

Leicester
City Council

Democratic Services
Town Hall
Town Hall Square
Leicester
LE1 9BG

15 September 2010

Sir or Madam

I hereby summon you to a meeting of the LEICESTER CITY COUNCIL to be held at the Town Hall, on THURSDAY, 16 SEPTEMBER 2010 at FIVE O'CLOCK in the afternoon, for the business hereunder mentioned.

**DIRECTOR OF CORPORATE
GOVERNANCE**

AGENDA

1. LORD MAYOR'S ANNOUNCEMENTS

2. DECLARATIONS OF INTEREST

3. MINUTES OF PREVIOUS MEETING

4. PETITIONS

- Presented by Councillors
- Presented by Members of the Public

5. QUESTIONS

- From Members of the Public
- From Councillors

6. REPORTS OF CABINET

- 6.1** Work Experience and Employment Opportunities for Children and Young People & Adults with Learning Disabilities in Leicester City Council.
- 6.2** Future Commissioning of Criminal Justice Drug Treatment Provision – Incoming Responsibilities.
- 6.3** Corporate Governance Annual Report for 2009/10.
- 6.4** Leicester City Council's Pledge to Looked After Children and Leaving Care and the Children in Care Council.
- 6.5** Rushey Mead School – Sports and Science Final Business Case Direction of Travel.

7. REPORTS OF THE MONITORING OFFICER

- 7.1** Review of the Constitution

8. CABINET AND COMMITTEES

To vary the composition and fill any vacancies of Cabinet and any Committee of the Council.

9. NOTICES OF MOTION

Proposed by Councillor Roger Blackmore, seconded by Councillor Coley:

“This council welcomes the prospect of a referendum on the possible use of the Alternative Vote (AV) in parliamentary elections.

It further recognizes that if such a change is agreed the system of AV should also apply to future local elections.”

10. ANY OTHER URGENT BUSINESS

REPORT OF THE LEADER OF THE COUNCIL

6.1 WORK EXPERIENCE AND EMPLOYMENT OPPORTUNITIES FOR CHILDREN AND YOUNG PEOPLE & ADULTS WITH LEARNING DISABILITIES IN LEICESTER CITY COUNCIL

At its meeting on 12 July 2010 Cabinet considered a report that provided an update on the work completed across the City Council to develop work experience and employment opportunities for children and young people and adults with learning disabilities across Leicester City Council.

A copy of the report is attached.

Cabinet resolved as follows:

RESOLVED:

That Cabinet:

- 1) notes the contents of the report and the progress made over the past 12 months;
- 2) notes the work currently taking place on mapping opportunities across the City Council and developing a database listing work experience placements across the council;
- 3) invites a further update in 12 months time.

Council is recommended to note the resolution of Cabinet.

6.2 FUTURE COMMISSIONING OF CRIMINAL JUSTICE DRUG TREATMENT PROVISION – INCOMING RESPONSIBILITIES

At its meeting on 2 August 2010 Cabinet considered a report that outlined the decisions and actions required to facilitate the successful implementation of the proposed commissioning arrangements for the Criminal Justice drug treatment provision across Leicester, Leicestershire and Rutland communities and in HMP Leicester from the financial year 2011/12.

A copy of the report is attached.

Cabinet resolved as follows:

RESOLVED:

that Cabinet:

- 1) endorses the proposed commissioning approach;
- 2) agrees to all required incoming responsibilities as detailed in 2.2 of the report, namely

- a) that Leicester City Council takes on the responsibility as procuring agent and budget holder for the Criminal Justice element of the Adult Pooled Treatment Budget on behalf of Leicestershire and Rutland, which involves hosting commissioning arrangements via a Section 75 agreement with Leicestershire County and Rutland Primary Care Trust;
- b) that Leicester City Council takes on the responsibility as procuring agent and budget holder for the Drug Intervention Programme Main Grant on behalf of Leicestershire and Rutland, which will involve hosting commissioning arrangements via a Section 101 agreement with Leicestershire County Council and Rutland County Council; and
- c) that Leicester City Council takes on the responsibility as procuring agent and budget holder for National Offender Management Service (NOMS), Counselling, Assessment, Referral, Advice and Throughcare (CARATs) funding for HMP Leicester, which will involve LCC providing commissioning and budget management services to NOMS for the deployment of these funds via a contract with the Ministry of Justice.

Council is recommended to endorse the proposed commissioning approach and agree to support cabinet sign off of all required incoming functions

6.3 CORPORATE GOVERNANCE ANNUAL REPORT FOR 2009/10

At its meeting on 2 August 2010 Cabinet considered a report that detailed issues related to the Corporate Governance Annual Report for 2009/10.

A copy of the report is attached.

Cabinet resolved as follows:

RESOLVED:

that Cabinet:

- 1) reviews the position as summarised in the annual report together with any comments received from Audit and Risk, and Standards Committees; and
- 2) authorises the Director of Legal Services to produce a final form of Corporate Assurance Statement in consultation with the Council's Leader and Chief Executive.

Council is recommended to note the resolution of Cabinet.

6.4 LEICESTER CITY COUNCIL'S PLEDGE TO LOOKED AFTER CHILDREN AND LEAVING CARE AND THE CHILDREN IN CARE COUNCIL

At its meeting on 6 September 2010 Cabinet considered a report that set out the work completed by Leicester City Council in respect of the Pledge and the Care Council and made recommendations for the Local Authority, ensuring the pledge is fully integrated through the council.

