



AUDIT, CRIME & DISORDER AND SCRUTINY COMMITTEE

Thursday 22 November 2018 at 7.30 pm

Committee Room 1 - Epsom Town Hall

The members listed below are summoned to attend the Audit, Crime & Disorder and Scrutiny Committee meeting, on the day and at the time and place stated, to consider the business set out in this agenda.

Councillor David Reeve (Chairman)
Councillor Steve Bridger (Vice-
Chairman)
Councillor Michael Arthur MBE
Councillor Alex Clarke
Councillor Alex Coley

Councillor George Crawford
Councillor Rob Geleit
Councillor Humphrey Reynolds
Councillor Jean Steer MBE
Councillor Mike Teasdale

Yours sincerely

Chief Executive

For further information, please contact Tim Richardson, 01372 732122 or trichardson@epsom-ewell.gov.uk

AGENDA

1. QUESTION TIME

To take any questions from members of the Public.

Please note: Members of the Public are requested to inform the Democratic Services Officer before the meeting begins if they wish to ask a verbal question to the Committee.

2. DECLARATIONS OF INTEREST

Members are asked to declare the existence and nature of any Disclosable Pecuniary Interests in respect of any item of business to be considered at the meeting.

3. MINUTES OF THE PREVIOUS MEETING (Pages 3 - 10)

The Committee is asked to confirm as a true record the Minutes of the Meeting of the Committee held on 19 June 2018 (attached) and to authorise the Chairman to sign them.

4. INTERNAL AUDIT MONITORING REPORT (Pages 11 - 68)

This report summarises progress against the audit plan for 2018/19 and provides details on the one outstanding audit from 2017/18.

5. ANNUAL GOVERNANCE STATEMENT AND EXTERNAL AUDIT FINDINGS
(Pages 69 - 76)

This report sets out progress on the actions contained in the Council's Annual Governance Statement and in the Annual Audit Findings issued by the External Auditor following the audit of the financial statements.

6. RISK MANAGEMENT FRAMEWORK ANNUAL REPORT (Pages 77 - 84)

This report enables the Committee to meet its responsibilities for monitoring the development of the Council's risk management arrangements.

7. CORPORATE PLAN: PERFORMANCE REPORT ONE 2018 TO 2019 (Pages 85 - 134)

This report provides an update on progress made against the Key Priority Targets 2018/19.

8. WORK PROGRAMME 2018/19 (Pages 135 - 140)

This report updates the Committee on its work programme 2018/19.

**Minutes of the Meeting of the AUDIT, CRIME & DISORDER AND SCRUTINY
COMMITTEE held on 19 June 2018**

PRESENT -

Councillor David Reeve (Chairman); Councillor Steve Bridger (Vice-Chairman);
Councillors Michael Arthur MBE, Alex Clarke, Alex Coley, George Crawford,
Hannah Dalton (as nominated substitute for Councillor Mike Teasdale), Rob Geleit,
Humphrey Reynolds and Jean Steer MBE

In Attendance: Joe Easterbrook (Borough Inspector) (Surrey Police) (Items 1-4 only)
and Lorna Raynes (Client Manager) (RSM Risk Assurance (Internal Auditor)) (Items 1-6
only)

Absent: Councillor Mike Teasdale

Officers present: Damian Roberts (Chief Operating Officer), Amardip Healy (Chief Legal
Officer) (Items 1-9 only), Gillian McTaggart (Head of Corporate Governance), Emma
Jeffery (Contact Centre Manager) (Items 1-7 only), Margaret Jones (Business
Assurance Manager), Oliver Nelson (Environmental Health Team Leader) (Items 1-4
only) and Tim Richardson (Democratic Services Officer)

1 QUESTION TIME

No questions were asked or had been submitted by members of the public.

2 DECLARATIONS OF INTEREST

No declarations of interest were made by Councillors in items on the agenda for
this meeting.

3 MINUTES OF THE PREVIOUS MEETING

The Minutes of the meeting of the Committee held on 20 March 2018 were
agreed as a true record and signed by the Chairman.

4 COMMUNITY SAFETY PARTNERSHIP - END OF YEAR REPORT

The Committee received a report of the work of the Community Safety
Partnership (CSP) for 2017-18. The Committee was requested to scrutinise the
work of the CSP in compliance with the requirement placed on the Council by the
Police and Justice Act 2006.

The Committee noted that the Borough was covered by the East Surrey CSP, which also included the Boroughs and Districts of Reigate and Banstead, Mole Valley and Tandridge. The current priorities of the CSP were antisocial behaviour, domestic abuse and rural crime. The Committee also noted that the Council intended to recruit to the role of Community Safety Officer, following the post becoming vacant earlier in 2018.

Inspector Joe Easterbrook (Surrey Police) was in attendance at the meeting and provided the Committee with a verbal presentation of the work undertaken by Surrey Police within the Borough of Epsom and Ewell during 2017-18. This included information regarding: performance indicators; projects and operations such as domestic abuse PCSO intervention, targeted antisocial behaviour and thefts from motor vehicles; unauthorised traveller encampments; Community Harm and Risk Management Meetings (CHaRMM) and Joint Action Groups (JAG).

Following consideration, the Committee:

- (1) Noted the work of the CSP for 2017-18.

5 INTERNAL AUDIT MONITORING REPORT

The Committee received a report summarising progress against the audit plan for 2017/18.

Three audits had been finalised since the Committee's last meeting. These were: Private Sector Leasing, Data Protection/GDPR and Commercial Property Acquisitions supplementary report. One audit (Cyber security and IT General Controls) remained outstanding as it had not yet been finalised. This would be included within the Internal Audit monitoring report to be presented to the Committee in November 2018, and the Committee was informed that it was anticipated to include ten medium and two low priority recommendations.

Following consideration, the Committee:

- (1) Agreed to receive the internal audit progress report for 2017/18.

6 INTERNAL AUDIT ASSURANCE REPORT 2017/18

The Committee received a report advising it of the Council's Internal Audit assurance level for 2017/18.

The Head of Internal Audit's opinion was detailed in Annex 1 to the report. This stated that the Council had an adequate and effective framework for risk management, governance and internal control. However, the auditor's work had identified some further enhancements to the framework of risk management, governance and internal control to ensure that it would remain adequate and effective.

The Committee noted that the internal auditor had not issued any reports relating to the Council in 2017/18 with either “no assurance” or “partial assurance”. It was also noted that the auditors’ opinion would not be changed once the one remaining audit for 2017/18 (Cyber security and IT General Controls) had been finalised.

The following matters were considered:

- a) **Audit of planning applications income.** Following a question from a member of the Committee, the Head of Corporate Governance informed the meeting that this audit had examined the processes followed and security of payments for planning applications submitted to the Council. It had not been a review of the level of income generated by the service.
- b) **Management response within 5 working days of draft report.** The Committee noted that a low percentage of draft audit reports had received a management response from officers within the five working day target. Officers would seek to improve upon this in future.

Following consideration, the Committee:

- (1) Agreed to receive the Internal Audit Annual Report for the year ended 31 March 2018 and the Review of Performance of Internal Audit by the Chief Finance Officer.

7 CUSTOMER COMPLAINTS ANNUAL REPORT 17/18

The Committee received a report summarising the volumes and reasons for stage 1, 2 and 3 complaints received by the Council between 1 April 2017 and 31 March 2018.

The Committee was informed that a complaint was considered to be any expression of dissatisfaction received by the Council about the level of service provided to a customer, a service the Council had said it would provide but didn’t, or a service the Council had said that it wouldn’t provide but did. The Council had received 1,103 complaints during 2017/18, and 97% of these had been resolved at stage 1. A changed complaints process had been introduced in January 2018, reducing the total number of stages from three to two.

The following matters were considered:

- a) **Automated response to internet-submitted complaints.** Following a query from members of the Committee, it was noted that an automated response was sent to all internet submitted complaints sent to the Council. Two members of the Committee reported that they had not received automated responses to recent communications, and it was noted that officers would look into the matter.
- b) **Recent service issues for the Contact Centre.** The Chief Operating Officer informed the Committee that staff sickness and turnover had both

been factors in the service issues recently affecting the Council's Contact Centre. The issues were being addressed.

Following consideration, the Committee:

- (1) Considered and noted the findings of the annual report of customer complaints, which detailed complaints received between 1 April 2017 to 31 March 2018.

8 ORDER OF BUSINESS AT THIS MEETING

The Chairman informed the Committee that the business of the meeting would be reordered, with Item 9 of the agenda (Annual report on RIPA usage & approval of Policy & Guidance on lawful surveillance) considered prior to Item 8 (Annual Governance Statement 2017/18).

9 ANNUAL REPORT ON RIPA USAGE & APPROVAL OF POLICY & GUIDANCE ON LAWFULL SURVEILLANCE

The Committee received a report detailing activities in relation to surveillance by the Council and policies under the Regulation of Investigatory Powers Act 2000 (RIPA).

The Office of the Surveillance Commissioner had inspected the Council's RIPA procedures and activity in 2017. The recommendations made by this review were incorporated into an amended Policy, and agreed by the Strategy and Resources Committee on 17 April 2018.

The Council had made no use of powers provided under RIPA during 2016-17. During 2017-18 it had made one application to undertake directed surveillance, and this had led to the conviction of a defendant for fly tipping.

Following consideration, the Committee:

- (1) Noted the annual report of the Council's use of its RIPA powers.
- (2) Approved the Council's Policy & Guidance on Lawful Surveillance for the forthcoming year, as attached at Annex 1 to the report.

10 ANNUAL GOVERNANCE STATEMENT 2017/18

The Committee received a report seeking its approval of the draft Annual Governance Statement (AGS) and arrangements made for its preparation as part of the 2017/18 financial statements.

The Committee considered the report and Draft AGS 2017/18. The following matter was considered:

- a) **Inclusion of changes to Senior Officer structure in section 6 of the AGS.** The Committee noted that section 6 of the AGS ("Significant

operational events in 2017/18”) did not detail the changes to Senior Officer structure which had been implemented during the year, such as the appointment of a new Chief Executive, Chief Operating Officer and Chief Legal Officer. The Committee considered that it was not necessary to amend the AGS to record this information, as each post had been successfully filled.

Councillor Hannah Dalton requested that it be recorded in the Minutes that it was her view that section 6 of the AGS should be amended to make reference to the changes in senior officer structure implemented during the year.

Following consideration, the Committee:

- (1) Confirmed the adequacy of the arrangements made for preparing the Annual Governance Statement.
- (2) Endorsed the 2017/18 AGS prior to it being certified by the Chief Executive and the Chairman of the Strategy & Resources Committee.
- (3) Agreed to give delegated authority to the Chief Finance Officer to make any required amendments prior to its submission with the Statement of Accounts.

11 ANNUAL REPORT ON THE USE OF DELEGATED POWERS

The Committee received a report setting out significant decisions taken by Officers in consultation with Committee Chairmen since 20 June 2017, in accordance with the Council’s Scheme of Delegation to Officers. Twenty-two delegated authority forms had been issued during the year, with 19 decisions taken as a result. The remaining 3 forms had been cancelled.

Following consideration, the Committee:

- (1) Noted that 19 significant decisions taken by Officers in consultation with Chairmen had been recorded using the delegated authority proforma since 20 June 2017.

12 CORPORATE PLAN: KEY PRIORITY TARGETS FOR 2018 TO 2019

The Committee received a report providing the year-end position for the Key Priority Targets 2017-18, and a list of all Key Priority Targets for 2018-19. The Council had achieved 43 (68%) of its targets for 2017-18, and not achieved 20 (32%). Three targets had been classified as being information only indicators and were excluded from the overall percentages.

The following matters were considered:

- a) **‘No data’ for targets.** The Committee noted that no data was available for 3 targets. This management information had previously been extracted

from the Council's systems by the Head of Planning, but following that post becoming vacant there was a shortage of the necessary skills to do so. A new Head of Planning would be in post shortly, and would seek to build service resilience in this area.

The Committee noted that there was a discrepancy between the information tables (stating that there was no data for Jan-March 2018) and summary graph (displaying data for Jan-March 2018) on pages 231–233 of the agenda.

- b) **Target to complete phase 2 of the website.** This target was “not achieved” for 2017-18. The Chief Operating Officer informed the Committee that this had been delayed in light of the Council ending its shared ICT service arrangement with Elmbridge Borough Council, and the current work stream to procure a new customer relationship management (CRM) system. A member of the Committee expressed concern that delays to the procurement of a single central system was likely to knock-on to other projects.
- c) **Correction to progress of Plan E Phase 1 target.** The Committee noted a correction to the progress of the following target listed on page 235 of the agenda: “Plan E (Phase 1): Finalise and agree the design for the Market Place improvements in partnership with Surrey County Council (SCC)”. The progress for this action was corrected as follows: “Jan to March: SCC submitted a proposed finalised design for the Marketplace in March”.
- d) **Single-use plastics.** A member of the Committee highlighted that the Council had not included any specific targets relating to a reduction in the use of single-use plastics in its Key Priority Targets for 2018-19. The Chief Operating Officer acknowledged that such activity was of national priority, and that it would be possible to include it within the targets for 2019-20. Due to the lead-time in setting the targets for 2018-19 it had not been possible to do so for the current year, but it was hoped that the Council would still be able to take action on the matter.

Following consideration, the Committee:

- (1) Noted the performance reported in Annexes 1 and 2 to the report and did not identify any areas of concern.
- (2) Noted the actions that have been proposed or taken where a Key Priority Target has not been achieved, as shown in table 4.1 of the report.
- (3) Noted the Key Priority Targets set for 2018 to 2019 as detailed in Annex 3 of the report and outlined in paragraph 5 of the report.

13 WORK PROGRAMME 2018/19

The Committee received a report asking it to agree its work programme for 2018/19.

Following consideration, the Committee:

- (1) Approved the work programme 2018/19 attached as Annex 1 to the report.

14 WARM WISHES TO COUNCILLOR MIKE TEASDALE

The Committee expressed warm wishes to Councillor Mike Teasdale following his recent hospitalisation, and hoped that he would have a speedy and successful recovery.

The meeting began at 7.30 pm and ended at 9.09 pm

COUNCILLOR DAVID REEVE (CHAIRMAN)

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INTERNAL AUDIT MONITORING REPORT

Head of Service/Contact:	Gillian McTaggart, Head of Corporate Governance
Urgent Decision?(yes/no)	No
If yes, reason urgent decision required:	
Annexes/Appendices (attached):	Annex 1 – Internal Audit Progress Report 2018/19 Annex 2 - Internal Audit Progress Report 2017/18 (Exempt from publication on the grounds that it relates to the business affairs of the Council)

Other available papers (not attached):

Report summary

This report summarises progress against the audit plan for 2018/19 and provides details on the one outstanding audit from 2017/18.

Recommendation (s)

That the Committee:

- (1) receives the internal audit progress report for 2017/18 which provides details on the outstanding audit from 2017/18**
- (2) receives the internal audit progress report for 2018/19**
- (3) notes the proposed changes to the provision of internal audit services as from 1 April 2019.**

1 Implications for the Council's Key Priorities, Service Plans and Sustainable Community Strategy

- 1.1 None for the purposes of this report.**

2 Background

- 2.1 The Committee's Terms of Reference include the requirement to monitor the implementation of recommendations from both external and internal auditors.
- 2.2 On 19 June 2018 the Committee received the last internal audit progress report for 2017/18 together with the 2017/18 year-end report. One audit report, however, relating to Cyber Security remained outstanding. This has since been finalised. An overview of the audit findings has been set out in this report.
- 2.3 The Internal Audit Plan for 2018/19 was endorsed at the meeting of the Audit, Crime & Disorder and Scrutiny Committee on the 19 April 2018. A number of audits within this plan have already been completed, the details of which have also been set out in this report.

3 Outstanding Audit from Audit Plan 2017/18 – Cyber Security

- 3.1 Due to the delay in commencing this audit it was not finalised by the year end. The findings were however taken into account in the Head of Internal Audit's year end opinion.
- 3.2 Cyber security is a high-profile risk and the audit assessed us against Cyber Security Framework: Information Risk Management Regime. As part of the audit the Council was asked to complete a self-assessment on 19 April 2018, which was then analysed by Internal Audit, although not a certification body.
- 3.3 The detailed findings are shown in **Annex 2**.
- 3.4 The ICT Manager will be in attendance at the meeting.

4 Audit Plan 2018/19

- 4.1 A summary of progress made against the Internal Audit Plan 2018/19 from 1 April to the end of September 2018 is shown in the table below and in the internal audit progress report attached at **Annex 1**.
- 4.2 Five audits have been finalised this year to date – Health & Safety, EEPIC Company Governance, Community Safety, Income from s.106 and Community Infrastructure Levy plus a Continuous Assurance audit. There are no issues within the audits issued to date to bring to the attention of the Committee.

Assignment	Reported	Opinion	H	M	L
Cyber Security C/F from 2017/18	22 Nov 2018	Advisory	0	10	2
HR Management					
Health & Safety	22 Nov 2018	Partial Assurance	2	2	3
Income from S106 and Community Infrastructure Levy	22 Nov 2018	Reasonable Assurance	0	1	3
Venues	In draft				
EEPIC Company Governance	22 Nov 2018	Reasonable	0	4	2
Community Safety	22 Nov 2018	Advisory	0	1	2
Project Management	WIP				
Homelessness	In draft				
Treasury Management					
Payroll					
IT Audit (tbc)					
Corporate Governance					
Risk Management					
Continuous Assurance	22 Nov 2018 Quarter 1 Report	Advisory		1	
Follow up				1	
Contract Management					

- 4.3 A new area of work included in the 2018/19 plan is continuous assurance. This particular area consists of an agreed set of controls assessed quarterly to give on-going assurance over some of the key financial processes, including revenues, benefits, capital accounting and debtors. There was one recommendation in the report for quarter one relating to the backlog of tree inspections.

