Barnsley Metropolitan Borough Council

Draft Annual Governance Statement 2024/25



DRAFT ANNUAL GOVERNANCE STATEMENT 2024/25

Section		Page
1	Executive Summary	3
2	Actions from the Annual Governance Statement 2023/24	4
3	Introduction and Scope of Responsibility	4
4	The Principles of Good Governance	4
5	The Purpose of the Annual Governance Statement	5
6	Reviewing our Effectiveness and the Governance Framework	5
7	Internal Audit Opinion on Internal Control, Risk and Governance 2024/25	8
8	Data Protection Officer (DPO)	9
9	External Audit	10
10	Wholly Owned Companies	10
11	External Inspection Reports	11
12	Governance Issues Identified from the Annual Governance Review 2024/25	14
13	Governance Action Plan	16
14	Strategic Risk Register	18
15	A Forward Look	20
16	Conclusion	21
Appendix 1	Annual Governance Statement Action Plan	22

1. Executive Summary

Barnsley Metropolitan Borough Council is committed to improving the lives of all residents and creating opportunity and prosperity for local people and businesses. This commitment is set out in the council's Corporate Plan and our Barnsley 2030 vision, both of which describe how the council will meet the challenges ahead and make the most of opportunities across the borough.

To be successful the council has a solid foundation of good governance and sound financial management. Barnsley's Local Code of Corporate Governance sets out how we aspire to and ensure that we are doing the right things, in the right way and in line with our values.

Each year the Council is required to produce an Annual Governance Statement (AGS) which describes how its corporate governance arrangements set out in the Local Code have been working. This statement gives assurances on compliance for the year ending 31 March 2025 and up to the date of approval of the 2024/25 statement of accounts. The AGS shows that in many areas the Council has very effective arrangements in place. We will continue to review, streamline, and improve our processes to ensure these arrangements remain effective, now and into the future to reflect the ever-changing needs of the organisation.

As Leader and Chief Executive, we have been advised of the implications of the review of our governance arrangements by Senior Management and the Audit and Governance Committee and are satisfied that the steps outlined in this document will address the areas identified for improvement.

Signed on behalf of Barnsley Metropolitan Borough Council

Sir Stephen Houghton CBE Leader of the Council

Date: 30th May 2025

Sarah Norman Chief Executive

Date: 30th May 2025

2. Actions from the Annual Governance Statement

The 2023/24 Annual Governance Statement Action Plan included 6 areas where enhancements would improve the efficiency of systems and processes across the Council. In addition, the action plan included 4 actions carried forward from 2021/22 & 2022/23 where enhancements would improve the efficiency of systems and processes across the Council. Of these, four actions from 2023/24 have been carried forward into the 2024/25 action plan and all other actions have been closed.

Regular updates of progress against the Action Plan have been considered by the Audit and Governance Committee.

The Action Plan at Appendix 1 captures the emerging governance matters to be reviewed during 2024/25 and those included in the 2023/24 AGS that remain in progress.

The Action Plan is a dynamic document and progress against the actions will continue to be reviewed by the Audit and Governance Committee throughout the year.

3. Introduction and Scope of Responsibility

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

The Council also has a duty under the Local Government Act 1999 to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency, and effectiveness.

The Accounts and Audit Regulations 2015 require the Council to conduct a review, at least once a year, on the effectiveness of its system of internal control and prepare an Annual Governance Statement that reports on that review alongside the Statement of Accounts.

4. The Principles of Good Governance

The Council regularly reviews its governance arrangements and has adopted a Local Code of Corporate Governance, which is consistent with the seven principles of Corporate Governance as set out in the CIPFA/SOLACE Framework Delivering Good Governance in Local Government. The Council's Local Code is available here: Code of corporate governance

The seven principles within the CIPFA/SOLACE Framework Delivering Good Governance in Local Government are:

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

5. The Purpose of the Annual Governance Statement

The Annual Governance Statement considers the effectiveness of our governance arrangements throughout 2024/25. It is an objective and honest appraisal of the effectiveness of our governance framework. It highlights where we have identified any governance weaknesses but also where we want to further develop and improve them to ensure that we have as effective governance arrangements as possible that enable the organisation to deliver on its commitment to improving the lives of all residents and creating opportunity and prosperity for local people and businesses.

6. Reviewing our Effectiveness and the Governance Framework

The governance framework comprises the systems and processes, culture, and values by which the Council is enabled, directed, and controlled and through which it accounts to, engages with, and leads the community. Part of that framework involves the management of risk. No risk management process can eliminate all risks and can therefore only provide reasonable and not absolute assurance of effectiveness. The Council's risk management approach, which is now embedded across the organisation, is subject to constant review by the Senior Management Team (SMT), at directorate management teams (DMTs) and individual Business Units (BUs) throughout the year. The Audit and Governance Committee review all strategic risks twice per year, with an Executive Director(s) attending every meeting to provide a "deep dive" into 2 risks they own to give assurance that strategic risks are being reviewed and managed on a regular basis. Cabinet also reviews strategic risks on a 6 monthly basis.