A copy of the report is attached.

Cabinet resolved as follows:

RESOLVED:

That Cabinet:

- 1) Receives and endorses the content of the report;
- 2) Agrees that the 'Pledge' be adopted by the City Council and monitored and reviewed accordingly;
- 3) Agrees that the Children in Care Council continue to be supported and inform the Local Authority about the progress of implementing the Pledge.

Council is recommended to note the resolution of Cabinet.

**6.5 RUSHEY MEAD SCHOOL – SPORTS AND SCIENCE COLLEGE FINAL BUSINESS CASE DIRECTION OF TRAVEL
(Decision reserved to Council)**

At its meeting on 6 September 2010 Cabinet considered a report that sought approval of the direction of travel towards Final Business Case (FBC) for the Council's Building Schools for the Future Rushey Mead School project and to obtain the necessary authority to progress the project.

A copy of the report is attached.

Cabinet resolved as follows:

RESOLVED:

That Cabinet:

- 1) Approves the direction of travel for the Final Business Case as presented in the report;
- 2) Endorses the Director's Action in approval of the staged process towards Final Business Case;

- 3) Notes that the Rushey Mead contract will be a 'Design and Build' contract, not a PFI contract;
- 4) Approves the further design development of the Rushey Mead project on the basis that the cost capital build does not exceed £19,607,335. The FBC is to provide a separate cost analysis reconciled against the OBC for both the design and build plus the ICT elements of the project. The most recent analysis indicates the proposal is affordable and within the funding envelope;
- 5) Pursuant to 3.2.3 of the report, notes the expenditure required to progress the project to completion as identified in section 5 of the report;
- 6) Approves the use of prudential borrowing against future receipts from land sales to support the project as shown in Section 5.1.2 of the report;
- 7) Approves in principle the expected commercial proposal offer from the LEP to pay the capital amount required for the Combined Heat and Power plant and to receive energy saving gains to repay that capital cost and thereby avoid any financial contributions from the City Council;
- 8) Authorises the Divisional Director, Learning Environment to negotiate on behalf of the Council project specific amendments to the standard form of contracts (without prejudice to final business case approval);
- 9) Following Cabinet approval of FBC, authorises the Head of Legal Services to sign necessary contracts to enable construction to start on the basis of delivering the scheme described in the FBC. These will be the Design and Build contract, FM contract and ICT contract as well as the commercial contract for the CHP unit;
- 10) Authorises the Chief Finance Officer to provide PfS with assurance that the Council understands this report is concerned with the Final Business Case (FBC). When submitting the FBC, the Chief Finance Officer is required to certify that the Council understands the content of the Final Business Case, and that it is affordable, value for money and deliverable;
- 11) Notes the intention to provide flexible access for communities to facilities in the school and the use of 'zoning' of the school buildings to provide a more cost effective and environmentally sustainable solution to community use of these public buildings;

16 September 2010

12) Authorises the Strategic Director Children, in consultation with the Cabinet Lead, to take such decisions as she thinks fit to implement the scheme within the scope of the FBC;

13) Notes the requirement for Full Council approval of the FBC prior to sign off by PfS. Rushey Mead School FBC Direction of Travel report has been added to the full Council agenda of 16th September 2010.

Council is recommended to:

- 1) Add £19.607m to the Capital Programme for the Rushey Mead School project (noting that Cabinet approval of the FBC will be required before the scheme proceeds);
- 2) Approve the responsibilities and accountabilities delegated to Cabinet as set out in Section 3.2 of the report.

Veejay Patel
Leader of the Council

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FORWARD TIMETABLE OF CONSULTATION AND MEETINGS:

Children & Young People Scrutiny Committee
Cabinet

6th July 2010
12th July 2010

Work Experience and Employment Opportunities for Children and Young People & Adults with Learning Disabilities in Leicester City Council

Report of the Divisional Director, Social Care and Safeguarding & Service Manager, Learning Disabilities

1. Purpose of Report

- 1.1 To provide an update on the work completed across the City Council to develop work experience and employment opportunities for children and young people and adults with learning disabilities across Leicester City Council.

2. Recommendations

- 2.1 For the Children and Young People Scrutiny Committee to note the report and to make any observations to Cabinet.
- 2.2 For Cabinet to note the contents of the report and the progress made over the past 12 months.
- 2.3 For Cabinet to note the work currently taking place on mapping opportunities across the City Council and developing a database listing work experience placements across the council.
- 2.4 For Cabinet to invite a further update in 12 months time.

3. Summary

- 3.1 In June 2009 full Council agreed to the development of a core offer for all young people in relation to work experience and employment opportunities. In addition, the City Council has led the way in developing innovative ways to remove barriers to employment for people with learning disabilities, which have been recognised nationally and within government.
- 3.2 A range of developments have been progressed since the original report was agreed by Council in June 2009. In September 2009 the Operations Board agreed

to join up the work taking place with children and young people and adults with learning disabilities in order to more effectively coordinate, manage and maximise opportunities across Leicester City Council. In addition, each Divisional Director has identified a 'Champion' to lead on this area of work and work is now underway, with the assistance of two Graduate interns, on mapping out the range of opportunities which exist across the entire Council, which will lead to the development of a database listing all opportunities and better spread the range of opportunities across the Council.