5 Proposed new arrangements for Internal Audit

- 5.1 The contract with RSM for the provision of internal audit expires at the end of March 2019. The contract was initially for 5 years and was extended for a further two years.
- 5.2 A report was taken to the Strategy & Resources Committee on 25 September outlining the new proposal for the provision of internal audit services as from 1 April 2019. The East Surrey Audit Consortium consisting of Epsom and Ewell, Reigate and Banstead, Tandridge, Mole Valley and Waverley Councils, and Surrey Police Crime Commissioner's Office, reviewed a number of options. It was unanimously agreed by the Consortium members that based on a full evaluation of the options the proposal from Southern Internal Audit Partnership was most advantageous.
- 5.3 The Southern Internal Audit Partnership (SIAP) is hosted by Hampshire County Council. It was established in 2012 and has a diverse portfolio of 21 public sector clients and 7,500 audit days. They are not focused on profits, and their emphasis is on quality, professional and value adding services. They have a range of in-house specialists covering IT, trained fraud supervisors and experienced, qualified procurement and contract auditors.
- 5.5 SIAP has been externally assessed as compliant with the Public Sector Internal Audit Standards.
- 5.6 The Council will be required to enter into a partnership agreement with SIAP which sets out the composite day rate. These rates will be reviewed annually on the basis of pay costs based on national pay awards.
- 5.7 SIAP has confirmed its composite day rate but this is subject to the on-going due diligence based on audit needs assessment, each organisation's requirements and any potential TUPE requirements.
- 5.8 SIAP will be heavily involved in the transition arrangements. It is expected that it will take 3 months from formal notification, but they have been meeting with the Consortium to discuss arrangements and undertake due diligence. The Head of Internal Audit at SIAP will attend the Committee in February 2019.

6 Financial and Manpower Implications

- 6.1 There are no financial or manpower implications within this report.
- 6.2 **Chief Finance Officer's comments: None for the purposes of this report.**

7 Legal Implications (including implications for matters relating to equality)

7.1 None for the purposes of this report.

7.2 **Monitoring Officer's comments: none arising from the contents of this report.**

8 Sustainability Policy and Community Safety Implications

8.1 None for the purposes of this report.

9 Partnerships

9.1 The Council is part of the East Surrey Internal Audit Consortium but this consortium is due to cease on 31 March 2019 when the Council will enter into a new agreement independently with SIAP.

10 Risk Assessment

10.1 The internal audit service forms a statutory part of the Council's internal control.

11 Conclusion and Recommendations

11.1 There are no reports that have been given "no assurance" rating that would affect the Head of Internal Audit's year end opinion.

11.2 The Committee should note that there has been good progress in completing the audits in this year's audit plan ensuring that the plan for 2018/19 will be completed in a timely manner.

11.3 The Committee is also asked to note the proposed new arrangements for the provision of internal audit services as from 1 April 2019.

Ward(s) Affected: (All Wards);

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EPSOM AND EWELL BOROUGH COUNCIL

Internal Audit Progress Report

Audit, Crime & Disorder and Scrutiny Committee Meeting

22 November 2018

This report is solely for the use of the persons to whom it is addressed.
To the fullest extent permitted by law, RSM Risk Assurance Services LLP
will accept no responsibility or liability in respect of this report to any other party.

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As a practising member firm of the Institute of Chartered Accountants in England and Wales (ICAEW), we are subject to its ethical and other professional requirements which are detailed at <http://www.icaew.com/en/members/regulations-standards-and-guidance>.

The matters raised in this report are only those which came to our attention during the course of our review and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Management actions for improvements should be assessed by you for their full impact before they are implemented. This report, or our work, should not be taken as a substitute for management's responsibilities for the application of sound commercial practices. We emphasise that the responsibility for a sound system of internal controls rests with management and our work should not be relied upon to identify all strengths and weaknesses that may exist. Neither should our work be relied upon to identify all circumstances of fraud and irregularity should there be any.

This report is solely for the use of the persons to whom it is addressed and for the purposes set out herein. This report should not therefore be regarded as suitable to be used or relied on by any other party wishing to acquire any rights from RSM Risk Assurance Services LLP for any purpose or in any context. Any third party which obtains access to this report or a copy and chooses to rely on it (or any part of it) will do so at its own risk. To the fullest extent permitted by law, RSM Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party and shall not be liable for any loss, damage or expense of whatsoever nature which is caused by any person's reliance on representations in this report.

This report is released to you on the basis that it shall not be copied, referred to or disclosed, in whole or in part (save as otherwise permitted by agreed written terms), without our prior written consent.

We have no responsibility to update this report for events and circumstances occurring after the date of this report.

RSM Risk Assurance Services LLP is a limited liability partnership registered in England and Wales no. OC389499 at 6th floor, 25 Farringdon Street, London EC4A 4AB.

1 INTRODUCTION

The Internal Audit Plan for 2018/19 was approved by the Audit, Crime & Disorder Scrutiny Committee in June 2018. Below provides a summary update on progress against that plan and summarises the results of our work to date.

This table informs of the audit assignments that have been finalised and the impacts of those findings since our last report to the Audit, Crime & Disorder Scrutiny Committee.

The Executive Summary and Key Findings of the assignments below are attached to the end of this progress report.

Assignments	Status	Opinion issued	Actions agreed		
			H	M	L
Health & Safety (1.18/19)	FINAL	Partial Assurance	2	2	3
Income from s106 agreement and implementation of the Community Infrastructure Levy (2.18/19)	FINAL	Reasonable Assurance	0	1	3
EEPIC Company Governance (3.18/19)	FINAL	Reasonable Assurance	0	4	2
Community safety (4.18/19)	FINAL	N/a - Advisory	0	1	2
Continuous assurance Q1 (6.18/19)	FINAL	N/a - Advisory	0	1	0

2 LOOKING AHEAD

Assignment area	Timing per approved IA plan 2018/19	Status
Homelessness – housing needs and temporary accommodation (5.18/19)	August 2018	Draft Report Issued 23 August 2018
Venues Management (7.18/19)	N/a – addition to plan	Draft Report Issued 20 September 2018
Continuous assurance	Quarterly	Q2 review in progress
HR Management	April 2018	Undergoing quality review
Treasury management	November 2018	Undergoing quality review
Project Management	July 2018	Fieldwork in progress
Payroll	December 2019	Proposed start date 8 January 2019
Corporate governance	January 2019	Proposed start date 28 January 2019
Risk management	February 2019	Proposed start date 4 February 2019
Contract management	TBC	Under discussions with specialists for review
IT Audit	January 2019	Under discussions with specialists for review
Contingency	As required	N/a
Follow up	Ongoing	N/a

3 OTHER MATTERS

3.1 Changes to the audit plan

There have been some minor changes to timings of reviews since this was agreed in June 2018. There has also been one addition to the plan, Venues Management, that was added in at management request in response to a budget overspend in this area in 2017/18.

FOR FURTHER INFORMATION CONTACT

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APPENDIX A: INTERNAL AUDIT ASSIGNMENTS COMPLETED TO DATE

Reports previously seen by the Joint Audit Committee and included for information purposes only:

Assignments	Status	Opinion issued	Actions agreed		
			H	M	L
NO 2018/19 FINAL REPORTS HAVE BEEN ISSUED					

HEALTH & SAFETY - EXECUTIVE SUMMARY

1.1 Background

An audit of 'Health and Safety' was undertaken as part of the 2018/19 internal audit plan.

The Council has a system of devolved management and, in line with this, health, safety and welfare functions are delegated to encourage issues to be addressed at a local level. The overall responsibility for the health, safety and welfare of the Council's employees, and others affected by its work activities, rests with Council Members and the Leadership Team comprising the Chief Executive, Chief Operating Officer and Heads of Service. The role of the Leadership Team is to ensure that health, safety and welfare is considered in policy development, including monitoring and reviewing the effectiveness of the Council's health and safety strategies. The Health and Safety Officer has responsibility for coordination, oversight, advice and general administration for the function. Under RIDDOR (Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations 2013) there is a duty on all employers to report certain serious workplace accidents, occupational diseases and specified dangerous occurrences (near misses)

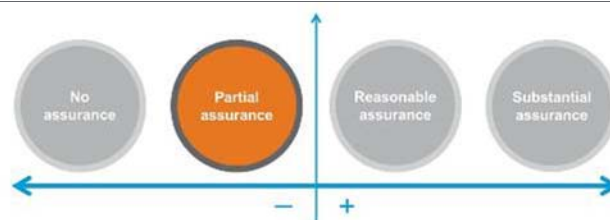
This audit considered the Council's compliance with policies and procedures, including who is responsible for completing key activities. We also reviewed the Council's processes for fire risk assessments, including how assurance is gained that actions identified during assessments are implemented.

1.2 Conclusion

We found there were weaknesses around the consistent use of accident/incident reporting forms by employees at the Council. In addition, we found weaknesses around the monitoring framework for the annual Risk Assessment reviews and for reviewing the implementation of the actions resulting from the fire risk assessments undertaken by the Council.

Internal audit opinion:

Taking account of the issues identified, the Council can take partial assurance that the controls to manage this area are suitably designed and consistently applied. Action is needed to strengthen the control framework to manage the identified area(s).



1.3 Key findings

We have raised two 'high', two 'medium' and three 'low' priority management actions. Details of the 'low' priority management actions can be found at section 2 below. The 'high' and 'medium' actions relate to the following observations:

- There is no established monitoring of services to ensure that managers perform and review risk assessments. There is a risk that these will become outdated and the Council would be unable to evidence regular review. (High, 2.1)

- In the event that an individual is subject to accident or incident an 'accident, incident and a near miss' form is completed. This form captures all the relevant information for assessing risk and addressing identified issues and must be completed in the event an accident or incident occurring. For a sample of ten accidents/incidents we found there was inconsistent use of reporting forms. In two cases no form was used to report the event, but instead there was email correspondence detailing the incident. For the remaining eight events a mixture of forms were used with two of these not being fully completed. There are two risks that occur that if appropriate forms are not used; **(Medium 2.5)**
 - The appropriate follow up actions are not undertaken in the event of an accident/incident;
 - In the event the Council is subject to a legal case as a result of an employee's accident there is an incomplete audit trail evidencing the Council's response and corrective action
- Evidence of conducting and regular reviewing of Risk Assessments and storing on the shared drive is varied. There is a consequent risk is that the Council could not evidence that risk assessments have been conducted and reviewed **(High, 2.2)**
- There is scope for ensuring that the reporting framework clearly identifies and highlights potentially RIDDOR reportable events and there is currently a risk of being non-compliant with HSE guidelines. **(Medium, 2.4).**

Notwithstanding the above we noted the following examples of well-designed and applied controls:

- The Health and Safety policy is updated and reviewed annually by the Health and Safety Officer. It is uploaded to the Council intranet page and is accessible to all staff members working at the Council. We established the policy in place was up to date and had been placed on the Council intranet page.
- The health and safety policy outlines the roles and responsibilities of staff at all levels at the Council. Roles and responsibilities were clearly outlined within the policy for the various levels of employees at the Council.
- All individuals joining the Council complete an induction that includes health and safety training. We verified that as part of the employee induction health and safety training was a key component. The health and safety induction covered areas including; 'law and policy', 'accidents in the workplace', 'fire safety' and 'lone working'.
- There is a good range of risk assessment templates available to services.
- High risk areas such as Civil Enforcement (Parking) and the Depot appear to understand the need for risk assessments and have been found to be more active in these areas.
- Fire Risk Assessments have been undertaken for all departments and clearly highlight key risks going forward.
- We found reported health and safety statistics to the Leadership Group do not go into significant detail, however they are split into categories and the Leadership Group is able to ask for additional information should it be needed. The Council have identified that they will add a section for RIDDOR even when there are no reportable events.

1.4 Additional information to support our conclusion

The following table highlights the number and categories of management actions made. The detailed findings section lists the specific actions agreed with management to implement.

Area	Control design not effective*		Non Compliance with controls*		Agreed actions		
					Low	Medium	High
Health and safety policies and procedures are clearly documented and communicated to all stakeholders and are regularly reviewed in line with changes in legislation;	0	(1)	0	(1)	0	0	0
Responsibility is clearly assigned to ensure health and safety issues are implemented	0	(1)	0	(1)	0	0	0
A timetable of risk assessments is in place and these have been carried out in line with this timetable	1	(1)	0	(1)	0	0	1
Risks to the health and safety of all stakeholders have been assessed, addressed and reviewed (Risk Assessments and Health & Safety Audits)	0	(1)	1	(1)	0	0	1
KPIs are produced and reported to the relevant Health & Safety Committees/Group	1	(2)	0	(2)	1	0	0
Incident and Accident Reporting and Monitoring is documented	1	(3)	1	(3)	0	2	0
Training and Information is available to staff – at induction and on-going	0	(1)	0	(1)	0	0	0
Fire risk assessments have been completed by the Council. We will provide assurance around the risk assessments undertaken as well as the subsequent action tracking undertaken as a result of the assessments and how this is reported by the Council	1	(2)	1	(2)	2	0	0
Total					3	2	2

* Shows the number of controls not adequately designed or not complied with. The number in brackets represents the total number of controls reviewed in this area.

2 DETAILED FINDINGS

Categorisation of internal audit findings

Priority	Definition
Low	There is scope for enhancing control or improving efficiency and quality.
Medium	Timely management attention is necessary. This is an internal control risk management issue that could lead to: Financial losses which could affect the effective function of a department, loss of controls or process being audited or possible regulatory scrutiny/reputational damage, negative publicity in local or regional media.
High	Immediate management attention is necessary. This is a serious internal control or risk management issue that may lead to: Substantial losses, violation of corporate strategies, policies or values, regulatory scrutiny, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.

This report has been prepared by exception. Therefore, we have included in this section, only those areas of weakness in control or examples of lapses in control identified from our testing and not the outcome of all internal audit testing undertaken.

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Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
Area: A timetable of risk assessments is in place and these have been carried out in line with this timetable								
2.1	Section managers are responsible for the ensuring risk assessments are completed each year There is however no central review or oversight of the completion of risk assessments	No	N/A	The absence of oversight could lead to a lack of awareness of whether risk assessments had been conducted and reviewed across the authority, thereby putting the Council at risk should these be out of date if an incident arose. Task based risk assessments were available and up to date for 1 of the 5 test sample areas on the shared O drive, plus the Depot maintain a spreadsheet. Other departments within the sample had some Display Screen Equipment (DSE) assessments, lone and home worker assessments and quarterly area checklists present, but	High	i). Officers will consider how departmental compliance with H&S assessments will be centrally monitored and assured. This will be determined at the next corporate H&S meeting ii) Going forward officers will determine whether a generic risk assessment for office based tasks will be used to capture key	29 September 2018	Gillian McTaggart - Head of Corporate Governance

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Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
				no expected task based assessments, some of these services would be expected to have some task based risk assessments.		information across the organisation.		
Area: Risks to the health and safety of all stakeholders have been assessed, addressed and reviewed (Risk Assessments and Health & Safety Audits)								
2.2	<p>Risk assessments are completed on an annual basis by Managers at the Council. Risk assessments once completed are held by the responsible officers.</p> <p>There is a good range of subject specific risk assessment templates available such as home working, lone working, return to work, as well as task based templates.</p>	Yes	No	<p>From the sample of 5 service areas, a positive response was received from Civil Enforcement (Parking) and relevant risk assessments were received and found to have been completed within the previous 12 months. Other services advised that they conduct quarterly area assessments but either did not have risk assessments in place or available in the shared 'O' Drive. When checked with the Health and Safety Officer, it was found that for the other sample services current risk assessments were not available. Additional testing showed that the depot maintain a performance summary, based on inspection and vehicle CCTV which identifies and logs health and safety risks. Vehicle defect logs are maintained and compared to service logs for rectification.</p>	High	<p>Officers will ensure that all risk assessments are recorded, reviewed or updated in line with policy, stored and monitored / spot-checked centrally on a six-monthly basis.</p> <p>Officers will strengthen links with HR to ascertain whether DSE assessments have been conducted for all new starters, and with Operational Services to gain greater access to their records.</p> <p>A new Corporate H&S Group has been set up and this will review the risk assessment and identify gaps.</p>	31 December 2018	<p>Gillian McTaggart - Head of Corporate Governance</p> <p>In liaison with Head of Operational Services and Head of HR</p>

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
Area: KPIs are produced and reported to the relevant Health & Safety Committees/Group								
2.3	On a quarterly basis senior members of the team at the depot meet to discuss health and safety arrangements and any accidents and incidents that have occurred in the last quarter.	Yes	No	Through discussion with the Head of Operational Services and their Health and Safety representative, it was ascertained that monthly Health and Safety meetings occur, however these are not minuted and therefore there is no evidence to test. A copy of the emailed agenda was obtained which shows relevant areas for discussion.	Low	Officers will document and retain minutes of Health and Safety meetings to include at a minimum, issues identified, actions conducted and taken forward, responsible officers and due dates, as well as standing agenda items. The Corporate Health and Safety Officer will be included in the distribution list for the agenda, minutes and actions and regularly attend meetings.	30 July 2018	Ian Dyer - Head of Operational Services
Area: Incident and Accident Reporting and Monitoring is documented								
2.4	The accident/incident monitoring sheet does not include a section to detail if an event is RIDDOR reportable and if the event meets this criteria it has been reported.	No	N/A	It is not clear from the reporting framework that potentially RIDDOR reportable events have been identified, reported to the Corporate Health and Safety Officer, and subsequently reported to the HSE in a timely manner. There is a risk that the Council are in non-compliance with Health and Safety Executive (HSE) guidelines. We did confirm that with the Health and Safety Officer and through our own analysis that based on the accident/incident records there did not appear to be	Medium	The Health and Safety Officer will send to managers and supervisors guidance regarding their duties to report accidents, incidents and near-misses. Work with HR regarding absence management related to workplace injuries will be undertaken. Extra columns will be added to	31 October 2018	Pauline Baxter - Health and Safety Officer

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
				any RIDDOR events that had occurred in the last year.		the data base to cover RIDDOR		
2.5	In the event that an individual is subject to accident or incident an 'accident, incident and near miss' form is completed. This form contains all the relevant areas that must be completed in the event an accident or incident occurs.	Yes	No	For a sample ten accidents/incidents we found there was inconsistent use of reporting forms. In two cases no form was used to report the event, but instead there was email correspondence detailing the event. For the remaining eight events a mixture of forms were completed with two of these not being fully completed. There is a consequent risk of an incomplete audit trail that could compromise prompt remedial action.	Medium	Specific guidance will be issued to managers and supervisors defining their responsibilities with regards to the reporting of accidents/incidents and the correct forms to be used. In the event that incorrect or incomplete forms are provided staff will be asked to complete the form in the correct format and ensure all fields are completed.	31 October 2018	Gillian McTaggart - Head of Corporate Governance

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Area: Fire risk assessments have been completed by the Council. We will provide assurance around the risk assessments undertaken as well as the subsequent action tracking undertaken as a result of the assessments and how this is reported by the Council

2.6	A number of fire risks assessments were undertaken at various buildings owned by the Council. After the exercise all actions raised from the fire risk assessments were placed into an action tracking spreadsheet to ensure all were followed up upon and implemented.	No	No	The action spreadsheet for fire risk assessments details a number of areas including the action to be completed, the action owner, and the priority of the action. However we noted that clear timescales are not in place for the implementation of these actions on the spreadsheet, although these are present in the risk assessments.	Low	Future action tracking spreadsheets will include clear timescales. Discussion will take place with the Project Manager regarding the current spreadsheets as all actions should now have been completed, so there is limited benefit at this stage in amending this record.	31 st October 2018	Gillian McTaggart - Head of Corporate Governance
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Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
2.7	Actions owners are assigned to all actions raised as part of the fire risk assessments undertaken at the Council.	Yes	No	We found that for three actions on the monitoring spreadsheet did not have assigned action owners. There is a risk that if an action does not have an accountable owner it may not be implemented in a timely manner.	Low	The fire risk assessment actions tracker will be reviewed to ensure that all actions have an assigned owner.	31 st /October 2018	Pauline Baxter - Health and Safety Officer

INCOME FROM S106 AGREEMENT - EXECUTIVE SUMMARY

1.1 Background

The Community Infrastructure Levy (CIL) is a local tax on new developments that Council authorities can allocate in order to fund new infrastructure projects in the local area. The program is guided by the 2010 regulations and subsequent policy amendments. CIL is calculated based on a set formula, with charges assigned based on the gross internal area of a site, and with an adjustment for the development index.