To support the development of the AGS the following sections reflect the activity undertaken to review the effectiveness of governance across the Council:

- An annual self-assessment assurance process with all Business Units linked to areas of the governance framework and also by individual governance domain leads to prompt consideration of the existence and adequacy of governance arrangements during 2024/25.
- Strategic Risk Register which sets the culture and tone for the management of threats, concerns, and issues across the Council.
- The Annual Report of the Head of Corporate Assurance (Head of Internal Audit) which provides an opinion on the adequacy and effectiveness of the Council's risk management, control, and governance processes.
- The work of the designated Data Protection Officer (DPO).
- The work of the Audit and Governance Committee which includes responsibility for monitoring the development and operation of corporate governance in the Council (the Audit and Governance Committee Annual Report provides further detail of the work of the committee during 2024/25).
- The Council's internal management processes, such as performance monitoring and reporting; the staff performance and development framework; employee awareness of corporate policies; monitoring of policies such as the corporate complaints and health and safety policies and budget management systems.
- The report of the Council's External Auditor
- The consideration of any significant matters arising in the year, which are discussed and monitored by various Committees.
- Recommendations from external review agencies and inspectorates

Specific governance assurance statements are provided from the following statutory officers.

a) Head of Paid Service

As Chief Executive and the Head of Paid Service, I am responsible for the overall corporate and operational management of the council.

As I look back on 2024/25, I am pleased that the council has continued to serve its residents well and remains a high performing, ambitious council. Some top achievements include our recent LGA Corporate Peer Challenge, which noted that Barnsley is a high performing council, our C1 rating for Housing Inspection, our Ofsted Outstanding rating for our Adult Education Service, and external recognition at awards such as an LGC Award for our 'How's Thi' Ticker' campaign.

Despite the challenging time for local government, we continue to be bold, brave and innovative and to deliver excellent services across the borough. Our staff work hard alongside our key partners to make Barnsley the Place of Possibilities and to deliver our ambitions set out in our Barnsley 2030 vision.

We have seen some additional pressures in 2024/25, for example the significant pressures in Children's Social Care, impacts of the increasing in National Living Wage and rising Employer National Insurance Contributions, which have required effective financial management to ensure that we have a balanced budget.

Whilst there remain challenges in the local government sector, this year we received some additional government funding through the Recovery Grant for councils with high levels of deprivation, which has reduced some of our future financial pressures and this does mean that we have some extra money to pilot investment in key areas, such as our young people and our communities. We have also continued to deliver transformation and savings across areas of the council and significant investment has been made into our digital transformation processes.

I remain satisfied that whilst our governance arrangements remain strong, we are never complacent, and we regularly revisit our processes to reflect the ever-changing needs of the organisation. More specifically, the Strategic Risk Register continues to provide a focused and strategic approach which further supports our focus on maintaining efficient and effective corporate governance.

As a council we are outward looking and we have continued to make excellent progress with our partners in our shared vision for 2030 to make Barnsley the Place of Possibilities, a framework which is also reflected in our recently Council Plan (2024-2027), which was refreshed this year.

I support the areas for improvement presented in this Annual Governance Statement and look forward to another successful year ahead.

b) Section 151 Officer

As the Council's designated S151 Officer, I am responsible for the Council's financial governance, risk and control frameworks which ensure that the Council's financial decision-making is both lawful and prudent. I am also responsible, in accordance with the statutory requirements set out in the Local Government Act 1972, for the proper administration of the Council's financial affairs.

I am satisfied that the Council's arrangements are robust in all regards and more than meet the minimum thresholds set out under statute. My view is corroborated from several independent sources including the AGS review process which has again identified financial management as an area of strength, from the recent Corporate Peer Challenge which highlighted the Council's financial grip as a key enabler, and the External Auditor's continued positive feedback on the Authority's arrangements for securing Value for Money received in January of this year.

That said, along with the rest of the sector the Council continues to experience financial challenges as evidenced through, for the third year in a row, a budget overspend in 2024/25. This is not sustainable and combined with the uncertainty surrounding the forthcoming Spending Review, Local Government Finance & other sectoral reforms, the Council will need to maintain its robust financial management and strategic planning aligned to its MTFS to ensure its ongoing financial sustainability.

c) Monitoring Officer

As the Service Director for Law, Democratic and Member Services and the Monitoring Officer, I am responsible for ensuring both elected Members and Officers uphold high standards of behaviour and conduct in adherence of the law, good governance and high standards in public life. The need to maintain absolute transparency and confidence in our governance arrangements was and remains critical to maintaining public support and confidence.