4. Report

4.1 Background

- 4.1.1. In June 2009 full Council agreed to the development of a core offer for all young people in relation to work experience and employment opportunities. This offer stipulated that the Council should be in a position to deliver for young people, including looked after children and those leaving care, 6 key elements: work experience for pre 16 students; Young Apprenticeships; Flying Fish placements for looked after children; Corporate Apprenticeships and the ring fencing of certain posts for looked after young people and those leaving care.
- 4.1.2. The City Council has led the way in developing innovative ways to remove barriers to employment for people with learning disabilities, which have been recognized nationally and within government. This has included reviewing the entire recruitment process in order to support applications from those who have a disability. New Partnerships have been formed with Leicester College and Remploy, the first of its kind in the UK, to pilot accessible routes to employment for disabled people. The Council is now involved in *Project Search*, a project designed to support people with a learning disability into complex, yet systematic jobs, typically with a high turnover.
- 4.1.3. In September 2009 the Operations Board agreed to join up the work taking place with children, young people and adults with learning disabilities in order to more effectively coordinate, manage and maximise opportunities across Leicester City Council
- 4.1.4. The aims, objectives and aspirations of this work directly links to *One Leicester*. A key aspect of this strategy is a priority to invest in our children, creating safe and thriving communities, investing in skills and enterprise. By making these key top priorities the City Council is demonstrating its commitment to supporting, developing, and offering a range of experiences to enhance the learning of children and young people and adults with learning disabilities. Moreover, in terms of driving out inequalities, it is important to address barriers that prevent individuals from Leicester's learning disabled population from entering employment and learning experiences within the Council

4.2. Summary of progress since June 2009

4.2.1. Identification of 'Champions'

- i) Every Divisional Director has identified a senior officer to act as a 'Champion' to take the lead for identifying and promoting work experience and apprenticeship placements across each division. This has been an important demonstration of Divisional Directors taking ownership of this important initiative.
- ii) At the time of writing this report there have been two meetings involving all the champions. These meetings take place on a bi-monthly basis and are chaired by the Divisional Director for Social Care and Safeguarding. These meetings are important in terms of coordinating and progressing the work.

4.2.2. Mapping opportunities across the council

- i) There are a number of gaps in provision across the council for children, young people and adults with learning disabilities including the lack of any strategic coordination in relation to work experience placements and a clear overview detailing where placements could take place across the Council.
- ii) The initial task all the champions have been involved in is an exercise designed to map across the Council where opportunities already exist for young people and adults with learning disabilities, and crucially where placements / apprenticeships could be developed.
- iii) At the time of writing this report, this work is ongoing and will report in July. However, initial results have already identified placement opportunities that hitherto did not exist, and this is expected to increase as opportunities are mapped out and then coordinated. This has already resulted in placements being identified for young people and adults with learning disabilities.
- iv) Two graduate interns from the Graduate Internship Scheme have recently been taken on by the Council to specifically assist with this work and are directly involved in coordinating this exercise with champions across all divisions. The outcome of this work will be a database capturing all information about placement opportunities for both adults with learning disabilities and young people, which should greatly assist in the Council's ability to strategically coordinate and plan opportunities.

4.2.3. Support for managers providing placements

- i) The lack of support or training for managers when they take on a placement / apprenticeship has previously been a barrier to the Council providing more placements. There are some divisions across the Council that provide few if any work experience placements or apprenticeship opportunities. This needs to change in order for the Council to increase the volume of opportunities as well as the range on offer.
- ii) There is a range of information and support on offer. The problem is that this has all existed in different places and is not well publicised. However, a pack is being developed for managers, which will provide comprehensive information about taking on placements / apprenticeships etc. This should be available in July.

4.2.4. Opportunities for looked after children/care leavers

- i) As a corporate parent the Council has specific responsibilities to children in care and young people leaving care. One of the issues previously reported to Cabinet was that there were no opportunities across the Council for supporting looked after children and young people moving into paid employment. Work has been completed with Human Resources and the recruitment procedures have been amended to reflect that certain posts will be ring fenced for young people leaving the care system who will then be competitively interviewed. There is a specific post within the Social Care and Safeguarding Division that supports young people leaving care in the transition to paid employment.
- ii) The 'Flying Fish' Project run by Leicestershire Cares supports young people in care and those leaving care into mentored work experience placements. Raising the awareness of work experience and apprenticeship opportunities across the Council has enabled the 'Flying Fish' project to support and help care-leavers to access these opportunities to help them into employment, training or education. There has been an increase in referrals to the project and increasingly more placements taking place in the council as well as the private sector.
- iii) The 'Way Ahead' Project sits within Social Care & Safeguarding and is a project focused on securing young people leaving care in employment, education and training. This is a key performance indicator for the City Council and one where the Council has made year on year improvement. The project consists of a Project Manager and despite being a relatively new initiative has already supported the successful placement of two care leavers into an apprenticeship programme in the City Council, plus one into an e2e (Entry to Employment) placement in the Council. The Way Ahead project is also developing links with the Care2Work national employability initiative. This is creating more placements within multi-national companies based in Leicester, the aim of which is to develop placements for care leavers and other young people, which of course may lead to paid employment.