During the reporting period April 2017 – March 2018 Epsom Borough Council received funds to the value of £2,097,990.03 from CIL liable developments. £1,393,214.24 was raised in the financial year from new development projects in the local area. In total Epsom Council has £3,140,392.53 of funds that are awaiting allocation.

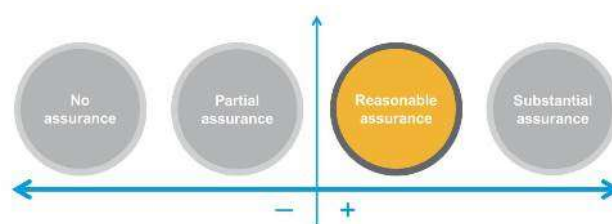
Charging authorities are required to allocate funding to match project priorities that have been identified through existing consultation with the community. This is done through existing engagement processes including neighbourhood groups.

Planning Obligations under Section 106 of the Town and Country Planning Act 1990, commonly referred to as s106 agreements, are mechanisms to mitigate the impact of developments such that the project falls within an acceptable tolerance for the local community. S106 funds are still allocated, mostly for projects related to affordable housing. Funds are assigned by the developer against the project. The Council then allocates these funds as per the requirements as set out in the Planning Act 1990.

1.2 Conclusion

Internal audit opinion:

Taking account of the issues identified, the Council can take reasonable assurance that the controls in place to manage this area are suitably designed and consistently applied. However, we have identified issues that need to be addressed in order to ensure that the control framework is effective in managing the identified area(s).



1.3 Key findings

We have raised one '**medium**' and three '**low**' priority management actions. Details of the '**low**' priority management actions can be found at section 2 below. The '**medium**' action relates to the following observation:

- Currently only local Councillors can bid on the allocation of CIL funds. There is no process where local community groups can apply for CIL funds to be assigned to local projects. This process is being updated to include local communities groups and will be rolled out in the next financial year. We evidenced that the Council had set up policy requirements and an assessment matrix in anticipation of these new changes, however, given that the process has not yet been implemented, we could not confirm compliance. (**Medium 2.4**)

Notwithstanding the above we noted the following examples of well-designed and applied controls:

- Internal procedural notes are in place and are used by the planning and accounting teams to assess CIL and s106 applications against the policy requirements (CIL) or contractual terms (s106).
- Epsom and Ewell Council adopted the Community Infrastructure Levy (CIL) charging schedule in April 2014. The Council has issued two regulation reports that establish the charging schedule for CIL projects based on the square meterage of the project. The last of these reports was published in October 2017 and is available on the Councils website.
- As part of this review we conducted an assessment of the Council's collection and assessment process, including confirming that the planning team is effectively applying the assessment criteria to all applications and that the accounting team is collecting funds in accordance with the established payment schedule. No exceptions arose.
- Income due is promptly recorded in the accounting system upon collection and reconciled back at the end of the month.
- We confirmed continued supervisory monitoring was occurring and that CIL/ s106 was being discussed in a sample of monthly board minutes. Yearly capital outturn reports are also published on the Councils website after review and approval by the executive committee.
- We confirmed that the Council was allocating funds in line with the policy requirements of 80% Main CIL, 15% Local Scheme and 5% Administration accounts.
- All legal agreements are attached to the s106 account database such that they can be cross referenced against each individual account. The account summary sheet also includes key highlights of restrictions that are in place around the contract. The accounting team has a monitoring process in place that allows the Council to continually assess projects against the original assessment criteria. CIL projects do not require continued compliance monitoring given that the original cost assigned is based on the planning permission granted and does not vary between projects.

1.4 Additional information to support our conclusion

The following table highlights the number and categories of management actions made. The detailed findings section lists the specific actions agreed with management to implement.

Area	Control design not effective*		Non Compliance with controls*		Agreed actions		
					Low	Medium	High
S106/CIL	1	(1)	0	(1)	0	0	0
Supporting evidence on CIL liability	1	(1)	0	(1)	0	0	0
Control mechanisms related to payment	1	(1)	0	(1)	1	0	0
Income due is registered in source systems	1	(1)	0	(1)	0	0	0
S106 agreements are effectively recorded	1	(1)	0	(1)	1	0	0
CIL receipts are applied in the following proportions: 80% infrastructure 15% local spending; 5% administrative costs	1	(1)	0	(1)	1	0	0
Transparent approach to the allocation of funds	1	(1)	1	(1)	0	1	0
Total					3	1	0

* Shows the number of controls not adequately designed or not complied with. The number in brackets represents the total number of controls reviewed in this area.

2 DETAILED FINDINGS

Categorisation of internal audit findings

Priority	Definition
Low	There is scope for enhancing control or improving efficiency and quality.
Medium	Timely management attention is necessary. This is an internal control risk management issue that could lead to: Financial losses which could affect the effective function of a department, loss of controls or process being audited or possible regulatory scrutiny/reputational damage, negative publicity in local or regional media.
High	Immediate management attention is necessary. This is a serious internal control or risk management issue that may lead to: Substantial losses, violation of corporate strategies, policies or values, regulatory scrutiny, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.

This report has been prepared by exception. Therefore, we have included in this section, only those areas of weakness in control or examples of lapses in control identified from our testing and not the outcome of all internal audit testing undertaken.

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Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
Area: Control mechanisms related to payment								
2.1	When an application is raised, the planning team send a letter to the client that details the total charge liable. This includes a payment schedule as per the policy. This payment schedule is then sent to the finance team who upload the schedule to the CIVICA Debtors system. The finance and planning teams also keep a detailed excel	No	N/A	<p>For a sample of 5 CIL payments, we confirmed that the planning team had raised an invoice schedule that was sent to the client and a matching debtors schedule was raised in the accounts.</p> <p>For a sample of 5 s106 payments we confirmed payment was made in line with the payment schedule, or the finance team had implemented steps to recover outstanding income.</p>	Low	The excel sheets used by the finance and planning teams will be reconciled back to the Debtors system on a monthly basis to ensure that all payments and debts are accurately recorded.	31 st December 2018	Sue Emmons

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Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
	spreadsheet that tracks all CIL&S106 debts/payments. This spreadsheet is not periodically reconciled to the Debtors system			In all cases where payment was due, payment processes were in place to ensure timely payment. We confirmed the use of a primary monitoring spreadsheet to monitor payments and update management accounts. The absence however of an evidenced reconciliation between the monitoring spreadsheet schedule and the Corporate debtors systems weakens assurances that all debt is satisfactorily accounted for.				
Area: S106 agreements are effectively recorded and the obligations recorded are monitored for compliance within the terms agreed with the developer.								
32	S106 agreements are effectively recorded and the obligations recorded are monitored for compliance within the terms agreed with the developer.	No	Yes	The finance department keeps records of all s106 agreements in a legal agreement folder. This allows the finance team to cross reference against the legal/ contractual agreements before allocating funds. All legal agreements are attached to the s106 account database such that they can be cross referenced against each individual account. The account summary sheet also includes key highlights of restrictions that are in place around the contract. For all 5 s106 projects that we sampled we confirmed that legal agreements were kept on file by the finance team and the s106 summary sheet on the system included key contractual restrictions such as a	Low	The Finance Department will undertake a sample reconciliation on s106 expenditure back to the contractual agreements to ensure that the funds have been allocated as per the agreements.	31 st December 2018	Sue Emmons

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
				description of how the money is to be used. Funds are approved by the Head of Planning, or the Strategy and Resources committee for large funds. There is however no subsequent year end reconciliation to ensure that the funds have been allocated as per the contract				
Area: In accordance with CIL regulations we will examine evidence that CIL receipts are applied in the following proportions: 80% infrastructure 15% local spending; 5% administrative costs								
2.3	In accordance with CIL regulations CIL receipts are applied in the following proportions: 80% infrastructure 15% local spending; 5% administrative costs	Yes	To be improved	<p>The Finance team generate a yearly Capital Outturn report that is sent to the leadership team that shows the breakdown in the charges between the 80%, 15% and 5%. This is reviewed before being published in the Community Infrastructure Levy Report.</p> <p>The Community Infrastructure Report provides a breakdown on CIL expenditure. The report outlines that as per the policy, expenditure is assigned on an 80/15/5 % breakdown between the Main CIL, the Local Scheme and Administration accounts. The report also details commitments made by the collection authority, including which accounts they are allocated to and how this expenditure falls within the 80/15/5 breakdown.</p> <p>The finance team do not have separate ledger codes set up for the</p>	Low	The Council will create three separate ledger codes for the Main CIL, Local Scheme and Administration income accounts. Income will then be posted to these ledger codes as per the regulatory requirements.	30 November 2018	Sue Emmons

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
				Main CIL, Local Scheme and Administration income. They track expenditure in a management account excel spreadsheet which allows them to report income and expenditure breakdown through to the leadership team. The use of separate ledger codes would provide greater assurance and transparency that the funds are being allocated in the correct proportions as per the regulations.				
Area: In respect of local spending of CIL receipts we will examine evidence that a transparent approach to the allocation of these funds exists and that this includes an element of local engagement with communities.								
4 Page 37	In respect of local spending of CIL receipts the Council are in the process of rolling out a pilot scheme for CIL bids. Currently this bidding process is restricted to Councillors within the borough.	No	N/A	<p>The Council publishes the last two years Community Infrastructure Levy Reports, dating from 2015/16 to 2016/17. The CIL reports provide a comprehensive breakdown on the outstanding CIL liabilities and received CIL income dating back to 2014. Given that these funds are transparently reported through, the local community groups can assess project proposals against the Councils ability to meet funding needs.</p> <p>Currently the application process for CIL funds is managed through a bidding process facilitated by Councillor bids. Councillors can canvass opinion or engage directly with the public or interest groups in forming such bids. Going forward the</p>	Medium	As of the 2019 financial year the Council agreed a scheme for the allocation of CIL funds. Funds will be allocated based on an established assessment criteria building on from the 18/19 scheme.	02 September 2018	Gillian McTaggart

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
				pilot scheme will be reviewed to examine its strengths and weaknesses				

EEPIC COMPANY GOVERNANCE - EXECUTIVE SUMMARY

1.1 Background

At the Council meeting of 19th September, the Full Council resolved to approve the creation of Epsom & Ewell Property Investment Company Limited (EEPIC) as a limited share company wholly owned by the Council.

Forward financial projections in the Company's initial business case indicate a dividend available to the shareholder of £2.99m for 2018/19 and £9.01m in the first three financial years.

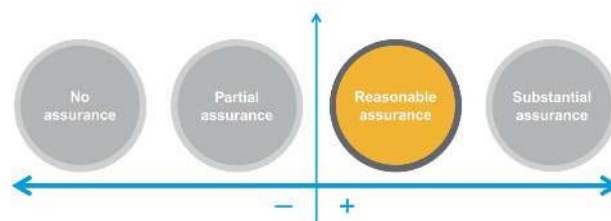
The purpose of this audit was to review Governance arrangements between the Council and Company.

1.2 Conclusion

We found that the Council and Company had, through a learning curve, self-identified weaknesses around the establishment of a shareholders' subcommittee, incomplete documentation, the lack of a scheme of delegation and conflicts of interest; corrective action is being taken. Additionally, we found weaknesses reporting to shareholders and possible improvements to the format of the Company's risk register. While loan agreements are now in place, due to changes in senior staffing and the appointment of new legal advisors there was a gap between the purchase of 2 properties in September 2017 and when the agreements were signed in May 2018 which meant the financial risk remained with the Council rather than the limited company should anything occur to the Company, however as sole shareholder the risk was acceptable to the Council.

Internal audit opinion:

Taking account of the issues identified, the Council can take reasonable assurance that the controls in place to manage this area are suitably designed and consistently applied. However, we have identified issues that need to be addressed in order to ensure that the control framework is effective in managing the identified area(s).



1.3 Key findings

The key findings from this review are as follows:

We have raised four '**medium**' and two '**low**' management actions. Details of the '**low**' priority management actions can be found at section 2 below. For completeness, we have included management actions where the Council and Company have already instigated corrective action, but that action is still to be completed. The medium actions related to the following observations

- The establishment of a shareholders' subcommittee to act on behalf of the Strategy and Resources committee and approve the Company's annual business plan, as well as other duties in line with the subcommittee Terms of Reference has yet to take place. It is understood that a chair will be appointed at the next meeting of Strategy and Resources in September 2018. (**Medium, 2.1**)
- -The Articles of Association and Shareholders' Agreement presented to Council were incomplete. The Articles have subsequently been completed and the Shareholders' agreement is currently being redrafted by the Company's Legal Advisors. (**Medium, 2.2**)
- As noted in Board minutes of 25 May 2018 there is no Scheme of Delegation in place and this is being reviewed by the Council's Chief Legal Officer. (**Medium, 2.4**)
- There is a conflict of interest with the Council's Section 151 Officer sitting on the Company Board of Directors. (**Medium, 2.6**)

Notwithstanding the above, we noted the following examples of well-designed and applied controls:

- The Council and Company have experienced a learning curve and already identified issues and taken, or are taking, corrective actions. Outstanding issues have been noted for follow up action as listed above and in section 2.
- The Council was, even with some documentation not being fully completed, presented with a comprehensive case for the establishment of a Property Investment Company, including information on governance such as terms of reference, appointment of Directors, responsibilities, and a business plan and were therefore able to make an informed decision.
- Board meetings are held regularly, have been quorate and had declarations of interest considered, are minuted and signed.
- Relevant risks are identified and recorded in externally commissioned investment portfolio advice, the first annual business plan, and a draft risk register.
- The first annual business plan was approved by Council Members who are the shareholders of the Company and therefore separation exists between the Board and Shareholders to ensure that their objectives align.
- Some delegation of duties is documented such as the Director of Finances being able to conclude loan agreements, and the Shareholder terms of reference lists the responsibilities of the subcommittee.
- Loan agreements, while delayed, are in place with a debenture in place to protect the Council's interests should anything occur to the Company.
- Year end Company accounts have been prepared and audited by a local firm of accountants with separation in place by use of different teams. The Company have appointed a different organisation to the Council to maintain independence.
- Conflicts of interest of Directors and related parties are listed and the Council has already identified issues with the initial make up of the Company Board with regards to the Section 151 and Monitoring Officers. Board minutes record any declared interests.

1.4 Additional information to support our conclusion

The following table highlights the number and categories of management actions made. The detailed findings section lists the specific actions agreed with management to implement.

Area	Control design not effective*		Non Compliance with controls*		Agreed actions		
					Low	Medium	High
The establishment of appropriate governance arrangements such as the Company Board and Council sub-committee, along with suitable terms of reference and approval for each.	0	(1)	2	(1)	0	2	0
Frequency of meetings of both the Company Board and Council's subcommittees and recording of minutes.	0	(2)	0	(2)	0	0	0
The existence of a Company Risk Register.	0	(1)	1	(1)	1	0	0
The alignment of Council and Company objectives	0	(1)	0	(1)	0	0	0
Authorisation, recording, and monitoring of the Investment Portfolio and powers delegated to officers	0	(1)	1	(1)	0	1	0
Formal loan agreements are in place	0	(1)	0	(1)	0	0	0
Investment income returns are monitored and reported	0	(1)	1	(1)	1	0	0
How conflicts of interest are avoided	1	(1)	0	(1)	0	1	0
The appointment of company auditors /accountants is satisfactorily evidenced	0	(1)	0	(1)	0	0	0
Total					2	4	0

* Shows the number of controls not adequately designed or not complied with. The number in brackets represents the total number of controls reviewed in this area.

2 DETAILED FINDINGS

Categorisation of internal audit findings

Priority	Definition
Low	There is scope for enhancing control or improving efficiency and quality.
Medium	Timely management attention is necessary. This is an internal control risk management issue that could lead to: Financial losses which could affect the effective function of a department, loss of controls or process being audited or possible regulatory scrutiny/reputational damage, negative publicity in local or regional media.
High	Immediate management attention is necessary. This is a serious internal control or risk management issue that may lead to: Substantial losses, violation of corporate strategies, policies or values, regulatory scrutiny, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.

This report has been prepared by exception. Therefore, we have included in this section, only those areas of weakness in control or examples of lapses in control identified from our testing and not the outcome of all internal audit testing undertaken.

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Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
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Area: The establishment of appropriate governance arrangements such as the Company Board and Council sub-committee, along with suitable terms of reference and approval for each.

1	The Strategy and Resources Committee and Council report of 19 September 2017 agreed the creation of the Epsom & Ewell Property Investment Company (EEPIC) and established the need for a Shareholders' subcommittee to act on behalf of the Strategy and Resources Committee.	Yes	No	As of the time of the audit in July 2018 this subcommittee has not been established, although it is acknowledged that the Council are in the process of completing this action and a Chair should be appointed at the September Committee meeting. There is a reputational risk by the Council not following its own decisions and by not using the smaller subcommittee takes up more time of a larger number of Councillors.	Medium	The Council will establish a Shareholders' subcommittee in line with section 2 (Membership) of the Terms of Reference as agreed in September 2017.	30 November 2018	Amardip Healy, Chief Legal Officer
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Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
2	The Council was presented with expected documentation and information for the creation of the Property Investment Company, which was then approved.	Yes	No	Some initial documents were incomplete such as the Articles of Association, which has now been completed, and the Shareholders' agreement which is with the Council's legal advisors, Trowers. The Property Investment Company runs the risk of not conforming with Company House requirements.	Medium	The Shareholders' Agreement is currently being reviewed by the Council's legal advisors and will be presented to both the Council and Company for official sign off.	30 November 2018	Amardip Healy, Chief Legal Officer

Area: The existence of a Company Risk Register.