The areas of improvement set out in this Annual Governance Statement are noted and elected Members and Officers of the Council will work together to ensure we build on the progress made to date. Significant work has been undertaken drawing in expertise from within the Law & Democratic and Member Services directorate with a view to ensuring that good governance is embedded in day-to-day operational practice. A check and challenge approach with awareness of good governance has ensured that officers develop a more insightful working practice. I would like to take the opportunity to thank members of our Audit and Governance Committee in the way they have again carried out their role in such demanding circumstances and continued to provide the rigour expected when seeking assurances on how the Council conducts its governance and control systems and processes. The role of Overview and Scrutiny has further supported this direction of travel with significant areas of review having been undertaken and there being an increased profile of scrutiny and the benefits of, amongst officers within the council.

7. Corporate Assurance (Internal Audit) and the Opinion on Internal Control, Risk and Governance 2024/25

In accordance with the Accounts and Audit Regulations 2015 and the Public Sector Internal Auditing Standards (PSIAS), the Head of Corporate Assurance (Head of Internal Audit) is required to provide independent assurance and an annual opinion on the adequacy and effectiveness of the council's internal control, governance, and risk management arrangements. This is achieved through the delivery of an annual programme of risk-based reviews, including counter fraud and investigation activity. Management actions arising from the assurance work are agreed with the aim of improving the internal control, governance, and risk management arrangements of the council.

The Interim Annual Head of Corporate Assurance (Internal Audit) Opinion Report has been considered by the Council's Audit and Governance Committee. Based on the work completed to date and taking into account other sources of assurance, the Head of Corporate Assurance (Internal Audit) has provided an overall reasonable (positive) assurance opinion. Below is an extract from the Head of Corporate Assurance's (Internal Audit) Interim annual report submitted to the Audit and Governance Committee at their meeting on 28th May 2025. The full report is available via this link – Interim annual report

It should be noted that the corporate assurance planning process and in-year management of the plan involves discussions with SMT and wider senior management to ensure coverage is focussed on managing the key risks and priorities of the Council. Of particular relevance is the approach to risk management and broader governance assurance. There remains a clear culture of openness and engagement with Corporate Assurance (Internal Audit) across the Authority that facilitates the work necessary to prepare an overall assurance opinion.

8. Data Protection Officer (DPO)

In fulfilling this role, the DPO has regular meetings with officers from the Information Governance Team and the Senior Information Risk Officer (SIRO) and reports to the Information Governance Board. The DPO also undertakes specific assurance reviews to support that independent assurance.

Independent assurance activity and general oversight continue to present a positive picture overall. The remit of the Information Governance Board provides a clear focus on compliance and awareness. Responses to Freedom of Information Requests and Subject Access Requests remain generally compliant with the statutory timescales with the exception of a few very complex subject access requests which have proved challenging to meet the timescales. The arrangements, technology and capacity to respond to such complex requests is currently being considered.

Significant work continues around having good cyber and IT security resilience, with regular phishing and password cracking exercises to ensure high levels of awareness and security. Any actions identified in relation to information governance / data protection improvements are monitored by the Governance and Compliance Board and Audit and Governance Committee and discussed specifically in the Senior Management Team (SMT). One of the key areas of strategic focus for SMT is to be continuously assured that we have all reasonable and practical arrangements in place to protect against cyber threats and IT security weaknesses.

Having effective data protection and information governance arrangements in place is a key priority for the Council. As such, the DPO and the Corporate Assurance (Internal Audit) Team will continue to devote time and resource to provide assurances to senior management and monitor management's response to any improvements identified through further independent reviews and assurance on a rolling basis. These will be reported to the Information Governance Board and the Audit and Governance Committee.

9. External Audit

The Council's appointed external auditor is Grant Thornton LLP. They are required each year to carry out a statutory audit of the Council's financial statements and give a narrative commentary on the Council's value for money arrangements. As well as having regular meetings with the Director of Finance and Chief Executive, Grant Thornton attend each Audit and Governance Committee to provide updates on the progress of their work, to answer questions from the Committee and importantly witness the operation of the Committee.

The Auditor's ISA260 Report providing their opinion on the accounts was presented to the Audit and Governance Committee on [to be inserted] and to full Council on [to be inserted]. The ISA260 report covering the results of the audit of the council's financial statements is available via this link [to be inserted].

Of particular note is that the External Auditors plan to give a [to be inserted] opinion on the Authority's statutory accounts.