4.2.5. Apprenticeship Scheme

- i) The corporate apprenticeship scheme has proven to be very successful. In the first year, 10 young people were on the scheme and working towards a level 2 Business and Administration qualification. By the end of their apprenticeship in February 2010, 5 young people had completed the full qualification and gained permanent employment in the council. The initial 10 apprentices were made up of 2 looked after young people and 7 young people who were Not in Education, Employment or Training (NEET).
- ii) The council is currently taking on apprenticeships through the Future Job Funds Project. This is a government led scheme where young people aged 18-24 are identified in collaboration with Job Centre Plus and given 6 months work experience (25 hours of work per week paid at the national minimum wage). To use this scheme to the council's advantage, the length of time in employment was increased from 6 to 12 months to incorporate the apprenticeship scheme. Funding was secured from the Working Neighbourhood Fund to do this.
- iii) At the time of writing this report there are 12 young people on the scheme; this includes one looked after child and one young adult with a learning disability. By

the end of May 2010 the council expects to have 59 apprenticeships in post throughout the council as a result of the Future Jobs Fund.

- iv) Alongside the Future Job Fund Scheme, there are also 6 sport apprenticeships and 4 horticultural apprenticeships taking place. At least 1 looked after child is included in this cohort.

4.2.6. Adults with Learning Disabilities

- i) There are a number of national policies that explain why having a paid job is the right thing to do for people with learning disabilities to support their inclusion in society, and Leicester has been leading the way nationally in relation to getting adults with learning disabilities into paid employment. In Leicester there are 920 people with learning disabilities who are accessing social care services. There are currently 106 people in employment (as evidenced by NI 146) of which 30 are employed by the council.
- ii) Leicester is at the forefront of the employment agenda and is currently working with the Government to trial three national employment projects: Project Search; Right to Control; and Jobs First.
- iii) Project Search allows individuals to spend a year doing three different jobs called 'Work Trials' whilst also receiving classroom education every day. Leicester was the first area in the country to run the project and has been doing so for two years. Presently 20 individuals are on work trials and are gaining valuable work experience that is being hosted in the council and Leicester College. Three college students that have successfully gone through the work trial have gained paid employment; one has chosen to do volunteering and there are three seeking employment with Remploy.
- iv) Leicester is one of 8 trailblazers for the 'Right to Control' project, which will implement a new way of disabled people getting more choice and control over the government funded services they receive. Planning for the project started in April with the implementation planned for December 2010.
- v) Leicester is one of the 7 national 'demonstrator' sites for 'Job First', which supports people with moderate to severe learning disabilities to use their personal budget to purchase services they need to progress towards paid employment. The project started in April 2010 and is due to work with 20 adults and will run for one year.

FINANCIAL, LEGAL AND OTHER IMPLICATIONS

5. Legal Implications

There are legal implications with regards to the following aspects of the report:

- a) ring fencing of certain posts for young people leaving the care system; and
- b) work experience for pre-16 students and young people leaving the care system.

Limiting training and employment opportunities to young people may constitute age discrimination. The Employment Equality (Age) Regulations 2006 ("Regulations") makes it unlawful for an employer or training provider to discriminate against a person on grounds of age.

In relation to employment the Regulations make it unlawful to discriminate on the basis of:

- the arrangements it makes for the purpose of determining to whom the employment should be offered; or
- the terms on which it offers that person employment; or
- by refusing to offer, or deliberately not offering, a person employment.

In relation to vocational training the Regulations make it unlawful to discriminate on the basis of:

- the arrangements it makes for the purpose of determining to whom the training should be offered; or
- the terms on which it offers that person training; or
- by refusing or deliberately not offering training; or
- by terminating training; or
- by subjecting that person to any other detriment during the training.

To restrict recruitment or training opportunities on the grounds of age will be discriminatory. Recruitment should be on merit. It should be noted that the Council has an additional duty to recruit on merit as required by the Local Government and Housing Act 1989 (section 7).

Where an age restriction is imposed, if it can be shown that it is objectively justified or that there is a genuine occupational requirement for that restriction, it will be lawful.

In order to be objectively justified it must be shown that the age restriction is a proportionate means of achieving a legitimate aim. The aim cannot, of itself, be discriminatory. An age restriction imposed to address an imbalance in the workforce, for example, is unlikely to be a legitimate aim for age discrimination purposes. Where, however the aim is to benefit disadvantaged young people, may be a legitimate aim but the question is whether this is a real need of the employer.

Having established that there is a legitimate aim it will then be necessary to consider whether the measures taken to achieve that aim are proportionate. A question to ask to assist with this is whether the aim could be achieved by other means. The Council will need to demonstrate that the age restriction contributes to the pursuit of the legitimate aim and it should weigh up the importance of the legitimate aim against its discriminatory effects

Genuine occupational requirement does not appear to apply in the circumstances.

Therefore in relation to aspect a) of the report there is a risk of age discrimination claims. To a lesser extent there is a risk of tortious claims for a breach of a statutory duty and judicial review.

In relation to aspect b) of the report there is a risk of age discrimination claims.