3	The first annual business plan sets out a Business Case objective which contains identified risks, and the Company's risk appetite by stating what it will and will not do.	Yes	No	Risks are identified in section 11 of the business case and show a Low/Medium/High rating for identified areas separated by likelihood and impact. The Investment Portfolio policy also identifies key risks in property investment and recommends diversification. The draft new risk register only shows an overall risk rating of Low, Medium, or High which is not separated into likelihood and impact. This style of risk identification has the potential to hinder prioritisation of risks and decisions on what proportionate mitigating actions should be taken.	Low	The Managing Director will update the draft risk register to show a rating for Likelihood and Impact, as well as an overall score, using a generally accepted numerical range. Actions needed, dates, and details of assurances will be included. A risk matrix will be showing risk appetite will be included. The draft risk register shall subsequently be presented to the Board for review and approval as is standard practice.	30 November 2018	Mark Shephard, EEPIC Managing Director
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Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
Area: Authorisation, recording, and monitoring of the Investment Portfolio and powers delegated to officers								
4	Powers are delegated through a shareholders' agreement, and Terms of Reference. The Council delegated authority to the Acting Director of Finance and Resources to conclude final loan arrangements to the Company to enable purchase of property. The Council approved the purchase of the two properties so far invested.	Yes	No	The Council Report of 19 July 2017 states that the sub-committee / shareholders committee shall have control over the company as set out in the shareholder agreement (which is incomplete). Board minutes of 25 May 2018 state that the Chief Legal Officer has commissioned an update on the shareholder agreement and a management action has been raised to keep track of this. As noted in paragraph 11 of the Board minutes of 25 May 2018 there is no Scheme of Delegation in place and this is being considered by the Council's Chief Legal Officer, however, directors are appointed by the Council and work in accordance to the approved business plan. With no clear scheme of delegation in place the Council and Company run the risk that unclear responsibilities could lead to actions taken that were not expected by the other party.	Medium	The Chief Legal Officer is currently reviewing formalising delegations and is included here for follow up purposes.	31 March 2019	Amardip Healy, Chief Legal Officer
Area: Investment income returns are monitored and reported								
5	Quarterly reports are sent to the Council	Yes	No	Board minutes state that the Company shall be set up for quarterly finance reporting. The first meeting is due to take place on 7th August as the financial year is linked to the tax year and as such no accounts have yet been distributed. Company accounts have been	Low	The Company Secretary shall ensure that Quarterly reports are distributed to the Board, the Council's Section 151 and Monitoring Officers, and the Shareholders' subcommittee to allow	30 August 2018	Louise Martin, EEPIC Company Secretary

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
				prepared and audited for 2017/18. Without regular timely reporting shareholders are unable to evaluate the performance of the company in line with agreed terms of reference and therefore any decisions made would lack an informed view.		them to periodically evaluate the financial performance of the Company as per the Shareholders' Terms of Reference 9c.		

Area: How conflicts of interest are avoided

6	Conflicts are managed through Governance arrangements, at meetings, and through registers. Para 14 of Articles of Association covers requirements for conflicts of interest and states that a conflicted Director may not be counted for decisions or quorate for areas where the conflict exists.	No	No	The Company Business Plan identifies that there will be a separation of duties and does not envisage that a conflict will emerge for the Section 151 (S151) Officer or Monitoring Officer. However, when the legal officer resigned from both the Council and Company, the replacement was not appointed to the Board as it was felt inappropriate for the Monitoring Officer to be a Company Director. Likewise, the Company and Council have identified a conflict of interest with the S151 Officer being a company director when they are the person who dictates loan terms; they will be replaced by the Chief Accountant. Monitoring Officers have responsibilities in statute that require them to place the Council first, which creates a conflict against their Corporate responsibilities should they also be on the Company Board of Directors.	Medium	The Section 151 officer will be replaced on the Company Board by the Chief Accountant. Subsequently the Shareholders' agreement shall be amended to prohibit the Section 151 and Monitoring Officers from being Directors of the Company to avoid conflicts of interest between the Council and the Company.	30 November 2018	Amardip Healy, Chief Legal Officer
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COMMUNITY SAFETY - EXECUTIVE SUMMARY

1.1 Background

Community Safety is in the top five priorities for the Council for the 2018/19 financial year. Following the departure of the previous Community Safety Officer there have been a number of changes in the profile of Community Safety amongst the Council and a desire to improve joint enforcement, both within the Council and with the partners of the East Surrey Community Safety Partnership. The Council have applied for funds between £50,000 and £174,000 from the Office of the Police and Crime Commissioner to progress this joint enforcement.

1.2 Conclusion

We found that the Council have already identified areas where they could improve their approach to Community Safety and Anti-Social Behaviour, including applying for funding from the Office of the Police and Crime Commissioner to bring together enforcement roles, restructuring reporting lines moving responsibility from Legal to Environmental Health and increasing the profile of representatives. In addition the Council will be recruiting a new Community Safety Officer in the Autumn.

As the level of development however is currently minimal, our review cannot, at this stage, reach a formal conclusion on the design and operation of the control framework. Notwithstanding, whilst many of these projects will be reliant on the outcome of the bid for funding, and hence are in their infancy, the Council has a positive direction of travel. We are raising three actions intended to support and consolidate current administrative controls.

1.3 Key findings

The key findings from this review are as follows:

We have raised one '**medium**' and two '**low**' management actions. Details of the 'low' priority management actions can be found at section 2 below.

- A lack of consistent, holistic, and quantifiable reporting of Anti-Social Behaviour, Community Safety and Enforcement action taken inhibits the ability for the Leadership team and Councillors to make informed decisions and monitor trends and progress. There is a reputational risk that a lack of publicising relevant statistics and proactive/enforcement actions taken that local residents and businesses will believe that no effective action is being taken to tackle these issues. (**Medium, 2.2**)

Notwithstanding the above, we noted the following examples of well-designed and applied controls:

- The Council has already acknowledged previous weaknesses and level of engagement with Community Safety partners and taken action to improve these relationships and raise the profile of the Council and attendance of Senior staff in line with other authority's' representatives.
- The Council actively participates in partnerships with other authorities and organisations, including: The East Surrey Community Safety partnership to work with peers across the county, Joint Action Groups set up to deal with specific issues in localised areas, Community Harm and Risk Management Meetings (CHaRMM) to discuss actions and plans to work with known individuals including offenders and victims.

- The Council has bid for funds from the Office of Police and Crime Commissioner, including details of how these funds would be used to increase the profile of Community Safety, train officers, and joint enforcement plans.
- In February 2018, the Council set up a Community Safety and Enforcement Steering Group which meets monthly, comprised of representatives from across Council functions and is headed by the Head of Housing and Community. Relevant topics are discussed and minuted, and closer working will improve engagement from different services to give the holistic approach that the Council is moving towards.
- The Council is compliant in the requirement to participate in a Community Safety Partnership and review the effectiveness of that partnership. It is through this review and reporting to Members that the decision was made to amalgamate with the East Surrey Community Safety Partnership.

1.4 Additional information to support our conclusion

The following table highlights the number and categories of management actions made. The detailed findings section lists the specific actions agreed with management to implement.

Area	Control design not effective*		Non Compliance with controls*		Agreed actions		
					Low	Medium	High
Participation in the East Surrey Community Safety Partnership at an operational level as well as attending meetings, including the profile of the Council's representation	0	(2)	1	(2)	1	0	0
Current activities to reduce crime, disorder, and anti-social behaviour, including monitoring and reporting	1	(2)	0	(2)	0	1	0
Progress against new initiatives for joint enforcement	1	(1)	0	(1)	1	0	0
How the Council monitors and reports its performance against each of the statutory duties	0	(1)	0	(1)	0	0	0
Total					2	1	0

* Shows the number of controls not adequately designed or not complied with. The number in brackets represents the total number of controls reviewed in this area.

2 DETAILED FINDINGS

Categorisation of internal audit findings

Priority	Definition
Low	There is scope for enhancing control or improving efficiency and quality.
Medium	Timely management attention is necessary. This is an internal control risk management issue that could lead to: Financial losses which could affect the effective function of a department, loss of controls or process being audited or possible regulatory scrutiny/reputational damage, negative publicity in local or regional media.
High	Immediate management attention is necessary. This is a serious internal control or risk management issue that may lead to: Substantial losses, violation of corporate strategies, policies or values, regulatory scrutiny, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.

This report has been prepared by exception. Therefore, we have included in this section, only those areas of weakness in control or examples of lapses in control identified from our testing and not the outcome of all internal audit testing undertaken.

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
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Area: Participation in the East Surrey Community Safety Partnership at an operational level as well as attending meetings, including the profile of the Council's representation

2.1	The Council is a member of a Community Safety Partnership	Yes	No	The Council is a member of the East Surrey Community Safety Partnership. The Council was able to provide a draft copy of the Partnership's Terms of Reference and an invitation to join the Partnership. The Council did not have a final copy of the Terms of Reference available, therefore may not be able to make informed decisions or participate as expected without having a finalised version.	Low	The Council will obtain final copies of all governance documentation from the Community Safety Partnership.	31 October 2018	Oliver Nelson, Environmental Health Manager
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Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
Area: Current activities to reduce crime, disorder, and anti-social behaviour, including monitoring and reporting								
2.2	Anti-social behaviour is monitored and reported	No	N/A	Joint Community Safety and Enforcement Steering Group minutes shows discussion around performance and enforcement occurs but does not provide statistical summaries. A Monitoring Service Delivery Plan provides high level details relating to key projects. This leads to the Leadership Team not having an easy overview of Community Safety trends within the Borough. In July the Steering group acknowledged that more could be done to publicise activities as a deterrent, although there is no mention of how this would be achieved. There is a reputational risk that if the Council do not advertise their enforcement activity the residents and business will believe that no action is being taken.	Medium	The Council will, via the steering group, produce a dashboard showing Anti-Social Behaviour and Community Safety statistics to identify trends and give a holistic picture. This will be circulated internally to Members and Officers on a monthly basis. Where appropriate information will be uploaded to the Community Safety pages of the website and included in local news publications to raise community awareness.	31 October 2018	Rod Brown, Head of Housing and Community
Area: Progress against new initiatives for joint enforcement								
2.3	The Council has highlighted areas to improve Community Safety and improve joint enforcement. This venture is in its infancy as noted in the Executive Summary and reliant on a funds bid.	No	N/A	The Environmental Health and Licensing Enforcement Policy was approved in 2014 and is clear, proportionate and fair. With the Council wishing to adopt a more joined up approach across the Council, and changes with Data Protection, it may be an opportune time to consider updating it into a Council-wide Enforcement Policy.	Low	The Council is reviewing its current Enforcement Policies. As part of this a more unified approach will be considered with greater linkage.	29 April 2019 to have reviewed all policies	Rod Brown, Head of Housing and Community

CONTINUOUS ASSURANCE QUARTER 1 - BACKGROUND

An audit of Continuous Assurance of key controls was undertaken as part of the Council's approved internal audit periodic plan for 2018/19.

As part of the annual internal audit plan, we have agreed to undertake quarterly testing on an agreed set of controls across a number of areas, in order to provide a high-level assurance that key controls are in place and operating effectively.

These reviews focus on a suite of controls considered to be key risk areas for the Council, for which management require assurance throughout the year of their functionality and effectiveness.

The series of reviews to be completed quarterly are intended to give ongoing assurance over some of the key financial processes, including revenues, benefits, capital accounting and debtors rather than completing detailed reviews in these areas.

The controls tested as part of this report are from across the following areas , with a complete schedule of controls tested detailed in Appendix A. (Due to the non availability of Council staff and records, a number of tests were not completed during this audit visit and will be followed up and reported in our quarter 2 review)

- Finance
- Environmental Services
- Fleet Management
- Licensing
- Safeguarding

1 FINDINGS OVERVIEW

1.1 Key findings

Below is a tabular representation which reflects our view of the controls tested as part of this review, highlighting the areas where actions have been raised based on our testing.

Further details of these findings and management actions to address the issues identified can be found in the Findings and Action Plan in section three of this report.

	Conclusion (Q1)
Purchase order approval	✓
Purchase invoice matching and approval	✓
Key control account reconciliations	Not Tested
New benefit claims	Not Tested
Changes to supplier standing data	✓
Debtors income and reconciliation	Not Tested
Council Tax and NNDR discounts/relief	Not Tested
Tenders and quotations	✓
Tree inspections	X
Council vehicle checks (MOT and Tax)	✓
Employee driving licence checks	✓
Issue of Licences	✓
Employee DBS Checks	✓

✓	No actions raised	✓	Low actions raised	X	Medium / High actions raised
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2 FINDINGS AND ACTION PLAN

Categorisation of internal audit findings

Priority	Definition
Low	There is scope for enhancing control or improving efficiency and quality.
Medium	Timely management attention is necessary. This is an internal control risk management issue that could lead to: Financial losses which could affect the effective function of a department, loss of controls or process being audited or possible regulatory scrutiny/reputational damage, negative publicity in local or regional media.
High	Immediate management attention is necessary. This is a serious internal control or risk management issue that may lead to: Substantial losses, violation of corporate strategies, policies or values, regulatory scrutiny, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.

This report has been prepared by exception. Therefore, we have included in this section, only those risks of weakness in control or examples of lapses in control identified from our testing and not the outcome of all internal audit testing undertaken.

Ref	Area	Priority	Finding summary	Actions for management	Action owner	Target date
Page 52-1	Tree Inspections	Medium	<p>The Council has a spreadsheet maintained by the Tree Officer which is used to monitor the tree inspection programme, detailing the schedule of tree inspections to be completed.</p> <p>Through discussions with the Tree Officer it was noted that the spreadsheet is not currently up to date due to a backlog of inspections. For example, no inspections that had been scheduled for 2018 have so far been undertaken due to the backlog from 2017 inspections.</p> <p>It was also noted that, since April 2017, the Council no longer manages inspections for highway trees and that the current schedule requires updating to reflect the refocus to Council maintained trees.</p>	<p>The Council should determine what action is to be taken in addressing the current backlog in tree inspections, liaising with the relevant committee such as the Environmental Committee.</p> <p>Based on the agreed actions, the tree inspection spreadsheet should be updated such that the inspection schedule is accurate for inspections that are to be carried out for the remainder of the year.</p>	Jeremy Young – Tree Officer	30 September 2018

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ANNUAL GOVERNANCE STATEMENT AND EXTERNAL AUDIT FINDINGS

Head of Service/Contact:	Gillian McTaggart, Head of Corporate Governance
Urgent Decision?(yes/no)	No
If yes, reason urgent decision required:	
Annexes/Appendices (attached):	Annex 1 – Progress Report – 2017/18 Annual Governance Statement Annex 2 – Progress Report – External audit Findings 2017/18
Other available papers (not attached):	Annual Governance Statement 2017/18

Report summary

This report sets out progress on the actions contained in the Council's Annual Governance Statement and in the Annual Audit Findings issued by the External Auditor following the audit of the financial statements.

Recommendation (s)

- (1) That the Committee receives a report on progress in implementing the Action Plan contained within the Annual Governance Statement and the actions agreed in the Audit Findings within the External Auditor's Report.**

1 Implications for the Council's Key Priorities, Service Plans and Sustainable Community Strategy

- 1.1 Corporate Governance affects all aspects of the Council's services because it relates to the framework in which decisions are made. It is defined as the system by which local authorities direct and control their functions and relate to their communities.
- 1.2 The Annual Governance Statement (AGS) is prepared by the Council each year and published as part of the Financial Statements. The AGS is reviewed by the Committee prior to being reported to the Strategy & Resources Committee.

- 1.3 The Audit Findings prepared by the External Auditor following the audit of the accounts, include any recommendations that they may have made to improve controls.
- 1.4 This Committee monitors both the recommendations from External Audit and the recommendations contained in the AGS.

2 Background

- 2.1 The AGS identified key risks to the Council's performance at the end of the financial year and the actions being taken to address them.
- 2.2 The AGS for 2017/18 identified three significant issues. The control issues identified in the AGS are deemed a substantial risk to the Council's ability to deliver public services. These were;
 - 2.2.1 A number of codes, policies and strategies are out of date and in need of updating. (Reference to the Council as a whole.)
 - 2.2.2 The Council has introduced alternative service methods and needs to ensure the governance arrangements are clear. (Reference to the Epsom & Ewell Property Investment Company Limited.)
 - 2.2.3 The Council has received confirmation that it is at risk of designation for the quality of decision making although an improvement plan is in place resulting from the Planning Peer Review. (Reference to the Council's planning decisions.)
- 2.3 Progress made on addressing these issues is shown at **Annex 1**. These matters will be followed up in the AGS for 2018/19 which will be reported to the Committee in June.

3 Annual Findings from External Audit

- 3.1 This Committee also monitors the implementation of the External Auditor's recommendations contained in the Audit Findings report. These findings were initially presented to the Strategy & Resources Committee on 26 July 2018. Overall an unqualified opinion was issued and the External Auditor only raised one recommendation. This recommendation, categorised as a medium risk, related to the governance arrangements for the Council's wholly owned company Epsom and Ewell Property Investment Company (EEPIC).
- 3.2 The auditors recommended that the Strategy & Resources Committee assess if the present governance arrangements for EEPIC provides the level of assurance required.

- 3.3 Progress made is recorded at **Annex 2** to this report and explains the action taken. The Committee should also note that the findings from the internal audit review are reported separately to this Committee in the Internal Audit Monitoring Report.

4 Financial and Manpower Implications

- 4.1 There are no implications for the purposes of this report
- 4.2 **Chief Finance Officer's comments:** None for the purposes of this report.

5 Legal Implications (including implications for matters relating to equality)

- 5.1 There are no implications for the purpose of this report.
- 5.2 **Monitoring Officer's comments:** None arising from the contents of this report.

6 Sustainability Policy and Community Safety Implications

- 6.1 None for the purposes of this report.

7 Partnerships

- 7.1 The Council is currently in the East Surrey Internal Audit Consortium. It is proposed that this arrangement, however, will end at the end of March 2019 when the Council will join the Southern Internal Audit Partnership, with all the current members of the Consortium. This arrangement will be for a period of 4 years and more details are provided in another report to this Committee.

8 Risk Assessment

- 8.1 Both the external audit arrangements and the process for compiling the AGS are a key part of the Council's governance arrangements. Failure to implement the recommendations from both External Audit and the AGS would leave weaknesses in the Council's controls.

