review of the Strategic Risk Register.</p>