Kate James
Solicitor

6. Financial Implications

This report presents a progress update on the work completed across the Council to develop work experience and employment opportunities for children and young people and adults with learning disabilities. As such there are no direct financial implications arising and no additional funding has been requested. It is likely that most of the costs of making available such opportunities will be contained within existing staff time and other budgets, although inevitably some costs will arise that would not otherwise have been incurred. There are potentially longer term financial gains in that the level of unemployment amongst these vulnerable groups will be reduced, which should have a range of social and economic benefits for the individuals concerned and for society as a whole. - Colin Sharpe, Head of Finance and Efficiency, CYPS, ext. 29 7550

7. Climate Change Implications

Not applicable

8. Other Implications

OTHER IMPLICATIONS	YES/ NO	Paragraph/References Within Supporting information
Equal Opportunities	Yes	Report addresses issues for Children and Young People & Adults with Learning Disabilities
Policy	Yes	Report addresses issues for Children and Young People & Adults with Learning Disabilities
Sustainable and Environmental	Yes	Report offers opportunities for future employment
Crime and Disorder	N/A	
Human Rights Act	N/A	
Elderly/People on Low Income	N/A	
Corporate Parenting	Yes	Report addresses issues for Children and Young People & Adults with Learning Disabilities
Health Inequalities Impact	Yes	Report addresses issues for Children and Young People & Adults with Learning Disabilities

7. Report Author

7.1 Andy Smith, Divisional Director, Social Care and Safeguarding, tel: 0116 252 8306

7.2 Trish Branson, Service Manager, Learning Disabilities, tel: 0116 256 8379

Key Decision	No
Reason	N/A
Appeared in Forward Plan	N/A
Executive or Council Decision	Executive (Cabinet)

FORWARD TIMETABLE OF CONSULTATION AND MEETINGS:

Cabinet	12.07.10
Full Council	16.09.10

Future Commissioning of Criminal Justice Drug Treatment Provision – Incoming Responsibilities

1. Purpose of Report

- 1.1 The purpose of this report is to outline the decisions and actions required to facilitate the successful implementation of the proposed commissioning arrangements for Criminal Justice drug treatment provision across Leicester, Leicestershire and Rutland communities and in HMP Leicester from financial year 2011/12.

2. Summary

- 2.1 This report summarises the new commissioning arrangements agreed at the Public Service Board in April 2010 as follows;

- Joint commissioning across the sub-region for community Criminal Justice drug treatment services
- Joint commissioning of drug treatment services across community and custody to include existing community Criminal Justice drug treatment services and Counselling, Assessment, Referral, Advice and Throughcare (CARATs) and Integrated Drug Treatment System (IDTS) services within HMP Leicester.

The intention under the new arrangements would be to commission a single fully integrated criminal justice treatment service across the sub-region and across the community/custody boundary.

- 2.2 The report also summarises the decisions to be made by Cabinet to facilitate these arrangements as follows;

- Cabinet approval of Leicester City Council taking on the responsibility as procuring agent and budget holder for the Criminal Justice element of the Adult Pooled Treatment Budget on behalf of Leicestershire and Rutland – this will involve host commissioning arrangements via a Section 75 agreement with Leicestershire County and Rutland Primary Care Trust.
- Cabinet approval of Leicester City Council taking on the responsibility as procuring agent and budget holder for the Drug Intervention Programme Main Grant on behalf of Leicestershire and Rutland – this will host commissioning arrangements via a Section 101 agreement with Leicestershire County Council and Rutland County Council.

- Cabinet approval of Leicester City Council taking on the responsibility as procuring agent and budget holder for National Offender Management Service (NOMS) CARATS funding for HMP Leicester – this will involve LCC providing commissioning and budget management services to NOMS for the deployment of these funds via a contract with the Ministry of Justice.

3. Recommendations

3.1 That Council Members;

- a) Endorse the proposed commissioning approach.
- b) Agree to support cabinet sign off of all required incoming functions

4. Report

- 4.1 Total Place indicated that where there are opportunities to jointly commission or procure services sub-regionally this should be considered and where appropriate pursued. It has been identified that commissioning of Criminal Justice drug treatment services across Leicester, Leicestershire and Rutland provides such an opportunity.
- 4.2 Current commissioners of these drug services have worked collaboratively to develop proposals for a joint commissioning model that will provide a platform for more efficient use of resources, and more effective delivery at every stage of the commissioning process. The result of these will be a model that optimizes the Criminal Justice treatment system and aims to deliver improved outcomes for individual service users and communities. These proposals were endorsed initially by the System Change Project Board and then via the Safer Leicester Partnership Drug and Alcohol Delivery Group, County Drug and Alcohol Action Team Board and Prison Partnership Board for HMP Leicester before receiving subsequent endorsement by Chief Executives at the Public Service Board in April 2010.
- 4.3 Appendix 1 provides a background to the development of the commissioning proposals and provides further details as to the arrangements and anticipated benefits. In summary the proposals have two key elements;
 - Joint commissioning across the sub-region for community Criminal Justice drug treatment services
 - Joint commissioning of drug treatment services across community and custody to include existing community Criminal Justice drug treatment services and Counselling, Assessment, Referral, Advice and Throughcare (CARATs) and Integrated Drug Treatment System (IDTS) services within HMP Leicester.
- 4.4 The two major benefits of the proposed commissioning model are that a) it will support the commissioning of an integrated service delivery model and b) it represents a more streamlined and efficient commissioning approach.

The key features of the commissioning model are;

- A single banking arrangement hosted by Leicester City Council. Agreement has also been gained from Central Government to receive a single sub-regional allocation for the DIP Main Grant thus reducing administrative burden and streamlining the funding delivery chain. Individual allocations for each

area would continue to be identified within this single sum to ensure that appropriate funds are spent across localities.