10. Wholly Owned Companies

The Council includes in its Annual Accounts three wholly owned companies which form part of the group accounts; Berneslai Homes (Arm's Length Management Organisation), Oakwell Community Assets Limited and Penistone Grammar School Foundation (Charitable Trust).

a) Berneslai Homes

Berneslai Homes was established as an Arm's Length Management Organisation (ALMO) in 2002, responsible for managing around 18,000 homes on behalf of Barnsley Council. It is a Company Limited by Guarantee, overseen by a Board of Directors. The implementation of policies and the day to day running of the organisation is delegated to the Company's Chief Executive, Board and Executive Management Team.

The Council currently receives assurance from Berneslai Homes in several ways as part of the Service Agreement 2021-2031. Berneslai Homes' performance is monitored against an agreed suite of KPI's and wider assurance framework (dashboards for Compliance, Complaints and ASB) on a quarterly basis. The performance reports are presented to the Council's SMT and Cabinet as part of the year-end performance reporting and from 2024/25 the performance information provided to Cabinet includes the full TSM suite and Action Plan, as well as year-end performance and outturn against the annual business plan. These documents align to the Berneslai Homes Strategic Plan 2021-2031 which in turn aligns with the BMBC Corporate Plan and 2030 Vision.

The Council's Clienting team has a robust governance and assurance framework in place which is regularly reviewed. This was last completed in 2024 by Campbell Tickell. These arrangements are under regular review and form part of the council's assurance processes for the effective management of major boards and partnerships. The Audit and Governance Committee (and Cabinet) receives regular assurance reports regarding the Council's role as landlord. During 2024/25, the Council was inspected by the Regulator of Social Housing, receiving a C1 judgement. This means that the RSH has assessed that the Council (working with our managing agent, Berneslai Homes) is meeting the requirements of the Consumer Standards. A Consumer Regulation Board has been established to ensure that the Council continues to meet its regulatory requirements and to undertake an annual self-assessment against code.

b) Oakwell Community Assets Limited (OCAL)

Oakwell Community Assets Limited (OCAL) is a property holding company that was established in 2003 by Barnsley Council and Mr Patrick Cryne. The company owns Oakwell Football Stadium and the land surrounding the stadium. The Council acquired Mr Cryne's shareholdings in OCAL during 2023 and is now sole owner of OCAL.

c) Penistone Grammar School Foundation (Charitable Trust)

This charitable foundation is registered with the Charities Commission (Charity Number 529458). The purpose of the Charitable Trust is to further the education outcomes of the pupils at Penistone Grammer (Foundation) School (the 'School) – they are both separate legal entities. The Council is not the corporate trustee of the Charitable Trust. The Board of Trustees have the powers to disburse the income and award grants to pupils and agreed projects at the school. The accounts and governance arrangements can be found on the Charity Commission website. The Council includes details of the Foundation Schools finances in its group accounts.

11. External Inspection and other Assurance Reports

The Council is subject to various external inspections and proactively invites support and challenge from regulators and peer reviews. The reports from these bodies provide valuable information and assurance to enable and ensure the maintenance of effective governance arrangements. The bodies that have provided reports and information are listed below.

a) Local Government and Social Care Ombudsman and Housing Ombudsman – Referrals Made in 2024/25

During 2024-25 there were 25 contacts registered by the Customer Resolution Team from the Local Government and Social Care Ombudsman (LGSCO). At the time of reporting, the position and outcomes of these contacts are as outlined below:

Local Government and Social Care Ombudsman outcomes:

- 3 faults with injustice
- 2 no fault and no injustice
- 10 that have either been determined to be discontinued investigations, not enough evidence of fault, no further action, no significant injustice caused, out of time or other
- 3 referred back to the council to pursue.
- 4 outside the jurisdiction of the LGSCO

• 3 were pending a decision.

Contacts received from the LGSCO are managed and facilitated by the Council's Customer Resolution Team. Where the council is found to be at fault actions are taken by the relevant services to comply with the recommendations issued by the LGSCO.

Housing Ombudsman Outcomes (HOS):

The HOS Complaint Handling Code became statutory on 1st April 2024, meaning landlords are obliged by law to follow its requirements.

The Council was contacted by the Housing Ombudsman Service (HOS) on 28 occasions during 2024/25, which is a 65% increase compared to the previous year. Of these, 10 of the contacts did not escalate to a full investigation and were handled in line with the complaints policy. The Council received 18 requests for evidence for cases that the HOS had accepted for full investigation and all enquiry contacts and evidence requests were compiled within the timescales provided by the HOS.

The Council received determination outcomes for 6 cases following HOS investigation, some of which relate to cases provided to them during 2023/24, with a total of 13 determinations (multiple determinations can be received for each case). The HOS determination outcomes were as follows:

Severe Maladministration	0
Maladministration	6
Partial Maladministration	0
Service Failure	3
Reasonable Redress	3
No Maladministration	1
Out of Jurisdiction	0
Withdrawn by the resident	0

The HOS made orders on 4 of the cases and the Council has complied with all orders and responded to the HOS with evidence of compliance within timescales given.