9 Conclusion and Recommendations

- 9.1 It is positive that both the number of recommendations within the AGS and the External Audit Findings have reduced from those identified previously.
- 9.2 It is also positive that progress has been made in implementing all the recommendations
- 9.3 The Committee is asked to note;

- 9.3.1 The progress made on implementing the actions in the Annual Governance Statement
- 9.3.2 The progress made in implementing the recommendation in the External Audit findings.

Ward(s) Affected: (All Wards);

Annual Governance Statement: Significant Governance Issues

No.	Issue	Agreed Action	Progress to date (November 2018)
1.	A number of codes, policies and strategies are out of date and in need of updating.	A rolling programme of reviewing policies and strategies will be introduced with a checklist to ensure documents are timely and relevant.	A review is being undertaken to identify all the policies, strategies and plans held. This will identify the relevant owner and legislative requirements and date of renewal. Once in place a programme of review will be agreed.
2.	The Council has introduced alternative service methods and needs to ensure the governance arrangements are clear.	The governance arrangements of the company are being reviewed to ensure arrangements are clear and transparent and an audit will be undertaken in 18/19	An internal audit of the governance arrangements of the company was undertaken as part of the internal audit plan and gave reasonable assurance. A number of self identified weaknesses had been identified but corrective action was being undertaken.
3.	The Council has received confirmation that it is at risk of designation for the quality of decision making although an improvement plan is in place resulting from the Planning Peer Review.	This will continue to be closely managed and a range of actions implemented to secure improvements.	The number of planning decisions overturned at appeal is closely monitored in the key priority targets and reported quarterly to Leadership Team. The recommendations from the Planning Peer Review are being implemented and monitored through the Planning Improvement Governance Group. A letter was received from MHCLG on 20 August 2018 which stated that at this time they have decided not to designate the authority but if performance does not improve they will reconsider.

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Residual Risks from Audit Findings for Epsom and Ewell Borough Council – Progress

No.		Issue	Priority	Progress to date (November 2018)
1.	EEPIC Governance	<p>The auditors recommended that the Strategy & Resources Committee assess if the present governance arrangements for EEPIC provides the level of assurance required.</p> <p>Management response – in May 2018 the accounts were externally audited by Williams & Co who gave an unqualified opinion providing EEPIC directors with a good level of assurance. In September 2018 the Council's shareholder subcommittee is expected to meet for the first time. The sub-committee will receive a report on EEPIC's governance arrangements during 2018/19 which should provide further assurance to the Council.</p>	Medium	<p>The Company's governance arrangements have been reviewed by internal audit and reasonable assurance given although a number of issues were identified. The members of the Shareholder sub-committee have been agreed and the first meeting is due to be held in November to review the annual report and business plan for 2019/20.</p> <p>Responsibility – Head of Property & Regeneration.</p>

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RISK MANAGEMENT FRAMEWORK ANNUAL REPORT

Head of Service/Contact:	Gillian McTaggart, Head of Corporate Governance
Urgent Decision?(yes/no)	No
If yes, reason urgent decision required:	
Annexes/Appendices (attached):	Annex 1 – Leadership Risk Register
Other available papers (not attached):	Report and Minutes of the meeting of the Audit, Crime & Disorder and Scrutiny Committee, 15 November 2016

Report summary

This report enables the Committee to meet its responsibilities for monitoring the development of the Council's risk management arrangements.

Recommendation (s)

That the Committee:

- (1) Considers the contents of the report and confirms that it is satisfied with the arrangements in place for risk management.**
- (2) Reviews the Leadership Risk Register and determines if there are any risks they wish to raise with the Leadership Team.**

1 Implications for the Council's Key Priorities, Service Plans and Sustainable Community Strategy

- 1.1 Effective risk management is an integral part of ensuring that services are delivered.

2 Background

- 2.1 In November 2012 the Scrutiny Committee accepted responsibility for monitoring and reviewing the Council's risk management arrangements. This Committee has since received an annual report on the Council's risk management framework.

- 2.2 The function of the risk management framework is to provide a focus on good practice and to facilitate, guide and train. Many risks are timeless and are managed on a daily basis through internal controls and policies. The risk management framework covers both operational and strategic risks. It incorporates insurable risks, emergency planning and business continuity, health and safety risks, and the Council's risk registers.
- 2.3 The current Risk Management Strategy 2017-2021 was approved by this Committee in November 2016. The Strategy sets out the roles and responsibilities of both members and officers in the risk management process. Although all officers and members have a role to play, ultimate responsibility lies with the Leadership Team which is responsible for the effective implementation, monitoring and review of the Council's risk management arrangements. It is also responsible for identifying, owning and managing the key risks to the Council.

3 Risk Management

- 3.1 Since last year's report, the Leadership Team has taken steps to further develop its oversight of health and safety risks. In June 2018 it agreed to the establishment of a Corporate Health & Safety Group with officer representation from across the Council. The overall aim of this group is to oversee the implementation of health and safety across the Council and to support the Leadership Team in meeting its strategic health and safety responsibilities.
- 3.2 Over the course of 2017/18, work has also been undertaken to ensure that the recommendations from the fire risk assessments completed in 2017, have been implemented with regular updates to the Leadership Team. The fire risk assessments were repeated in 2018 and there is an action plan in place to address the recommendations raised.
- 3.3 The London Borough of Sutton continue to manage the Council's insurable risks. The claims are regularly reviewed to identify patterns and there were no significant claims to highlight. The claim for the fire at Ewell Court House in 2013 was closed with the other party accepting responsibility and the full costs reclaimed. As a result the costs of this claim will be removed from our history of claims which would have affected future premiums.
- 3.4 Several training sessions were held on the Council's role in an emergency for both officers and Members. This includes a Members Briefing on our responsibilities and training to some Members on communication in a crisis.

4 Leadership Risk Register

- 4.1 The Leadership Risks are the top ten strategic risks, these are refreshed twice yearly covering areas of major disruption, risks affecting the Borough and key policies. The Leadership Team reviewed the risks and they are now recorded in a priority order. The Leadership Risk Register is attached as **Annex 1** and is as follows:

L1	Continue delivering a balanced budget through the Medium Term Financial Strategy and the Income Generation and Enterprise Plan.	High
L2	Limited staffing resources in some areas affecting resilience and capacity in delivering the service delivery plan	High
L3	Delivering and implementing the Local Plan	High
L4	Lack of stability in IT systems, support and governance.	High
L5	The Council is at risk of being put in special measures for planning decisions	High
L6	Failure to implement improvements to data protection from GDPR resulting in possible data breaches	Med
L7	A lack of capacity and skills to deliver the commercialisation and enterprise agenda	Med
L8	Delivery of a viable project for the regeneration of the Wells	Med
L9	Monitoring the delivery of Plan E Project Plan by SCC.	High
L10	Impact of welfare reforms including the Homelessness Reduction Act	Med

5 Service Risks

- 5.1 The service risks are identified by the Heads of Service and are also reviewed by the Leadership Team. The service risk register has been enhanced to identify both the inherent risk level (without controls) and the mitigated risk which takes into account the control measures in place. There are currently 65 service risks and of those 5 were identified as high once the mitigation measures have been taken into account. These risks are monitored by the Leadership Team and are taken into account when compiling the Leadership Risk Register.

6 Financial and Manpower Implications

- 6.1 There are no specific manpower implications for the purposes of this report.
- 6.2 **Chief Finance Officer's comments: None for the purposes of this report.**

7 Legal Implications (including implications for matters relating to equality)

- 7.1 There are no legal implications arising from the contents of this report.
- 7.2 **Monitoring Officer's comments: None arising from the contents of this report.**

8 Sustainability Policy and Community Safety Implications

- 8.1 There are no implications for community safety.

9 Partnerships

- 9.1 The Council works with the London Borough of Sutton to manage its insurable risks.
- 9.2 The Council is part of the Surrey Local Resilience Forum (SLRF) which is a multi-agency group made up of representatives from public services including the emergency services, NHS England and the Environment Agency.



10 Risk Assessment





- 10.1 Risk management is an integral part of delivering services to the Council particularly in improving strategic, operational and financial management. Specific risks are identified and recorded for projects and changes to key policies and key targets.




11 Conclusion and Recommendations

- 11.1 The Committee is asked to:
- 11.2 Consider the report and confirm they are satisfied with the arrangements in place.
- 11.3 Consider the Leadership Risk Register and comment on any issues raised.

Ward(s) Affected: (All Wards);

Ref	Description of Risk/ Opportunity	Risk Level	Further Action required	Accountable Officer	Accountable Group	Corporate Priorities 2016-20	Mitigated Risk Level	Assurance level of controls (1 to 5)	Direction of Travel
L1	Continue delivering a balanced budget through the Medium Term Financial Strategy and the Income Generation and Enterprise Plan	High	Monitor and review any overspends and implement the new Income Generation and Enterprise Plan (Commercialisation agenda)	Chief Finance Officer the with efficiencies being delivered by Heads of Service & Board	Leadership Team & Income Gen Board	Managing Resources Delivering further efficiency savings and cost reductions	High	4	
L2	Limited staffing resources in some areas affecting resilience and capacity in delivering the service delivery plan	High	Review impact of pay and reward scheme. Analyse the risks in key services and develop handling plans to improve resilience Implement restructure	Leadership Team and Head of HR & Org Dev.	Leadership Team	Managing Resources – Developing multi skilled & motivated staff & delivering further efficiency savings and cost reductions	High	2	

L3	Delivering and implementing the Local Plan	High	An updated timetable has been agreed for the implementation of the Local Plan and the Masterplan being developed	Leadership Team	L&PPC	Underpinning all Corporate Priorities. Statutory requirement.	High	3	
L4	Lack of stability in IT systems , support and governance	High	Stabilisation and strengthening of the IT team Implement new governance arrangements with the ICT new ways of working group Review IT business continuity arrangements	Head of Revs , Bens & IT	Council	Underpinning all Corporate Priorities.	High	3	
L5	The Council is at risk of the being put in special measures for planning decisions	High	Continue to implement the improvement plan from the Planning Peer Review	Head of Planning	Leadership Team	Statutory requirement	High	2	
L6	Failure to implement improvements to data protection from GDPR resulting in possible data breaches	High	Mandatory training completed Data Protection Policy updated and GDPR action plan updated	Head of Legal/Head of Corporate Governance	Statutory Officer	Providing services digitally	Med	2	

L7	A lack of capacity and skills to deliver the commercialisation and enterprise agenda	High	Continue to review and develop skills and resources. Clear project plan	Leadership Team and Head of HR & OD.	Leadership Team/ HR Panel	Developing multi skilled & motivated staff	Med	3	
L8	Delivery of a viable project for the regeneration of the wells	Med	Report to S&R in Sept Consultation in Oct and planning permission due to be submitted in Nov	Head of Prop & Reg	S&R	Supporting and enabling the delivery of affordable homes	Med	3	NEW
L9	Successful implementation of Plan E Project Plan through SCC	High	Monitor costs and schedules within the SCC Project Plan Manage the risks of delivery through a third party. Report on additional costs to S&R	Chief Operating Officer	Leadership Team & S&R	Managing Resources	High	2	
L10	Impact of welfare reforms including the homeless reduction act	Med	No of households in temporary accommodation has reduced due to changes to provision of service	Head of Housing & Comm	S&R/ C&W	Supporting and enabling the delivery of affordable homes. Supporting those at risk of homelessness	Med	5	

Defined Strategic Risk Levels

	Low	Medium	High
<u>Impact of risk materialising</u>			
Finance –	Budget pressures < £100,000	Budget pressures between £100,000 and £200,000	Budget pressures > £200,000
Reputation	Loss of confidence and trust in the council felt by a small group or within a small geographical area	A limited loss of confidence and trust in the council within the local community	A major loss of confidence and trust in the council within the local community and wider with national interest
Service delivery	Disruption to a council service	Some disruption to more than one service across the council or severe disruption to one service	Severe wide spread disruption to services across the council
Health and Safety	Minor injury or illness requiring minimal intervention or treatment	Moderate injury or illness requiring professional intervention / multiple minor injuries	Extensive and multiple injuries including possible loss of life
Likelihood_of risk materialising	Remote / low probability	Possible / medium probability	Almost certain / highly probably

The above is not prescriptive criteria, but a guidance tool for management.

Assurance levels of the controls scored 1 to 5

Strength of controls is scored on a scale of 1(low) to 5 (high) to identify what is in place to mitigate the risks including controls, processes, action plans and targets.

CORPORATE PLAN: PERFORMANCE REPORT ONE 2018 TO 2019

Head of Service/Contact:	Gillian McTaggart, Head of Corporate Governance
Urgent Decision?(yes/no)	No
If yes, reason urgent decision required:	
Annexes/Appendices (attached):	Annex 1 – Overview of Key Priority Performance Targets Reported at Phase One Annex 2 – Performance Report One 2018 to 2019
Other available papers (not attached):	Corporate Plan 2016 to 2020

Report summary

This report provides an update on progress made against the Key Priority Targets 2018/19.

Recommendation (s)

That the Committee:

- (1) Notes the overview of the Key Priority Targets as at Phase One attached at Annex 1.**
- (2) Considers the performance reported in Annex 2 and identifies any areas of concern.**
- (3) Comments on the actions that have been proposed or taken where performance is currently a concern.**

1 Implications for the Council's Key Priorities, Service Plans and Sustainable Community Strategy

- 1.1 The Council has a four year Corporate Plan for 2016 to 2020.
- 1.2 The Corporate Plan sets out the Council's Vision - to make Epsom and Ewell an excellent place to live and work - and four Key Priorities:

- 1.2.1 Keeping our borough clean and green
- 1.2.2 Supporting our community
- 1.2.3 Managing our resources
- 1.2.4 Supporting businesses and our local economy
- 1.3 Sitting under the four Key Priorities are 66 Key Priority Targets (KPTs). Progress made against each of these targets is captured across the year and reported to this Committee.

2 Corporate Plan: Delivery against Key Priority Targets

- 2.1 This report comprises the first performance management report for 2018/19; it covers the period April to September 2018. An overview of progress made against each target has been included at **Annex 1**. The table below shows the number of KPTs assigned each RAG (Red/Amber/Green) status together with the number of targets that have been achieved, are on hold and those that are information only indicators.
- 2.2 Overall, good progress has been made with 77% of KPTs having been achieved or assigned green status. Six targets or 10% have been assigned red status. (*Please note that percentages exclude information only targets. Percentages do not add up to 100% due to rounding.)

Performance Status			
Key to reporting status		Number	Percentage*
Achieved	Achieved	16	26%
Green	On track	32	52%
Amber	Slightly off track, not a major concern or slippage	7	11%
Red	Off track or unlikely to be achieved for projected year	6	10%
On Hold	On Hold	1	2%
Information indicators	These indicators are for information only	4	-
Total		66	100%

3 Action identified to address Key Priority Targets with Red Status

- 3.1 As shown in the table above, 6 KPTs have been identified as having red status as at the end of September 2018. The table below sets out action agreed to address each of these particular KPTs.

No.	Red Key Performance Target	Action Identified
Keeping Our Borough Clean and Green		
1.	<p>Evaluate the available powers and legal options for enforcement and present a report to Committee for member consideration by September 2018.</p> <p>(Environment Committee)</p>	<p>In April 2018 the Strategy & Resources Committee approved a proposal for a more effective and co-ordinated approach to the Council's Community Safety role. The proposal encompassed amongst other items, identification of additional enforcement powers, training in enforcement processes and a more co-ordinated approach taken to enforcement. An officer group is meeting regularly and work is continuing.</p> <p>The joint enforcement project has been successful in obtaining funding from the Police and Crime Commissioner's Office.</p>
2.	<p>Deliver the Local Plan in accordance with:</p> <ul style="list-style-type: none"> • Pre-submission consultation by 30 September 2018 • Submission to the Secretary of State by 31 December 2018. <p>(Licensing and Planning Policy Committee)</p>	<p>Changes to the National Planning Policy Framework and the Housing Delivery Test necessitated changes to the Local Plan timetable. A new timetable was agreed by the Licensing Planning and Policy Committee in July 2018 which we are now working to.</p>
Supporting Our Community		
3.	<p>A report to Strategy and Resources Committee to determine the options to develop two units for residential accommodation in South Street by</p>	<p>A report will go to the Strategy & Resources Committee January 2019.</p>

	July 2018. (Strategy & Resources Committee)	
4.	Produce a policy for the management of events on Council land by April 2018. (Community & Wellbeing Committee)	The public events on Council land Group was established in April and is making good progress. The group are looking at agreeing a policy and a number of other key documents by March 2019.
5.	Less than 40 households living in emergency nightly paid temporary accommodation per month. (Community & Wellbeing Committee)	The number of households living in emergency temporary accommodation is steadily increasing and this is due to a number of changes including the introduction of the Homlessness Reduction Act and a reduction in the number of properties available from RSLs
Supporting Businesses and our Local Economy		
6.	No more than ten per cent of major planning applications allowed at appeal (using the two-year rolling assessment period defined by the government). (Licensing & Planning Policy Committee)	Improvement Plan put in place at the end of 2017 following support from Planning Advisory Service which included a Peer Review. The target has shown improvement. Work is continuing. This target is also monitored quarterly by the Leadership Team.

4 Proposals

- 4.1 The Committee is asked to consider the performance as at the end of September 2018 reported in **Annexes 1 and 2** and to identify any areas of concern.
- 4.2 The Committee is also asked to comment on the action agreed to address those KPTs assigned red status as at September 2018, set out in Table 2 above.

5 Financial and Manpower Implications

- 5.1 There are no particular financial or manpower implications arising from this report.

5.2 **Chief Finance Officer's comments: None for the purposes of this report.**

6 Legal Implications (including implications for matters relating to equality)

6.1 There are no legal implications arising from this report.

6.2 **Monitoring Officer's comments: none arising from the contents of this report.**

7 Sustainability Policy, Community Safety Implications and Partnerships

7.1 None for the purposes of this report.

8 Risk Assessment

8.1 Actions have been identified for those Key Priority Targets where performance is currently a concern.

9 Conclusion and Recommendations

9.1 The report provides a snapshot of progress made to date against the Council's KPTs. A number of targets have been achieved already, plus a substantial number of targets have been assigned green status. However, as at the end of September 2018, 6 targets have been assigned red status.