- A single contract held by Leicester City Council with Leicestershire County Council, Rutland County Council and Leicestershire County and Rutland Primary Care Trust as parties to the contract. This contract would be contract managed through a sub-regional strategic commissioning board and at a lower level via contract management meetings with sub-regional representation.
- Commissioning would be undertaken via a sub-regional criminal justice strategic commissioning group that will operate as a distinct part of the Safer Leicester Partnership Strategic Commissioning Board. The added benefit of this group is that it could encompass a sub-regional focus on all strategic developments relevant to criminal justice drug treatment alongside relevant safeguarding issues.

4.5 The new commissioning arrangements will be underpinned by a 'suite' of partnership agreements between partners and will require, via these arrangements, the following actions;

- Cabinet approval of Leicester City Council taking on the responsibility as procuring agent and budget holder for the Criminal Justice element of the Adult Pooled Treatment Budget on behalf of Leicestershire and Rutland – this will involve host commissioning arrangements via a Section 75 agreement with Leicestershire County and Rutland Primary Care Trust.
- Cabinet approval of Leicester City Council taking on the responsibility as procuring agent and budget holder for the Drug Intervention Programme Main Grant on behalf of Leicestershire and Rutland – this will host commissioning arrangements via a Section 101 agreement with Leicestershire County Council and Rutland County Council.
- Cabinet approval of Leicester City Council taking on the responsibility as procuring agent and budget holder for National Offender Management Service (NOMS) CARATS funding for HMP Leicester – this will involve LCC providing commissioning and budget management services to NOMS for the deployment of these funds via a contract with the Ministry of Justice.

The procurement activity to be undertaken as part of these arrangements will sit within the wider procurement activity being undertaken within the City DAAT as part of their service redesign process. The DAAT intend to utilise internal resources to undertake this activity and have a sub-regional resource (LLR Criminal Justice Lead post) to draw on to ensure that the necessary time and effort can be put into the exercise without causing additional burden to City staff.

As part of the development of the partnership agreements and subsequent tendering exercise it will be necessary to ensure that appropriate 'break' measures are put into place should significant changes occur to the financial grants involved under the arrangements.

5 Financial, Legal and Other Implications

5.1 Financial Implications

5.1.1 Criminal Justice drug treatment provision is funded entirely through grants. The following bodies receive Criminal Justice drug treatment grants which will be pooled under the proposed commissioning arrangements:

Funding Stream	Funding Source	2010/11 Allocation £	%
Adult Pooled Treatment Budget(City)	DoH	764,533	22.56%
DIP Main Grant (City)	Home Office	1,419,170	41.87%
Adult Pooled Treatment Budget (County & Rutland)	DoH	502,365	14.82%
DIP Main Grant (Rutland)	Home office	6,045	0.18%
DIP Main Grant (County)	Home office	432,002	12.75%
CARATs (HMP Leicester)	Ministry of Justice	201,761	5.95%
CBDT (HMP Leicester)	Ministry of justice	63,208	1.87%
Total			100.00%
			3,389,084

5.1.2 Leicester City Council as budget holder will be responsible for spending these monies in line with agreed priorities from the joint commissioners. The joint commissioning group would ensure partners are involved in commissioning.

5.1.3 The amounts listed above are 2010/11 allocations as 2011/12 allocations are not yet known. Spending plans will be based on anticipated budgets for 2011/12. Should there be any cuts in funding; expenditure would have to be reduced accordingly.

5.1.4 In the event of any overspends, overspend will be ring fenced and taken forward to the next financial year where it will be taken off the total amount available for commissioning. Should the joint commissioning group not decide to take this path overspend will be shared out amongst the partners according to percentage contributions. Overspends should not occur as the commissioning costs would be known in advance.

5.1.5 Underspends will be ring-fenced and carried forward so that they are available for the following years commissioning. Risk sharing agreements will form part of the agreements with all involved parties.

5.1.6 As the procuring agent the City Council will take on budget management responsibilities. Any additional costs arising from this will be paid for from the pooled commissioning budget.

5.2 Legal Implications

5.2.1 There are three agreements underpinning these proposals;

- Section 75 arrangement utilising the pooled budget flexibility and associated services and management board in respect of the Leicestershire and Rutland PCT's criminal justice element of the pooled treatment budget for substance misuse and rehabilitation facilities and services. If commissioning management and "back office" resources are to be joined together then a further flexibility (integrated provision) is available.

Leicester City Council to be host partner and will appoint one of its officers as pooled budget manager for this element, it will also provide procurement management services.

- A arrangement under section 101 of the Local Government Act 1972 under which Leicestershire County Council delegates some of its social care functions to Leicester City Council to enable Leicester City Council to manage the joint commissioning and the pooled budget in respect of DIP main grant.

Leicestershire County Council will need to confirm to us the legal powers underpinning these functions.

For simplicity this delegation will exclude the short term run on arrangement under an existing contract.

- Finally there will be a contract for services between Leicester City Council and NOMS (an executive agency of the Ministry of Justice) under which Leicester City Council will provide commissioning, contract and budget management services in respect of the procurement and provision of counselling, assessment, referral, advice and throughcare (CARAT) services for the benefit of substance users within HMP Leicester. The Council's powers to do this are under S2 of the Local Government Act 2000 and Section 111 of the Local Government Act 1972.