The Council completed and published its <u>self-assessment</u> against the HOS Complaint Handling Code and scheme. This assessment was considered by Cabinet and the Member Responsible for Complaints published their <u>response</u> in line with the code. The self-assessment was published and submitted to the HOS by the statutory deadline. The HOS confirmed its receipt and that they were satisfied with the assessment.

The Housing Ombudsman Landlord report 2023/2024 provided a summary of our performance compared to national performance. The overall finding was that we performed well, when compared to similar landlords by size and type. The 2024/25 HOS Landlord report is scheduled for publication in July 2025.

The Council continues to see an increase in the volume of complaints from social housing tenants nationally, both at landlord and HOS level. In 2024/2025, the Council responded to 1,177 Stage 1 complaints (70% increase from the previous year) and 275 Stage 2 complaints (108% increase). This was expected to continue due to the governments on-going national advertising campaign 'Make Things Right', the significant focus for regulatory compliance with 3 of the 22 Tenant Satisfaction Measures relating to complaint handling and the ongoing pressures on the HRA resulting in longer wait times for repairs. In 2024/25, despite the challenges of responding to an increased number of complaints, the council performed well against the 3-complaint handling TSMs.

- 93% Stage 1 investigated in time
- 98% Stage 2 investigated in time
- 44% Tenant Satisfaction with complaint handling (Top quartile compared to peer group)

Additional temporary resources have been necessary to manage the increased complaints and ensure the Council actively learns from complaints.

b) Local Government and Social Care Ombudsman - Annual Review Letter 2024/25

The Annual Review Letter will be published in July 2025.

c) Children's Services - Ofsted Inspections

Details of all inspection reports can be found on the Ofsted website – www.ofsted.gov.uk.

d) Care Quality Commission (CQC)

Barnsley Metropolitan Borough Council with partners commissioned a regional Adult Social Care Preparation for Assurance Peer Challenge which was concluded in November 2024, a themed action plan was developed and action owners assigned with deadlines aligned, this remains in progress. Full inspection reports can be found on the CQC website – www.cqc.org.uk

e) Joint Area SEND Inspection (Ofsted and CQC)

The Council along with the Integrated Care Board and education representation through the Barnsley Schools Alliance, have met with the DfE and NHS England throughout 2024-25 to report on progress against Barnsley's SEND Strategy and Local Area Inclusion Plan. The SEND Oversight Board has transitioned into the SEND and Alternative Provision Local Area Partnership which oversees the Local Area arrangements for children and young people with SEND. The Local Area Partnership, Council Cabinet and Council Audit and Governance Committee receives quarterly performance and finance reports. The Council formally reports to the DfE on the Safety Valve programme and this forms part of the quarterly reporting framework outlined. The Safety Valve Agreement sets out that the DfE will address the cumulative deficit in the Dedicated Schools Grant in 2026/27 on the condition that the Council delivers its DSG Management Action Plan and annual savings targets. All payments have been paid to date in accordance with the agreement.

The Local Area is due a SEND inspection in 2025 which will consider the progress against the Written Statement of Action following the last inspection in 2021 as part of the inspection framework. The purpose of inspection is to:

- provide an independent, external evaluation of the effectiveness of the local area partnership's arrangements for children and young people with SEND
- where appropriate, recommend what the local area partnership should do to improve the arrangements

f) Information Commissioner's Office (ICO)

Statistics for this section will be available in July 2025.

g) Health and Safety Executive

The Council prepares an Annual Health and Safety Report which is considered by both Cabinet and the Audit & Governance Committee. The Annual Report will be published later in the year. In addition, the Council have had two interactions with HSE in 24/25 both resulting in no action:

- 1. Reactive inspection of management arrangements for controlling hand/arm vibration following diagnosis of a reportable disease
- 2. Proactive inspection (as part of a national programme of intervention local authorities) on our duty to manage asbestos in premises

12. Governance Issues Identified from the Annual Governance Review

The annual governance review process was carried out through self-assessments undertaken by each Business Unit and also individual governance domain leads. This ensured that the entire organisation considered its understanding and compliance with governance processes, it also provided scope for Business Units and governance domain leads to raise any concerns about wider corporate governance arrangements. The Self-Assessment Questionnaires have been analysed and areas identified from the review process were:

Areas of Particular Strength

- Financial Management high levels of understanding and compliance.
- HR recruitment processes and HR processes generally high levels of understanding across Business Units.
- Equalities and Inclusion good levels of understanding and awareness.
- Health & Safety good levels of understanding, audits undertaken in 2024/25 to measure compliance.
- Legislative Compliance good understanding of how and when to access legal advice.
- Decision Making good compliance with decision making and reporting processes.
- Partnership, Relationship and Collaborative Governance effective arrangements in place, positive reporting from external inspections.
- Procurement Compliance— updated framework rolled out and training programme developed.