9.2 It is recommended that the Committee consider progress made to date and comment on any areas of concern

Ward(s) Affected: (All Wards);

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Overview of Key Priority Targets at Phase One

Keeping our borough clean and green	Supporting our community	Managing our resources	Supporting businesses and our local economy
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Key: Achieved or on target; slightly off target not a major concern or slippage; off target / unlikely to be achieved for projected year or not achieved; Target on hold




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Corporate Plan: Key Priority Performance Targets
Performance Report 2018/2019: Phase 1

Corporate Plan: Key Priority Performance Targets

Performance Report 2018/2019: Phase 1

Performance status						
Key to reporting target status		Keeping our borough clean and green	Supporting our community	Managing our resources	Supporting businesses and our local economy	Totals:
	On track	9	4	11	8	32
	Slightly off track not a major concern or slippage	2	1	1	3	7
	Off track or unlikely to be achieved for projected year	2	3	-	1	6
Achieved		7	5	3	1	16
On Hold	Held in abeyance pending review	-	-	-	1	1
Information Indicators	These indicators are for information only	1	-	-	3	4
Totals:		21	13	15	17	66

Keeping our Borough Clean and Green

We will do this by:

Providing quality parks, nature reserves and other public spaces that are safe, pleasant and well maintained

Accommodating sustainable development whilst protecting the green belt in accordance with Policy

Introducing a premium weekly waste and recycling service as standard for all residents and encourage more household waste to be recycled

Keeping the streets and public spaces clean and tidy

Taking action to reduce graffiti, littering, flytipping, flyposting illegal, advertising and dog fouling



KEY OUTCOMES


- Management plans for all major parks and public spaces
- Premium weekly recycling and waste service as standard for all residents introduced from Spring 2017
- Recycling clubs with local schools



KEY SUCCESS MEASURES


- External accreditation for our major parks and public spaces
- Delivery of the Biodiversity Action Plan
- Increase in recycled household refuse
- Street cleanliness assessment

Keeping our borough clean and green – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Establish a corporate group to evaluate the future approach to enforcement and community safety with an agreed work programme	Chief Operating Officer (S&R)	April 2018	April to Sept: A corporate group has been established and a number of joint operations resulting in enforcement actions have already taken place. A workshop with partners will be held on 19/11/18.	Achieved
			Oct to Dec:	
			Jan to March:	
Evaluate the available powers and legal options for enforcement and present a report to Committee for member consideration	Head of Environmental Health (EC)	September 2018	April to Sept: Not started. Existing enforcement is underway and future options are now part of the wider joint enforcement project which has received funding from a successful bid to the Police and Crime Commissioner.	R
			Oct to Dec:	
			Jan to March:	
Oversee the implementation of Public Space Protection Orders (PSPOs) as agreed by the Environment Committee	Head of Environmental Health (EC)	September 2018	April to Sept: The three original DPPAs have automatically become PSPOs ensuring continuation of effective controls. Report prepared for Leadership Team and Chairmen's on modified PSPO in accordance with Env Committee resolution Jan 2017.	Achieved
			Oct to Dec:	
			Jan to March:	

Keeping our borough clean and green – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Prepare options for introducing electric charging points	Head of Customer Services & Business Support (EC)	October 2018	April to Sept: Two service providers have come in to give a business overview and discuss options for Epsom & Ewell Borough Council. Capital Bid was submitted but deferred to 2019/20	
			Oct to Dec:	
			Jan to March:	
Introduce new sustainable planting scheme for flowers beds and flower displays	Head of Operational Services (EC)	December 2018	April to Sept: In progress - Report prepared for Environment Committee on 23 October.	
			Oct to Dec:	
			Jan to March:	
Maintain external accreditation to Alexandra Rec Ground, Ewell Court Park and Rosebery Park and a South and South East Award for Nonsuch Park	Head of Operational Services (CW)	December 2018	April to Sept: Alexandra Rec Ground, Ewell Court Park and Rosebery Park awarded a Green Flag. Nonsuch Park secured a South & South East In Bloom Silver Gilt Award in the Heritage/Historic Parks & Gardens category. Action completed.	Achieved
			Oct to Dec:	
			Jan to March:	

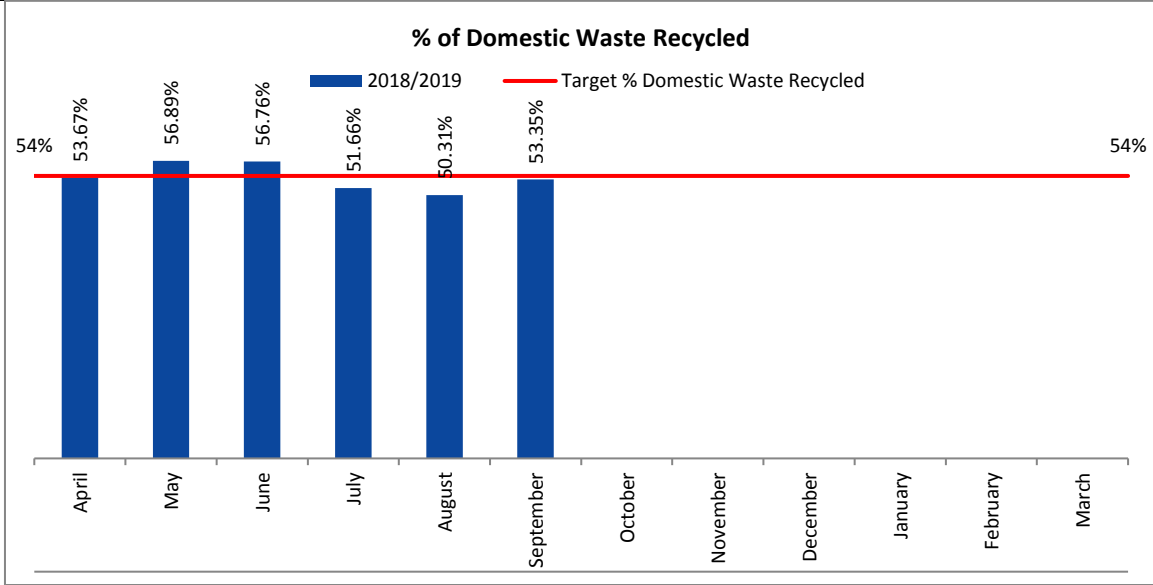
Keeping our borough clean and green – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Produce Operational Management Plans for Poole Road Park and Long Grove Park	Head of Operational Services (CW)	December 2018	April to Sept: Visitors surveys currently being conducted. Once the information is collated the Management Plans will be produced.	
			Oct to Dec:	
			Jan to March:	
Undertake a survey on the changes resulting from simply weekly collection and feedback on what would increase recycling behaviours	Head of Operational Services (EC)	September 2018	April to Sept: Survey completed, 655 responses received. Overwhelmingly positive towards the introduction and use of Simply Weekly Recycling. Report prepared for Environment Committee 23 October.	Achieved
			Oct to Dec:	
			Jan to March:	
Refurbishment of Rosebery Park Pond	Head of Operational Services (S&R)	July 2018	April to Sept: Official opening on 12 April - completed	Achieved
			Oct to Dec:	
			Jan to March:	

Keeping our borough clean and green – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Hold at least three Community Clean up events	Head of Operational Services (CW)	November 2018	April to Sept: Seven community litterpicks supported	Achieved
			Oct to Dec:	
			Jan to March:	
Complete the newt survey at Stones Road Allotment and report on future options	Head of Property & Regeneration (S&R)	September 2018	April to Sept: Newt survey completed. Reporting to S&R in January.	
			Oct to Dec:	
			Jan to March:	
Deliver the Local Plan in accordance with: <ul style="list-style-type: none"> Pre-submission consultation Submission to the Secretary of State 	Head of Planning (LPP)	September 2018	April to Sept: The Local Plan Regulation 19 submission is scheduled for Autumn 2019, on the basis that the changes to the National Planning Policy Framework (NPPF) and the Housing Delivery Test have led to further work and the commissioning of the Transformational Masterplan. The change in the programme has been reported to the Licencing and Planning Committee in July 2018.	
		December 2018	Oct to Dec:	
			Jan to March:	

Keeping our borough clean and green – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Complete the Green Belt Study 2 and report to LPPC	Head of Planning (LPP)	July 2018	April to Sept: Atkins have provided the completed final version of the Stage 2 Greenbelt and this has been reported to the Licencing and Planning Committee meeting of the 8th May 2018.	
			Oct to Dec:	
			Jan to March:	

Keeping our borough clean and green – Key priority

Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Recycle 54% domestic waste	Ian Dyer Head of Operational Service (EC)	March 2019	April to Sept: For the period April to September the average recycling rate is 53.77%.	
			Oct to Dec:	
			Jan to March:	



Keeping our borough clean and green – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Over the year at least 99% of bins to be collected on average each week	Head of Operational Services (EC)	March 2019	April to Sept: As at September, 99.87% bins collected.	
			Oct to Dec:	
			Jan to March:	
<div><div>Percentage of bins collected</div><div><div><div><div><div></div><div>■ % Collected</div></div><div><div></div><div>■ % Missed</div></div></div><div><div><div><div>April</div><div>99.89%</div><div>0.11%</div></div><div><div>May</div><div>99.89%</div><div>0.11%</div></div><div><div>June</div><div>99.90%</div><div>0.10%</div></div><div><div>July</div><div>99.88%</div><div>0.12%</div></div><div><div>August</div><div>99.88%</div><div>0.12%</div></div><div><div>September</div><div>99.87%</div><div>0.13%</div></div><div><div>October</div><div></div><div></div></div><div><div>November</div><div></div><div></div></div><div><div>December</div><div></div><div></div></div><div><div>January</div><div></div><div></div></div><div><div>February</div><div></div><div></div></div><div><div>March</div><div></div><div></div></div></div></div></div></div></div>				

G

Keeping our borough clean and green – Key priority

Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Fly tipping – remove 95% of all fly tips on council owned land within 5 working days of being reported to Operational Services	Head of Operational Services (EC)	March 2019	April to Sept: As at September, 98% of all fly tips on council owned land removed within 5 working days of being reported to Operational Services.	
			Oct to Dec:	
			Jan to March:	




Remove 95% of all fly-tips on Council owned land (with the exception of hazardous waste) within five working days of being reported to Operational Services


■ Total number of flytips reported
■ Total number of flytips investigated within 5 working days
◆ % removed

Month	Total number of flytips reported	Total number of flytips investigated within 5 working days	% removed
April	67	66	99%
May	114	110	96%
June	88	85	95%
July	95	94	97%
August	69	67	96%
September	80	80	98%

G

Keeping our borough clean and green – Key priority																											
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:																							
Number of fly tips dealt with; Tonnage of fly tips removed	Head of Operational Services (EC)	March 2019	April to Sept: As at September, a total of 495 fly tips were dealt with totalling 51.52 tons.	Information only indicator																							
			Oct to Dec:																								
			Jan to March:																								
<table><thead><tr><th>Month</th><th>Total Number of Fly tips removed</th><th>Tonnage of fly tips removed</th></tr></thead><tbody><tr><td>April</td><td>65</td><td>9.94</td></tr><tr><td>May</td><td>110</td><td>11.32</td></tr><tr><td>June</td><td>84</td><td>4.1</td></tr><tr><td>July</td><td>92</td><td>4.32</td></tr><tr><td>August</td><td>66</td><td>14.78</td></tr><tr><td>September</td><td>78</td><td>7.06</td></tr><tr><td>Total</td><td>495</td><td>51.52</td></tr></tbody></table>			Month		Total Number of Fly tips removed	Tonnage of fly tips removed	April	65	9.94	May	110	11.32	June	84	4.1	July	92	4.32	August	66	14.78	September	78	7.06	Total	495	51.52
Month	Total Number of Fly tips removed	Tonnage of fly tips removed																									
April	65	9.94																									
May	110	11.32																									
June	84	4.1																									
July	92	4.32																									
August	66	14.78																									
September	78	7.06																									
Total	495	51.52																									

Keeping our borough clean and green – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Graffiti – remove 95% of graffiti on council owned land within 5 working days of being reported to Operational Services	Head of Operational Services (EC)	March 2019	April to Sept: 100% graffiti removed.	
			Oct to Dec:	
			Jan to March:	
Graffiti – remove offensive graffiti within two working days of being reported to Operational Services	Head of Operational Services (EC)	March 2019	April to Sept: 100% graffiti removed.	
			Oct to Dec:	
			Jan to March:	
Graffiti – remove 95% of graffiti on private property within two working days from receiving the waiver document	Head of Operational Services (EC)	March 2019	April to Sept: 100% graffiti removed.	
			Oct to Dec:	
			Jan to March:	

Keeping our borough clean and green – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Street Cleaning /Cleanliness (Twice yearly street cleansing survey (Phase 1: April to Aug; Phase 2 Sept to Mar) based on a random selection of 113 areas achieving a cleanliness rating of Grade B or above (grading being A to D) in 75% of all selected streets	Head of Operational Services (EC)	March 2019	April to Sept: Phase one of the survey sample was completed in August. All six areas surveyed were graded B or above - graffiti 100%, grass cutting 97.25%, fly posting 96%, Litter 89%, Detritus 78% and weeds 66%.	
			Oct to Dec:	
			Jan to March:	

Supporting our Community

We will do this by:

Supporting and enabling the delivery of affordable homes

Helping those at risk of homelessness

Promoting healthy and active lifestyles, especially for the young and elderly

Encouraging and supporting volunteering initiatives

KEY OUTCOMES

Increase supply of homes to meet local needs

Residents supported from becoming homeless

Implement the Leisure Development Strategy

KEY SUCCESS MEASURES

Delivery of affordable homes

Long term empty properties brought back into use



Reduction in homelessness
Increase our supply of temporary accommodation

Deliver the targets within the Leisure Development Strategy

Supporting our community – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Appraise options for the development of the Wells Site and agreed community space	Head of Property & Regeneration (S&R)	September 2018	April to Sept: Options appraisal completed and reported to September S&R. Authority provided to commence consultation with residents on the proposed site configuration.	Achieved
			Oct to Dec:	
			Jan to March:	
Complete the transfer and support the handover of Horton Chapel to the Horton Chapel Arts & Heritage Society	Head of Legal & Democratic Services (S&R)	March 2019	April to Sept: External solicitors appointed (Cripps) and agreement reached to transfer the Chapel by way of a 125 year lease. A long lease structure provides the Council with the necessary control to ensure the substantial public funds (s106 funding) are used for their intended purpose. Legal documentation progressing.	G
			Oct to Dec:	
			Jan to March:	
Deliver the agreed initial Community Infrastructure Levy (CIL) and Civic Investment Fund scheme (CIF) in line with timetable	Head of Corporate Governance (S&R)	July 2018	April to Sept: The process for agreeing CIL 15% bids and the Borough Investment Fund (BIF) were approved by S&R in April. The CIL Panel approved 8 bids. The BIF scheme for improvements to shop fronts went live in September	G
			Oct to Dec:	
			Jan to March:	

Supporting our community – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
<ul style="list-style-type: none"> To complete the build in the Long Grove Skate Park extension Arrange a fun day to officially open the park 	Head of Environmental Health (CW)	May 2018 June 2018	April to Sept: The new extension to Long Grove Skate Park was completed in May 2018. Due to the inclement weather during the build phase the area needed time to reinstate and so it was decided that the hosting of a fun day would not be appropriate. The facility is now open and regularly being used.	Achieved
			Oct to Dec:	
			Jan to March:	
A report to S&R Committee to determine the options to develop two units for residential accommodation in South Street	Head of Property & Regeneration Head of Environmental Health (S&R)	July 2018	April to Sept: Planning permission successfully obtained but programme delayed due to building works, contract to be tendered in next quarter and a report to S&R will follow in quarter four.	R
			Oct to Dec:	
			Jan to March:	



Supporting our community – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
As part of the Health & Wellbeing Strategy, review the social prescribing pilot scheme and recommend the next steps to the Community and Wellbeing Committee	Head of Operational Services (CW)	September 2018	April to Sept: Presentation of the review of Social Prescribing was given to the Leadership team on the 14 August 2018. An outcome of the review by the CCG's was to provide £30k funding for a link Worker for a period of one year. The link worker is now in post and the new model of Social prescribing is being presented to the Community and Wellbeing Committee on the 9 October 2018 for endorsement.	Achieved
			Oct to Dec:	
			Jan to March:	
Produce a policy for the management of events on Council land	Head of Operational Services (CW)	April 2018	April to Sept: In progress - Working as part of a steering group headed by the Chief Operating Officer.	R
			Oct to Dec:	
			Jan to March:	

Supporting our community – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Support the delivery of the Hollymoor Lane Parade	Head of Property & Regeneration (S&R)	March 2019	April to Sept: Construction programme on schedule and due to complete within the next quarter.	
			Oct to Dec:	
			Jan to March:	
Submission of a planning application to extend Epsom Cemetery	Head of Environmental Health (CW)	September 2018	April to Sept: The planning application for the cemetery was submitted on 25 September 2018. The land has been acquired and a revised budget agreed by S&R. A planning decision is expected in Dec 2018.	Achieved
			Oct to Dec:	
			Jan to March:	
A review of the CCTV provision provided by the Council	Head of Environmental Health (S&R)	March 2019	April to Sept: Initial discussions with MVDC and research from other LAs.	
			Oct to Dec:	
			Jan to March:	



Supporting our community – Key priority



Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:																										
Less than 40 households living in emergency nightly paid temporary accommodation per month	Head of Environmental Health (CW)	March 2019	April to Sept: As at September there were 41 households accommodated in emergency temporary accommodation.																											
			Oct to Dec:																											
			Jan to March:																											
<div><h3>Emergency temporary accommodation</h3><table><thead><tr><th>Month</th><th>Net number of households</th></tr></thead><tbody><tr><td>April</td><td>34</td></tr><tr><td>May</td><td>30</td></tr><tr><td>June</td><td>34</td></tr><tr><td>July</td><td>37</td></tr><tr><td>August</td><td>38</td></tr><tr><td>September</td><td>41</td></tr><tr><td>October</td><td></td></tr><tr><td>November</td><td></td></tr><tr><td>December</td><td></td></tr><tr><td>January</td><td></td></tr><tr><td>February</td><td></td></tr><tr><td>March</td><td></td></tr></tbody></table><p>■ Net number of households in emergency temporary accommodation at end of month</p></div>					Month	Net number of households	April	34	May	30	June	34	July	37	August	38	September	41	October		November		December		January		February		March	
Month	Net number of households																													
April	34																													
May	30																													
June	34																													
July	37																													
August	38																													
September	41																													
October																														
November																														
December																														
January																														
February																														
March																														




R


Supporting our community – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
At least 8 households accommodated through the private sector leasing scheme	Head of Environmental Health (CW)	March 2019	April to Sept: As at September, eight households have been accommodated through the private sector leasing scheme.	
			Oct to Dec:	
			Jan to March:	
At least 30 households supported through the rent deposit scheme	Head of Environmental Health (CW)	March 2019	April to Sept: As at September there were 22 households supported through the rent deposit scheme.	
			Oct to Dec:	
			Jan to March:	