5.2.2 In using "well being" powers under Section 2 Local Government Act 2000 the Council has to have regard to its sustainable community strategy. Also any recovery of costs etc is limited to actual costs.

5.2.3 NOMS require flexible termination and change provisions and these will need to be stepped down into the proposed sub contracts.

5.2.4 This contract will depend on successful procurement of subcontractors.

5.2.5 No staff are envisaged to transfer under TUPE except at provider (sub contract) level where this will be addressed through the procurement process.

5.2.6 No co-location is proposed so there are no property agreements required

5.2.7 There is a framework agreed with Leicester City Council Risk Management Services for responsibilities and required insurances for clinical negligence (and clinical functions) for use in "section 75 arrangements" and further discussion with RMS will be needed once the proposed specification of the NOMS service is available

- 5.2.8 Care will be taken in procurement to include as robust a break position as possible in case headline funding is recalled. This may however not be attractive for providers.
- 5.2.9 An overarching "memorandum of understanding" is proposed between all members of the System Change proposals. Although of no legal effect it will set out the parties intentions as a "partnership".
- 5.2.10 The joint commissioning of any future services under the Partnership Agreements needs to be in accordance with UK/EU law with regards procurement/competition and in accordance with the Councils Constitution.

6. Other Implications

OTHER IMPLICATIONS	YES/NO	Paragraph references within the report
Equal Opportunities	No	
Policy	No	
Sustainable and Environmental	No	
Crime and Disorder	Yes	Throughout report
Human Rights Act	No	
Elderly/People on Low Income	No	
Corporate Parenting	No	
Health Inequalities Impact	Yes	Appendix 4.4

7. Risk Assessment Matrix

- 7.1 This only needs to be included if appropriate with regard to the Council's Risk Management Strategy

Risk	Likelihood L/M/H	Severity Impact L/M/H	Control Actions (if necessary/appropriate)
Financial – of overspend pooled budget	L	H	Risk sharing agreement between partners; effective management of pooled budget through joint commissioning group
2			
3			
4			
5			
6 etc			

L – Low
 M – Medium
 H – High

L – Low
 M – Medium
 H – High

8. Background Papers – Local Government Act 1972

9. Consultations

10. Report

Charlotte Talbott, System Change Project Manager, Safer Leicester Partnership.

11. Appendix

Appendix A provides background to the System Change Project and provides further detail as to the proposed commissioning arrangements and anticipated benefits.

Key Decision	Yes
Reason	Is significant in terms of its effect on communities living or working in an area comprising more than one ward
Appeared in Forward Plan	Yes
Executive or Council Decision	Executive (Cabinet)

Proposed Arrangements for Future Commissioning of Criminal Justice Drug Treatment Provision

1. Purpose

- 1.1 The purpose of this paper is to propose the approach to be taken for the future commissioning of Criminal Justice Treatment provision across Leicester, Leicestershire and Rutland communities and in HMP Leicester. These proposals are for consideration and ratification by the System Change Project Board and sign-off by Chief Executives. The proposals contained within this paper form part of, and are consistent with broader proposals regarding joint commissioning made as part of the Total Place Programme and have been developed in consultation with key partners.

2. Background

- 2.1 Strategic commissioning is critical to leadership of place and ensuring public services meet the needs and aspirations of their users and the wider community. Effective strategic commissioning is essential to the delivery of a coherent drug treatment system and the realisation of the improved outcomes this brings to individuals and communities.
- 2.2 The Drug System Change Pilot programme has been established to test new approaches to drug treatment and the broader social support needs of drugs users both in the community and in prisons. The Pilots will test the premise that local partnerships can achieve more if they are allowed flexibility in how they make use of the range of funding streams, including those specific to drugs, giving them the freedom to innovate and to tailor services in response to local needs.
- 2.3 Locally the project is focussed specifically on the needs of drug users in contact with the Criminal Justice System. The key aim of the project is to design and implement an integrated model of service delivery and enhanced commissioning arrangements for services for substance misusing offenders. It is clear that the enhanced arrangements must encompass delivery across the community and custodial settings and must significantly improve the reintegration of service users into the community.

3. Current Arrangements

- 3.1 In Leicester the commissioning of community based drug treatment is managed through a partnership commissioning body which reports through the Drug and Alcohol Delivery Group to the Safer Leicester Partnership. In Leicestershire commissioning of community based drug treatment provision takes place within the Leicestershire DAAT Adult Commissioning Sub Group (CSG) and reports to the Leicestershire DAAT Board.