Areas of continuing improvement and focus

- Business Continuity and Emergency Resilience further testing of BCPs required.
- Ethical Standards and Conduct Management to mandate anti-fraud training and monitor compliance with code of conduct.
- Finance to devolve budget management and embed the accountability and competency (finance) framework.
- Mandatory Training Programme- refresh the programme to ensure alignment to roles and then monitor uptake.
- Information Governance to review and update the information governance framework, including clarity on roles and responsibilities.
- Performance Management and Data Quality to further develop and embed the data management framework.
- Project and Programme Management –. to further develop and embed a project management framework.
- Contract Management to implement and embed the contract management toolkit and also training programme.

Efficiency / Effectiveness improvements and Future Enhancements (Actions)

In addition to the identification of areas of the Council's governance arrangements where a specific improvement is identified, the annual review process also seeks to identify where efficiencies and enhancements can be made to make the governance framework even more effective. The sessions with Business Units sought to highlight where there may be scope to further review a corporate process, regardless of any compliance issues but to improve and enhance the engagement of Business Units in the general drive to continuously strengthen our governance arrangements whilst ensuring they are efficient and as easy to comply with as possible. The following areas were highlighted:

- Strategic to implement and embed the Enabling Barnsley Strategy in 2024/25.
- Finance to implement and embed an Accountability and Competency Framework (Finance) in 2024/25.
- Compliance and Accountability develop and pilot a suite of compliance performance indicators to measure the health across the Council
 during 2024/25.

The actions necessary to address the areas for continuing development and improvement have been captured in a high-level action plan (Appendix 1) which will be monitored during the year by the Audit and Governance Committee.

Corporate Assurance have undertaken a further independent review of the annual governance review process and preparation of the AGS. The outcome of this independent review provided for a reasonable (positive) assurance opinion.

13. Governance Action Plan

The Governance Action Plan (Appendix 1) comprises the actions carried forward from the 2023/24 AGS Action Plans and the issues arising from the 2024/25 process. The Audit and Governance Committee will receive regular update reports on the action plan and assurances that actions are being progressed.

Each identified area for further improvement is linked to one of the principles within the CIPFA guidance (see Section 4)

Improvement Enhancements

- Accountability and Competency Framework (Finance) CIPFA/SOLACE Principle A Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law
 - Implement and embed the Strategy throughout the Council.

- Accountability and Compliance CIPFA/SOLACE Principle A Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law
 - Develop and pilot a suite of compliance performance indicators to measure the health across the Council.
- Business Continuity and Emergency Resilience CIPFA/SOLACE Principle D Determining the interventions necessary to
 optimise the achievement of the intended outcomes.
 - Embed and test the revised BCP templates completed by BUs (including Cyber-attacks following Operation Norbert).
- Review of Council's Constitution CIPFA/SOLACE Principle A Behaving with integrity, demonstrating strong commitment to
 ethical values, and respecting the rule of law
 - To undertake a review and update the Council's Constitution, in consultation with Elected Members.
- Information Systems, Governance and Compliance CIPFA/SOLACE Principle D Determining the interventions necessary to optimise the achievement of the intended outcomes.
 - Information Governance Framework is to be developed and implemented during 2025/26.
- **Contract Management -** CIPFA/SOLACE Principle A Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law
 - To implement a contract management toolkit and develop the training package.
- **Workforce Planning -** Principle A Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law
 - To develop a council wide workforce plan.
- **Corporate Anti-Fraud -** Principle A Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law
 - Corporate Anti-Fraud training to be included in the mandatory training programme.
- Risk Management Principle F Managing risks and performance through robust internal control and strong public financial management.
 - Risk Management training to be included in the mandatory training programme.

- **Data Management and Quality** CIPFA/SOLACE Principle D Determining the interventions necessary to optimise the achievement of the intended outcomes.
 - To further develop and embed the data management framework and monitor compliance.
- Enabling Barnsley Strategy CIPFA/SOLACE Principle A Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law
 - To implement and embed the strategy during 2025/26 and develop a performance management framework to measure its effectiveness.
- **Project and Programme Management** CIPFA/SOLACE Principle D Determining the interventions necessary to optimise the achievement of the intended outcomes.
 - To further develop and embed the project/programme management framework and methodologies

14. Strategic Risk Register

A robust and dynamic Strategic Risk Register sets the culture and tone for the management of threats, concerns and the assurances required across the Council. The engagement of the Senior Management Team (SMT) in the risk management process through their ownership and review of strategic risks on a quarterly basis demonstrates a strong commitment to lead and champion risk management "from the top," and further reinforces the continuing development of a risk management culture across the Council.