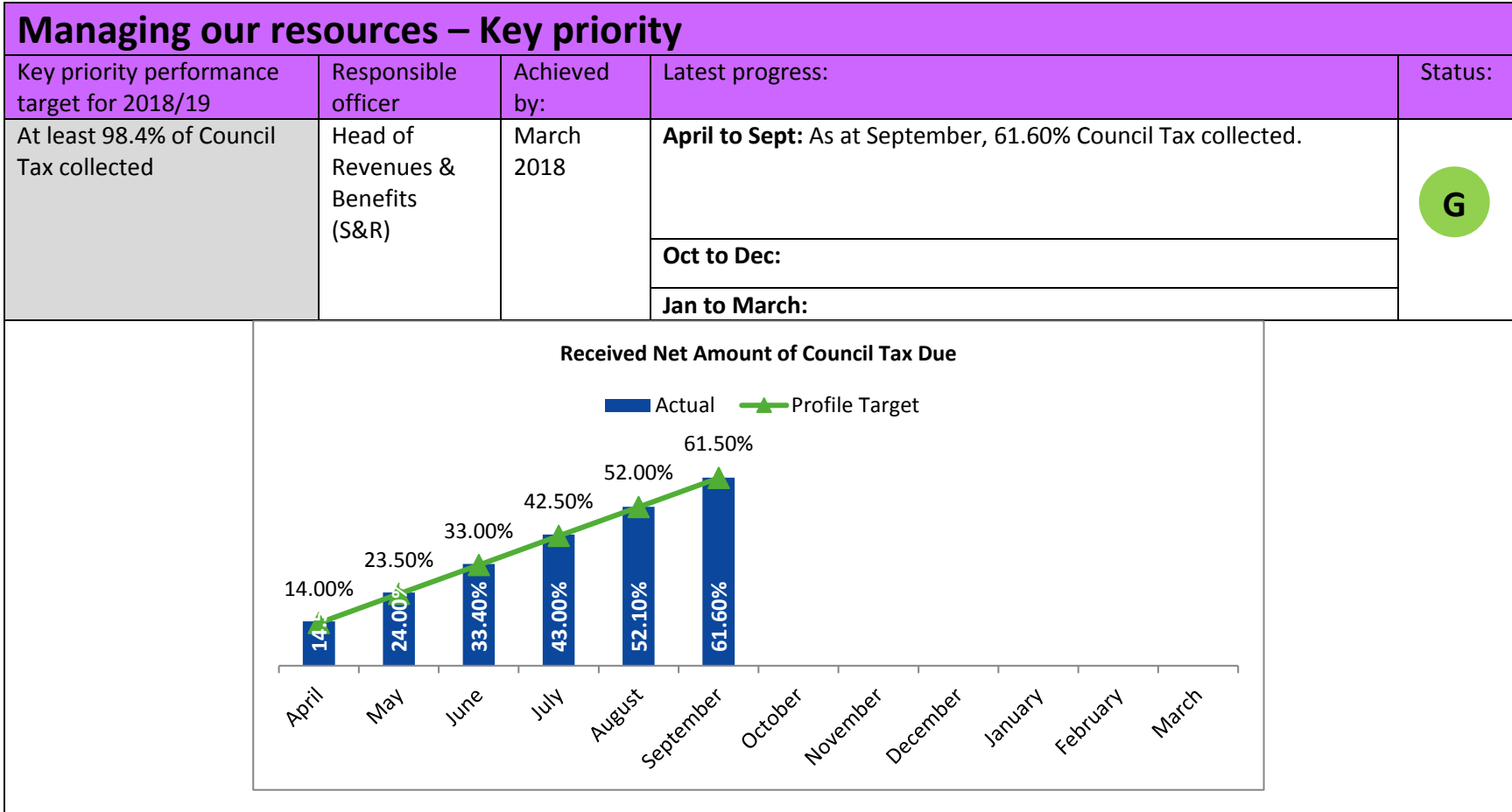


Managing our resources – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Implement the new on-street parking agreement	Head of Customer Services & Business Support (EC)	September 2018	April to Sept: Current agreement has been extended until 31 Dec 2018. Surrey CC have verbally offered an extension to 31 Mar 19 whilst finer points of longer term agreement can be finalised.	
			Oct to Dec:	
			Jan to March:	
<ul style="list-style-type: none"> • Delivery of the Income Generation Plan, and • Supporting marketing action plan 	Head of Financial Services Head of HR & OD (S&R)	April 2018 September 2018	April to Sept: Marketing plans have been developed for each of the services within the Income Generation work streams	
			Oct to Dec:	
			Jan to March:	
Produce a 10 year Financial Projection for the Council	Head of Financial Services (S&R)	September 2018	April to Sept: Completed and presented to Financial Policy Panel on 11 September 2018.	Achieved
			Oct to Dec:	
			Jan to March:	

Managing our resources – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Retender the FM contract to be awarded	Head of Property & Regeneration (S&R)	January 2019	April to Sept: Retender procurement process on schedule - official contract renewal notice published 24 July 2018 inviting bidders to tender. Submissions received 24 August 2018 and shortlisted bidders notified 12 Sept 2018.	
			Oct to Dec:	
			Jan to March:	
Agree an action plan and Implement the recommendations from the Playhouse Review	Head of Venues & Facilities (CW)	October 2018	April to Sept: An action plan has been agreed and updates reported to Community and Wellbeing Committee on 9/10/18.	
			Oct to Dec:	
			Jan to March:	
Replace the stage and first floor changing rooms at the Playhouse	Head of Venues & Facilities (CW)	March 2019	April to Sept: This target has been implemented.	Achieved
			Oct to Dec:	
			Jan to March:	

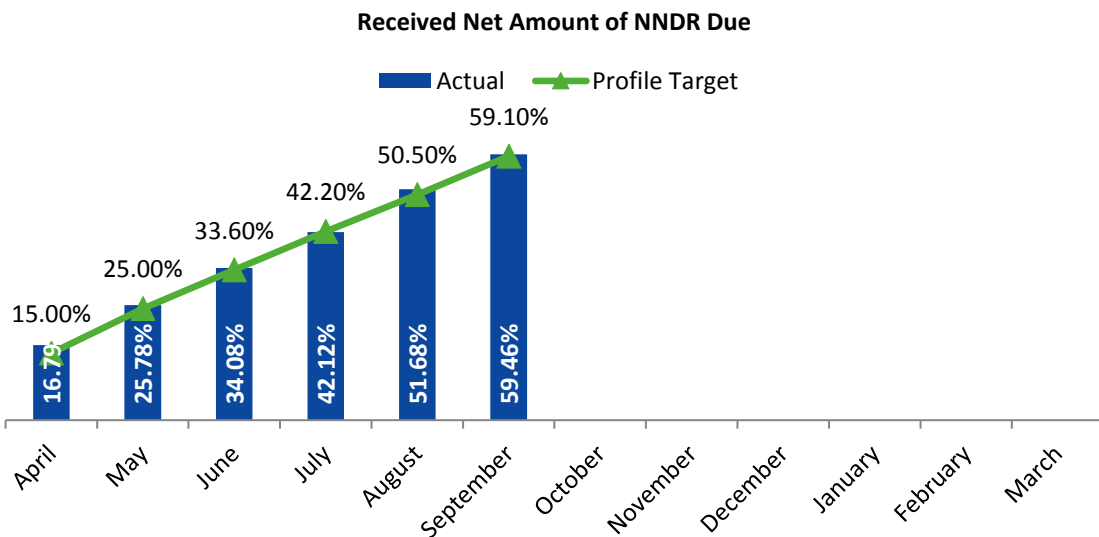
Managing our resources – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Replace the air conditioning units and lighting at Bourne Hall	Head of Venues & Facilities (CW)	March 2019	April to Sept: This target has been implemented.	Achieved
			Oct to Dec:	
			Jan to March:	
Improve on-line functionality to increase digital services for residents	Head of Revenues & Benefits (S&R)	March 2019	April to Sept: The self-service was soft launched on the website on 9 August 2018 to ensure the system was working well and fine tune the processes around this change. To date 396 users have registered to use the service and the feedback has been overwhelmingly positive.	
			Oct to Dec:	
			Jan to March:	
Co-ordinate and support the Council's civic events for 2018 to commemorate WW1, Epsom 400 and Suffragette	Head of HR & OD (S&R)	December 2018	April to Sept: Poppies have been put up throughout the borough – these were raised to mark the anniversary of 100 day offensive. Bourne Hall Museum held our first World War One anniversary public event and have also been advising the Ashley Centre in their World War One project. On 7th Oct a small commemoration in Epsom Market Place to mark the death of 32 year-old Trooper Frederick. We are also involved in the activity arranged by St Paul's Howell Hill on Saturday 10 November. And on Sun 11 Nov we will join the chain of beacons that are being lit across the UK and commonwealth, with a floating beacon on the lake at Bourne Hall.	
			Oct to Dec:	
			Jan to March:	
Report on adopting a policy on single use plastics and an action plan to Strategy & Resources	Head of Legal & Democratic Services (S&R)	September 2018	April to Sept: Delayed whilst considering impact of County Council discussions. A report will be brought to S&R before the end of 2018.	
			Oct to Dec:	
			Jan to March:	

Managing our resources – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
To agree an unauthorised encampment protocol with partners	Head of Legal & Democratic Services (S&R)	May 2018	April to Sept: Surrey Police have issued a new Protocol on dealing with travelling encampments. The next stage is for the Council to work with other landowners to work to manage and remove unauthorised encampments within the Borough.	
			Oct to Dec:	
			Jan to March:	



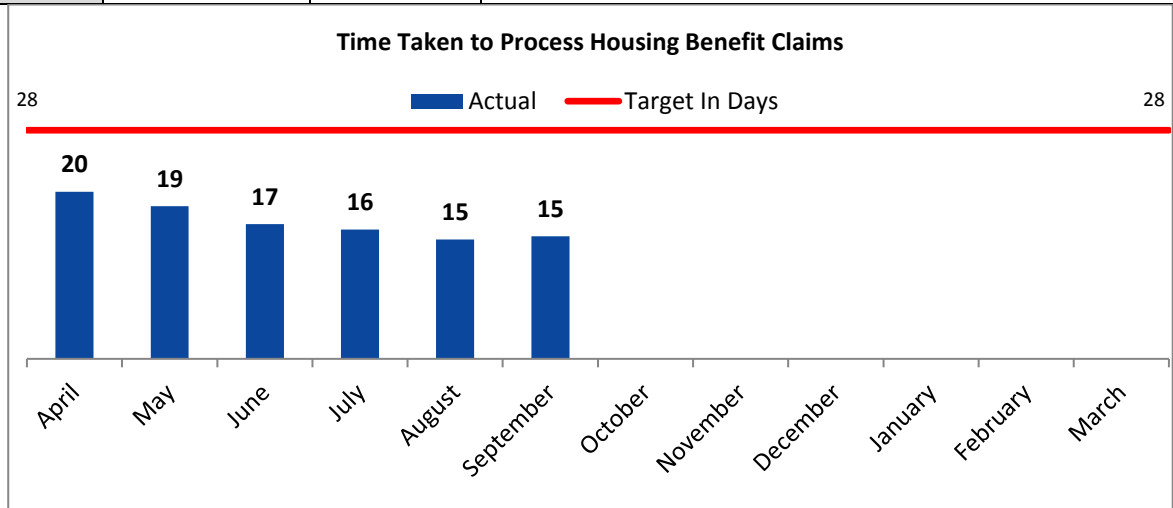
Managing our resources – Key priority

Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
At least 99.0% of Business Rates to be collected	Head of Revenues & Benefits (S&R)	31 March 2018	April to Sept: As at September, 59.46% of Business Rates collected.	G
			Oct to Dec:	
			Jan to March:	



Managing our resources – Key priority

Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Process new Housing Benefit claims within an average time of 28 days	Head of Revenues & Benefits (S&R)	March 2018	April to Sept: As at September, new Housing Benefit claims processed within an average time of 15 days.	G
			Oct to Dec:	
			Jan to March:	



Managing our resources – Key priority																																											
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:																																							
Process Housing Benefit change of circumstances within an average time 11 days	Head of Revenues & Benefits (S&R)	31 March 2018	April to Sept: As at September, Housing Benefit change of circumstances claims processed within an average time of 4 days.	<div>G</div>																																							
			Oct to Dec:																																								
			Jan to March:																																								
<div><p>Time Taken to Process Housing Benefit Change Events</p><p>Actual Target In Days</p><table><thead><tr><th>Month</th><th>Actual (Days)</th><th>Target (Days)</th></tr></thead><tbody><tr><td>April</td><td>4</td><td>11</td></tr><tr><td>May</td><td>5</td><td>11</td></tr><tr><td>June</td><td>4</td><td>11</td></tr><tr><td>July</td><td>4</td><td>11</td></tr><tr><td>August</td><td>4</td><td>11</td></tr><tr><td>September</td><td>4</td><td>11</td></tr><tr><td>October</td><td>-</td><td>11</td></tr><tr><td>November</td><td>-</td><td>11</td></tr><tr><td>December</td><td>-</td><td>11</td></tr><tr><td>January</td><td>-</td><td>11</td></tr><tr><td>February</td><td>-</td><td>11</td></tr><tr><td>March</td><td>-</td><td>11</td></tr></tbody></table></div>					Month	Actual (Days)	Target (Days)	April	4	11	May	5	11	June	4	11	July	4	11	August	4	11	September	4	11	October	-	11	November	-	11	December	-	11	January	-	11	February	-	11	March	-	11
Month	Actual (Days)	Target (Days)																																									
April	4	11																																									
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Supporting Businesses and our Local Economy

We will do this by:

Supporting a comprehensive retail, commercial and social offer

Maintaining strong links with local business leaders and representative organisations

Supporting developers to bring forward the development of town centre sites

Delivering an affordable Economic Strategy

Promoting our Borough as an excellent place to do business

KEY OUTCOMES

High quality/innovative building design

Improved transport infrastructure

Visual appearance of the town/shopping centres enhanced




KEY SUCCESS MEASURES



Businesses attending the Business Leaders' meetings



Delivery of Plan E to improve traffic flow into Epsom Town Centre

Delivery of the Economic Development Strategy Action Plan

Space for start-up/incubator businesses to grow and expand

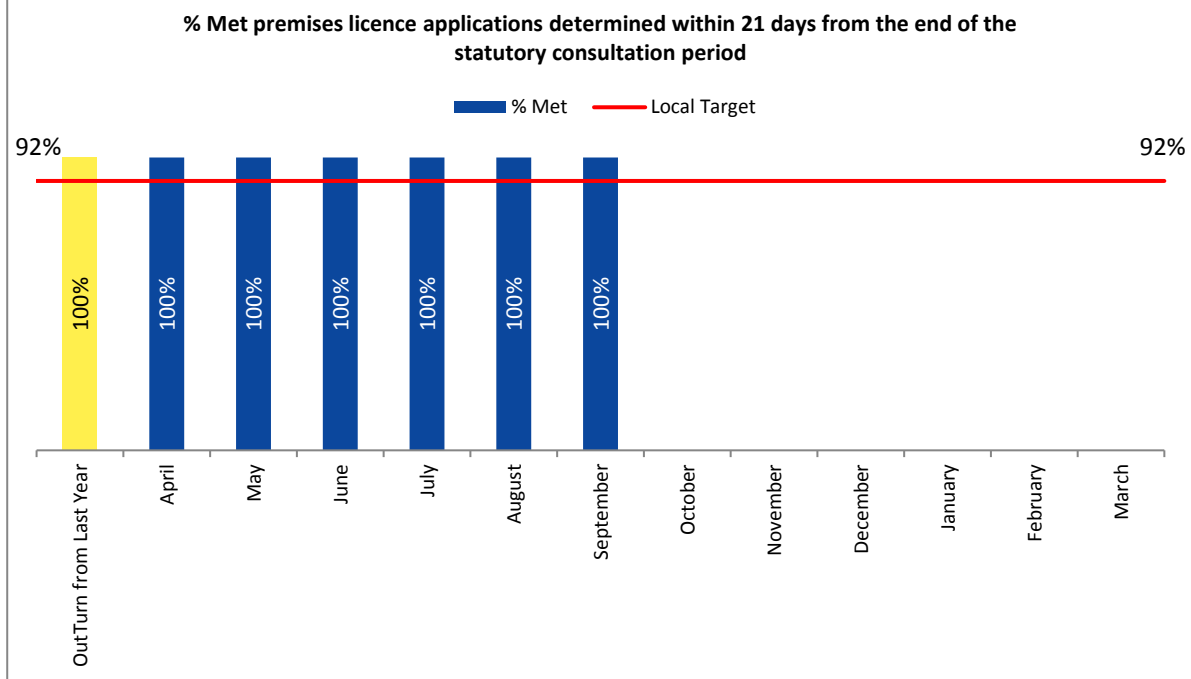
Supporting businesses and our local economy – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Upgrades to the Ashley Centre Car Park installing: <ul style="list-style-type: none"> Fencing, railings, mesh and fire doors Deckshield work to be completed 	Head of Customer Services & Business Support (EC)	December 2018 March 2019	April to Sept: Tender process complete and contract awarded for fencing and mesh. Final surveyor assessments undertaken on areas where specialist fixing required. Planning permission obtained for fencing. Materials ordered. Work to commence late Oct/early Nov. Tender process for Railings underway. Works may run into 2019 if suspended over Christmas. Deckshield work scheduled for Q4 2018-19. Tender document being prepared.	
			Oct to Dec:	
			Jan to March:	
Letting availability of South Street premises ground floor as a commercial occupation	Head of Property & Regeneration (S&R)	March 2019	April to Sept: This is subject to refurbishment completion, planning permission agreed but works delayed.	
			Oct to Dec:	
			Jan to March:	
Run an event for local businesses with the Surrey Chamber of Commerce by (Economic Development Contract)	Head of Planning / External Economic Development Support (S&R)	August 2018	April to Sept: A successful event was held with Surrey Chambers of Commerce on Tuesday 26 June on the introduction of GDPR that attracted around 30 attendees and was held at Nonsuch Mansion.	Achieved
			Oct to Dec:	
			Jan to March:	
Host an annual welcome event with University of the Creative Arts (UCA) business students	Head of HR & OD (S&R)	October 2018	April to Sept: Initial discussions have taken place to scope the format of the event with next steps to engage with UCA.	
			Oct to Dec:	
			Jan to March:	


Supporting businesses and our local economy – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Work in conjunction with UCA to produce a promotional film to promote Epsom & Ewell	Head of Planning External Economic Development Support (S&R)	March 2019	April to Sept: A film has been produced by UCA, awaiting finalisation before being published.	
			Oct to Dec:	
			Jan to March:	
Support the work of the Business Improvement District (BID)	Chief Legal Officer and Head of Revenues & Benefits, (S&R)	March 2019	April to Sept: Council officer has been appointed to the Bid Board. Officer is supporting the Bid both from the interests of the Council as a Bid levy payer but also from a local authority perspective. This has resulted in governance arrangements being put in place and expansion of the Bid Board to further the interests of the Bid area. Support from the Council has now resulted in the collection rate for payment of the levy reaching over 80%.	
			Oct to Dec:	
			Jan to March:	

Supporting businesses and our local economy – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Produce an economic profile of the Borough including ward profiles	Head of Corporate Governance (S&R)	December 2018	April to Sept: Borough and ward profiles are being drafted and will be available in December. These will be living documents that will be developed throughout the year as additional statistical information becomes available.	
			Oct to Dec:	
			Jan to March:	
Report to S&R on the options to establish a joint committee	Head of Legal & Democratic Services (S&R)	July 2018	April to Sept: Held in abeyance pending review by County Council of local committees.	On Hold
			Oct to Dec:	
			Jan to March:	
Develop a Memorandum of Understanding for the market place	Head of Planning External Economic Development Support (S&R)	December 2018	April to Sept: Content has been determined. Working with SCC to ensure target is delivered within the specified timeframe.	
			Oct to Dec:	
			Jan to March:	

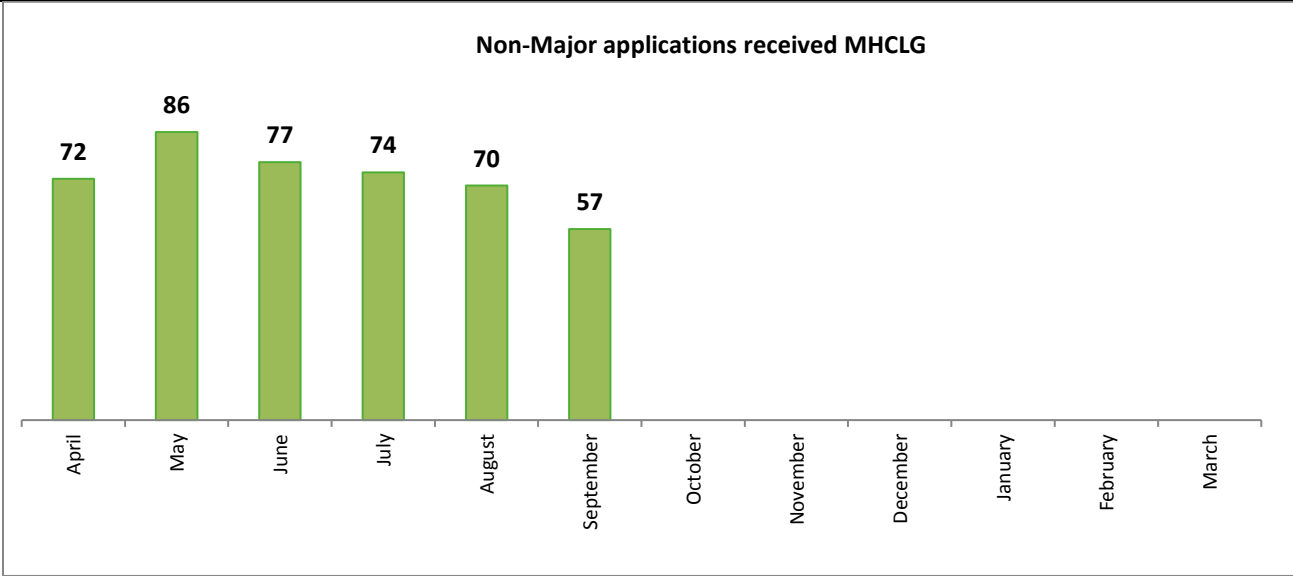
Supporting businesses and our local economy – Key priority

Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
At least 90% of premises licence application determined within 21 days from the end of the statutory consultation period	Head of Housing & Environmental Services (L&PPC)	March 2019	April to Sept: For the period April to September there were 34 premises licence applications made and 100% were determined within 21 days from the end of the statutory consultation period.	G
			Oct to Dec:	
			Jan to March:	



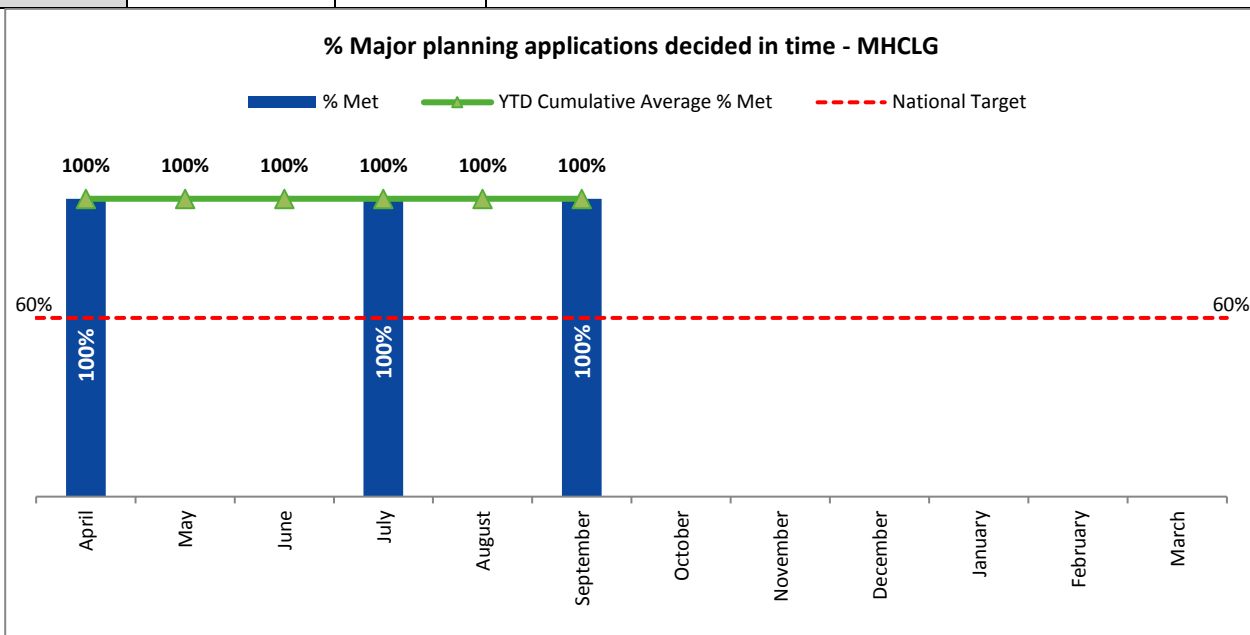
Supporting businesses and our local economy – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Ten percent reduction of 0-2 food hygiene rated food businesses	Head of Housing & Environmental Services (EC)	March 2019	April to Sept: 16% increase. Total of 4 additional premises 0-2 rated.	
			Oct to Dec:	
			Jan to March:	

Supporting businesses and our local economy – Key priority																														
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:																										
Number of Major planning applications MHCLG	Head of Planning (LPP)	March 2019	April to Sept: For the period April to September there were 20 major applications received (MHCLG).	Information only indicator																										
			Oct to Dec:																											
			Jan to March:																											
<div><div>Major applications received</div><table><thead><tr><th>Month</th><th>Number of applications</th></tr></thead><tbody><tr><td>April</td><td>1</td></tr><tr><td>May</td><td>2</td></tr><tr><td>June</td><td>4</td></tr><tr><td>July</td><td>6</td></tr><tr><td>August</td><td>2</td></tr><tr><td>September</td><td>5</td></tr><tr><td>October</td><td>0</td></tr><tr><td>November</td><td>0</td></tr><tr><td>December</td><td>0</td></tr><tr><td>January</td><td>0</td></tr><tr><td>February</td><td>0</td></tr><tr><td>March</td><td>0</td></tr></tbody></table></div>					Month	Number of applications	April	1	May	2	June	4	July	6	August	2	September	5	October	0	November	0	December	0	January	0	February	0	March	0
Month	Number of applications																													
April	1																													
May	2																													
June	4																													
July	6																													
August	2																													
September	5																													
October	0																													
November	0																													
December	0																													
January	0																													
February	0																													
March	0																													

Supporting businesses and our local economy – Key priority																														
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:																										
Number of Non-Major planning applications MHCLG	Head of Planning (LPP)	March 2019	April to Sept: For the period April to September there were 436 non-major planning applications received (MHCLG).	Information only indicator																										
			Oct to Dec:																											
			Jan to March:																											
<div>Non-Major applications received MHCLG</div>  <table><thead><tr><th>Month</th><th>Number of Applications</th></tr></thead><tbody><tr><td>April</td><td>72</td></tr><tr><td>May</td><td>86</td></tr><tr><td>June</td><td>77</td></tr><tr><td>July</td><td>74</td></tr><tr><td>August</td><td>70</td></tr><tr><td>September</td><td>57</td></tr><tr><td>October</td><td></td></tr><tr><td>November</td><td></td></tr><tr><td>December</td><td></td></tr><tr><td>January</td><td></td></tr><tr><td>February</td><td></td></tr><tr><td>March</td><td></td></tr></tbody></table>					Month	Number of Applications	April	72	May	86	June	77	July	74	August	70	September	57	October		November		December		January		February		March	
Month	Number of Applications																													
April	72																													
May	86																													
June	77																													
July	74																													
August	70																													
September	57																													
October																														
November																														
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January																														
February																														
March																														

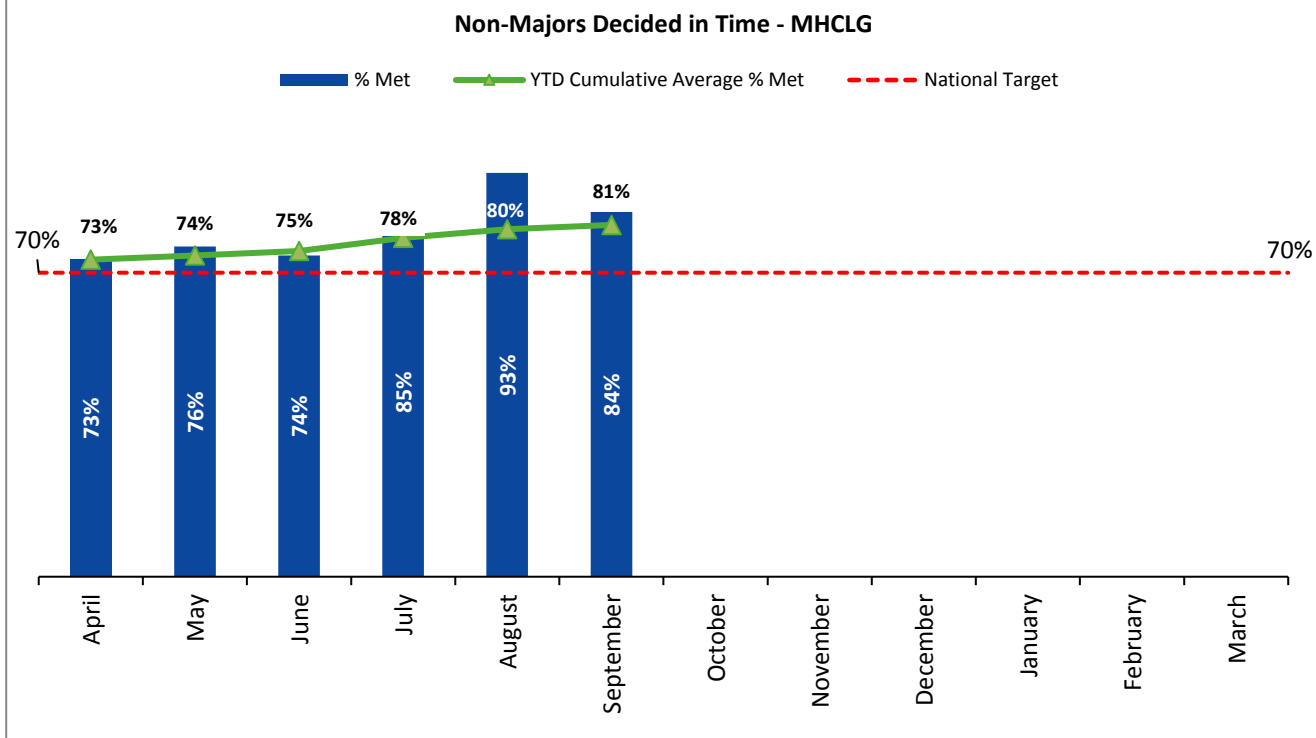
Supporting businesses and our local economy – Key priority


Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
At least 60% of Major planning applications decided in time - MHCLG	Head of Planning (LPP)	March 2019	April to Sept: 100% of major planning applications decided in time (MHCLG). There were no applications decided in May, June and August.	G
			Oct to Dec:	
			Jan to March:	



Supporting businesses and our local economy – Key priority

Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
At least 70% of Non-Major planning applications decided in time - MHCLG	Head of Planning (LPP)	March 2019	April to Sept: As at September (YTD cumulative), 81% of non-major planning applications decided in time (MHCLG).	G
			Oct to Dec:	
			Jan to March:	



Supporting businesses and our local economy – Key priority				
Key priority performance target for 2018/19	Responsible officer	Achieved by:	Latest progress:	Status:
Quality of Decisions: 24-Month Risk Monitor for Major Decisions (National Threshold for designation 10%)	Head of Planning (LPP)	March 2019	April to Sept: <ul style="list-style-type: none"> Quarter 1 (Apr-Jun): 15.38% Quarter 2 (Jul -Sep): 14.29% 	
			Oct to Dec:	
			Jan to March:	
The number of officer recommendations overturned by the Planning Committee	Head of Planning (LPP)	March 2019	April to Sept: The Planning Committee have determined all referred planning applications in accordance with the Officers recommendation.	Information only indicator
			Oct to Dec:	
			Jan to March:	

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WORK PROGRAMME 2018/19

Head of Service/Contact:	Gillian McTaggart, Head of Corporate Governance
Urgent Decision?(yes/no)	No
If yes, reason urgent decision required:	
Annexes/Appendices (attached):	Annex 1 – Work Programme 2018/19
Other available papers (not attached):	Report and Minutes of the meeting of the Audit, Crime & Disorder and Scrutiny Committee, 19 June 2018

Report summary

This report updates the Committee on its work programme 2018/19.

Recommendation (s)

- (1) That the Committee notes the current position of its work programme 2018/19 attached at Annex 1.**

1 Implications for the Council's Key Priorities, Service Plans and Sustainable Community Strategy

- 1.1 Implications vary across the different items agreed for inclusion in the work programme. Specific implications are considered by the Committee before undertaking any specific investigation.

2 Background

- 2.1 Paragraph 1 of the Overview and Scrutiny Procedure Rules requires the Committee to approve an annual overview and scrutiny work programme including the programme of any sub-committees or panels.
- 2.2 The Committee agreed its work programme 2018/19 at its meeting in June 2018. **Annex 1** shows the current position of the work programme.

- 2.3 Two changes have been made since the Committee's last meeting. The report on progress made on implementing internal audit recommendations and the report on Compliance with the Surveillance Code of Conduct have been moved from the current agenda to that of 7 February 2019.

3 Proposals

- 3.1 That the Committee notes the current position of its 2018/19 work programme attached at **Annex 1**.

4 Financial and Manpower Implications

- 4.1 The Committee's work programme has workload implications for both its members and officers. In depth scrutiny reviews undertaken by task groups require more intensive input for specific periods.
- 4.2 **Chief Finance Officer's comments: None for the purposes of this report.**

5 Legal Implications (including implications for matters relating to equality)

- 5.1 The work programme attached at **Annex 1** has been designed to meet the Committee's responsibilities set out in legislation and its Terms of Reference.
- 5.2 **Monitoring Officer's comments: there are no comments arising from the contents of this report.**

6 Sustainability Policy and Community Safety Implications

- 6.1 Scrutiny of the Community Safety Partnership is a responsibility of the Audit, Crime & Disorder and Scrutiny Committee.

7 Partnerships

- 7.1 The Committee has the ability to make reports or recommendations on matters which affect the authority's area or the inhabitants of that area.

8 Risk Assessment

- 8.1 Maintenance of an annual work programme helps to ensure the Committee meets its responsibilities both statutory and local. It enables the Committee to manage its workload across the year, identifying priorities and rescheduling work according to risk/need.

9 Conclusion and Recommendations

- 9.1 Under its terms of reference the Audit, Crime & Disorder and Scrutiny Committee is responsible for setting its own work programme. The Committee approved its work programme 2018/19 in June 2018.

Ward(s) Affected: (All Wards);

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Audit, Crime & Disorder and Scrutiny Committee Work Programme 2018/19

MEETING DATE	ITEMS FOR CONSIDERATION BY FULL COMMITTEE	ITEMS FOR CONSIDERATION BY APPOINTED TASK GROUP(S)
19 June 2018	<ul style="list-style-type: none"> • Internal Audit Monitoring Report 2017/18 • Internal Audit Assurance Report 2017/18 • Annual Governance Statement 2017/18 • Corporate Plan: Year End Performance Report 2017 to 2018 and Provisional Targets for 2018 to 2019 • Community Safety Partnership 2017/18 – End of Year Report • Use of Delegated Powers Annual Report • Annual Report on the Regulation of Investigatory Powers Act 2000 • Complaints – Annual Monitoring Report • Work Programme 2018/19 	
22 Nov 2018	<ul style="list-style-type: none"> • Internal Audit Monitoring Report 2018/19 • Annual Governance Statement and District Auditor's Audit Findings – Progress Against Action Plans • Risk Management Framework Annual Report • Corporate Plan: Performance Report One 2018 to 2019 • Work Programme 2018/19 	
7 Feb 2019	<ul style="list-style-type: none"> • Internal Audit Monitoring Report 2018/19 • Progress on the Implementation of Internal Audit Recommendations • Corporate Plan: Performance Report Two 2018 to 2019 • Compliance with Surveillance Camera Code of Practice • Work Programme 2018/19 	
16 April 2019	<ul style="list-style-type: none"> • Internal Audit Monitoring Report 2018/19 • Internal Audit Strategy 2019/20 • External Audit Plan for 2018/19 • Annual Report 2018/19 	

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