The risks below are owned by SMT, with the management of individual risks being allocated to a member of SMT as the 'risk manager,' and any necessary actions to provide assurances allocated to Action Owners, being those senior managers best placed to take responsibility to drive the implementation of the identified actions. The current strategic risks are:

- Threat of cyber-attack increased threats of cyber-attacks against the Council
- Financial sustainability there are several significant emerging risks facing the Council (some of which are fluid and yet to be quantified) that if unchecked could pose a major threat to the Councils' ongoing financial sustainability.
- Zero carbon and environmental commitments there are significant financial, reputational, business and community risks associated with work to ensure the Council achieves its ambition to be zero carbon by 2045.

- Potential for a safeguarding failure in children's services maintain a focus to ensure all reasonable measures are in place and are effective.
- Meeting Care Act 2014 responsibilities the combined impact of the pandemic, reform programme requirements and the cost-of-living crisis could cause challenges for the Council in meeting the statutory requirements of the Care Act.
- Health protection emergency e.g., Covid 19 Pandemic ensuring robust well understood arrangements are in place to deal with any health protection emergency.
- *Inclusive economy* impact of Covid, accelerated downturn on the local economy, increasing inflation and impact of cost-of-living crisis adding to pressures on the local economy.
- Potential for a safeguarding failure in Adult Social Care maintain a focus to ensure all reasonable measures are in place and are effective.
- Organisational resilience need to understand issues around leadership, general workforce capacity and welfare and recognise that organisational resilience is not as high as it was pre pandemic need to find ways to recover post pandemic.
- *Emergency resilience* need to ensure the Council has robust mechanisms to prepare for, respond to and recover from civil emergencies and business interruptions.
- SEND new controls in place and an Oversight Board established, continue to monitor delivery, cost effectiveness and satisfaction rates.
- Educational outcomes progress continue to monitor with particular focus on improving outcomes for vulnerable groups and boys.
- Community resilience continue to monitor risk of social unrest and disorder resulting from increased strain and social tension which may be exacerbated by the cost of living, misinformation/disinformation.
- Safety and Quality Programme Failing to improve the overall safety and quality of the domestic waste and recycling collection service.

SMT is responsible for ensuring that the Strategic Risk Register continues to express those high-level concerns, issues and areas of strategic focus which have a significant bearing upon the overall achievement of corporate objectives and that they are being appropriately managed.

To provide assurances that the Strategic Risk Register is being appropriately managed, the Audit and Governance Committee receive regular updates including presentations from the relevant Executive Director. These presentations provide the Committee with a deep dive review into the strategic risk and an opportunity to obtain an assurance from the Executive Director about the effectiveness of the mitigations and that the action plans in place to address the risk are being implemented. Cabinet also receives six-monthly updates.

15. A Forward Look

Although an annual governance statement is intended to provide a reflection of the financial year just gone, it is also important to highlight and acknowledge that where the Council has challenges, or is implementing major changes, assurance can be provided that due regard is given to maintaining and using effective governance to ensure the achievement of objectives.

The Council continues to work with other organisations in many ways. The need to ensure all such relationships, whether they are formal contracts, collaborations or partnerships are effectively governed is ever more important. Processes exist to obtain assurance from the major Boards about their governance arrangements. Such assurances will continue to be reported to SMT and the Audit and Governance Committee.

The national and indeed international landscape continues to provide further challenges to the Council in terms of the uncertainty of future funding from the Government (forthcoming Spending Review, Local Government Finance & other sectoral reforms), inflationary pressures, continued significant increase in demand for services (particularly Social Care), and the continuing difficulty in the recruitment and retention of staff in certain professional disciplines (e.g. social care), all of which present further pressure on the council's ability to continue to work towards Barnsley 2030 and to achieve the outcome and priorities set out in the Enabling Barnsley Strategy.

The Council faces financial pressures which are predominately as a result of the increases in funding not keeping pace with the significant rise in pressure and yet there will inevitably be many more uncertainties that we will need to work with over the coming year and beyond. What is important therefore is the maintenance and continual review of our governance arrangements that will ensure we are in the best possible position to respond positively and responsibly to these pressures and challenges. To that end the Governance and Compliance Board is working to review aspects of the council's governance arrangements to ensure they are as efficient and compliant as possible.

Of particular focus is to ensure our governance arrangements support and facilitate the journey towards Barnsley 2030 and the successful implementation of the Enabling Barnsley Strategy, to realise efficiencies in how we provide services and to support the decisions required and taken in relation to the funding pressures, how we manage the budget constraints alongside increasing demands for services and how we meet our long-term environmental obligations. An Accountability and Competency Framework (Finance) and a set of Corporate Compliance Health Measures have been developed for implementation and embedment during 2025/26 to further enhance our governance arrangements.

16. Conclusion

This AGS demonstrates that the systems and processes the Council employs provide a comprehensive framework upon which to give assurance to the Council and residents of the Borough that its governance arrangements were in place and effective overall during 2024/25 and into 2025/26.

The governance arrangements outlined in the AGS have been applied throughout the year and up to the date of the approval of the Annual Accounts. The annual review has provided an effective process to identify any governance issues and to put in place the necessary improvement actions. The annual review process and action plan demonstrates the culture of the Council to robustly challenge itself and constantly seek out and demonstrate opportunities to improve.

Along with every organisation in the country, the Council continues to respond to the considerable inflationary and general economic challenges. It is recognised that the Council will have significant issues to consider and address which will have longer-term implications for how services are delivered and the financial resources available to support that service delivery.

As highlighted in the External Auditor's Narrative VFM Report (January 2025), we remain committed to seek continuous improvement and demonstrate the best use of resources and value for money.

The annual governance review has identified, overall, that the Council continues to have an effective framework of governance. The challenging approach we take in the preparation of the AGS has identified areas where we want to improve further with the necessary actions being agreed. The implementation of AGS action plan will again be closely monitored by the Audit and Governance Committee.

Appendix 1 Annual Governance Statement Action Plan - Areas where Enhancements would improve the Efficiency of Systems and Processes across the Council.

AGS	Area Identified / Action	Lead Officer / Action Officer	Timescales
2023/24	Accountability and Competency Framework (Finance)	Director of Finance / Head of Corporate	30 th
	Implement and embed the Strategy throughout the Council.	Finance and Business Partnering	November 2025
b/fwd	Current Position:		2025
	The accountability and competency framework is scheduled at Audit and Governance committee in May 2025. A training programme is being developed and will be included in the mandatory training programme to be launched in November 2025.		
2023/24	Accountability and Compliance	Director of Finance / Head of Corporate	31 st July
b/fwd	 Develop and pilot corporate compliance performance indicators to measure the Council's health. 	Assurance	2025
	Current Position:		
	Met with all of the Governance Domain Leads and have a set of draft measures that are to be piloted. Working with Business Intelligence to develop a report/ dashboard to enable the measures to be reported into and monitored/ challenged by the Governance & Compliance Board.		
2023/24	Business Continuity and Emergency Resilience	Head of Corporate Health, Safety and	31 st
b/fwd	 Embed and test the revised BCP templates completed by BUs (including Cyber-attacks following Operation Norbert). 	Emergency Resilience	December 2025
	Current Position:		
	Strategic discussion exercise for BLT is in development to agree the corporate business continuity priorities and planning assumptions (for loss of/reductions in available people, premises, utilities, IT systems,		

AGS	Area Identified / Action	Lead Officer / Action Officer	Timescales
	and fuel) – the planning meetings have started and key services are working on the content. This will then be followed by exercises with individual Business Units to test their plans against the corporate priorities and planning assumptions during the remainder of 2025.		
2023/24	Review of Council's Constitution	Head of Registration and Elections	31st March
b/fwd	 To undertake a review and update the Council's Constitution, in consultation with Elected Members. Plan developed and briefing Audit and Governance Committee throughout 2024/25. 		2026
	Current Position:		
	A review of the constitution is to be undertaken, and actions planned to facilitate this in discussion with the Chief Executive.		
2024/25	Information Systems, Governance and Compliance	Service Director Customer Information and	31 st March
202 1/20	 Information Governance Framework is to be developed and implemented during 2025/26 to clearly define roles and responsibilities this will include the development of a refreshed training programme. 	Digital Services	2026
2024/25	Contract Management	Director of Finance/ Head of Strategic	31 st March
	 To implement a contract management toolkit and develop the training package to inform officers of contract management requirements including roles, responsibilities and accountability. 	Purchasing, Procurement and Contract Management	2026
2024/25	Workforce Planning	Service Director Business Intelligence,	31 st March
	To develop a council wide workforce plan.	HR and Communications	2026

AGS	Area Identified / Action	Lead Officer / Action Officer	Timescales
2024/25	Corporate Anti-Fraud Corporate Anti-Fraud training to be included in the mandatory training programme, to be rolled out November 2025	Head of Corporate Assurance	30 th November 2025
2024/25	Risk Management Risk Management training to be included in the mandatory training programme, to be rolled out November 2025	Head of Corporate Assurance	30 th November 2025
2024/25	Data Management and Quality To further develop and embed the data management framework and then monitor compliance.	Service Director Business Intelligence, HR and Communications	31st March 2026
2024/25	To implement and embed the strategy during 2025/26 and develop a performance management framework to measure it's effectiveness.	Executive Director Core Services	31 st March 2026
2024/25	Project/Programme Management To further develop and embed the project/programme management framework and methodologies and to develop performance management framework to measure the successful outcome and benefits of projects.	Service Director Customer Information and Digital Services	31st March 2026