- 3.2 For commissioning this provision the Drug and Alcohol Action Teams (DAATs) receive a number of grants/budgets from Central Government. The Pooled Treatment Budget (PTB) is a Department of Health allocation that is ring-fenced to support services for adult drug users. Additional funds are also contributed towards the PTB by the Ministry of Justice for the additional treatment hours required for Drug Rehabilitation Requirements over and above 'standard' treatment. The Drug Intervention Programme (DIP) main grant are Home Office funds that are to be used to target drug using offenders, and provide a route out of crime and into treatment.
- 3.3 Joint commissioning structures were in place across the sub-region between the three DAATs between 2001 and 2008. Following National Guidance and feedback through consultation, the Leicester DAAT and the Crime and Disorder Reduction Partnership (CDRP) merged to form an integrated Crime and Drugs Partnership for the City. This saw the disaggregation of the three DAATs and the formation of separate reporting structures in line with geographical arrangements. Although no longer part of the same structures, and having separate commissioning groups, the DAATs have continued to jointly procure services across the sub-region for drug users, supported by shared performance management and contract management arrangements. The DAATs are currently undertaking a full service re-tendering process and are intending to procure services separately on a locality basis going forward.
- 3.4 In HMP Leicester commissioning of Counselling, Assessment, Referral, Advice and Throughcare (CARAT) services is undertaken by National Offender Management Service (NOMS) through the regional Director of Offender Management (DOMs) office. More recently, following the implementation of Integrated Drug Treatment System (IDTS) in the establishment, commissioning of other drug treatment services, including specialist prescribing for substance misuse, is commissioned by NHS Leicester City as part of the Prison Healthcare contract.
- 3.5 Commissioning arrangements for drug treatment along the criminal justice pathway are therefore complex with multiple partners involved at a regional and local level. Consequently there is no one body or individual holding overall responsibility and accountability for drug treatment provided to offenders and there is no single focused strategy guiding the delivery of treatment to prisoners/offenders locally. This results in a lack of join up that can mean duplication of effort in the commissioning process (e.g. treatment planning, needs assessment etc), potential duplication of resource and limited partnership approach to achieving desired outcomes.
- 3.6 It is important to note that there is further lack of co-ordination/join up between commissioners of treatment and commissioning by those partners that have a responsibility for throughcare/wrap-around provision, i.e. housing; education, training and employment and commissioners of alcohol services and these are areas for development as part of both the System Change Project and Total Place. It is not the intention of these proposals to address these issues.

4. Proposal for Future Model and Rationale

- 4.1 The proposal for future commissioning of criminal justice treatment services has the following key components;
- Joint commissioning across the sub-region for community CJ treatment services

- Joint commissioning of treatment services across community/custody to include existing community CJ services and CARATs and IDTS services within HMP Leicester.
- 4.2 There are a number of drivers to support the development of joint commissioning processes including the Local Government White Paper, *Strong and Prosperous Communities; Our Health, Our Care, Our Say*; and the Community Empowerment White Paper, *Communities in Control, Real People and Real Power*. The joint commissioning approach is in line with the vision for intelligent commissioning in local government, as outlined in *Empowering communities, shaping prospects, transforming lives*, Communities and Local Government which views commissioning as the prime framework for service improvement and transformation.
- 4.3 Total Place indicated that where there are opportunities to jointly commission or procure services sub-regionally this should be considered and where appropriate pursued. It is proposed that commissioning of CJ treatment services across Leicester, Leicestershire and Rutland provides such an opportunity for the following reasons;
- To ensure efficient/effective delivery of DIP
 - To ensure efficient/effective delivery of DRRs as a specialised service
 - To ensure fit to local courts which service Leicester, Leicestershire and Rutland
 - To ensure fit to HMP Leicester as the local prison that services Leicester, Leicestershire and Rutland
 - To achieve economies of scale
 - To continue to deliver a 'tried and tested' best practice model
 - To avoid complications caused by cross boundary offending
 - To ensure efficient/effective systems for Police
 - To ensure efficient /effective systems for Probation
- 4.4 Further to this it is proposed that the commissioning of treatment services within HMP Leicester is aligned with the sub-regional community approach. In practice this would involve the procurement of existing CARATs services alongside community-based services and a review of the existing arrangements for the procurement of IDTS as part of the prison healthcare contract to reflect increased DAAT Officer involvement. The further benefits of this include;
- Better co-ordination of care within the prison
 - Reduced attrition when service users move between community and custody and vice versa
 - Improved consistency in range and quality of services provided within the prison and in the community
 - To remove duplication and improve efficiency
- 4.5 The intention under the new arrangements would be to commission a single fully integrated criminal justice treatment service across the sub-region and across the community/custody boundary. In order to do this and to ensure appropriate delivery for each community and each 'element' of the system it will be essential to specify the service(s) appropriately and it will therefore be essential for a balance of commissioners across the partnership to be involved in the development of service specifications and the commissioning process.

Under this approach it will be essential that particular effort is built in during the planning stage to consider delivery options that respond to the needs identified across each locality and for this reason it should be made clear that the proposals require all partners to be involved in the commissioning process and that the City 'lead' relates specifically to the procurement process. Similarly whilst the City PCT have 'lead' responsibility for the procurement process for IDTS services, DAAT Officers will play a key role in terms of needs assessment and treatment planning for this element of the treatment system to ensure join-up across the whole pathway.

- 4.6 In order to take these proposals forward commissioners will need to work together to develop formal partnership agreement(s) for the joint commissioning of services for 2011/12. These partnership agreements will provide further detail to the partnership arrangements including details of risk-sharing and processes for review of the new arrangements. There is also further work required regarding the detail of information flows under the new arrangements to ensure transparency and allow for scrutiny by all partners.
- 4.7 It should be noted that at this stage these proposals only relate to prison treatment delivered within HMP Leicester. If at a later stage it is decided that treatment delivery within the County establishments (HMP Stocken, HMP Ashwell, HMP Gartree and HMYOI Glen Parva) should also be included within the proposed arrangements a full review of the arrangements would be undertaken.

5. Expected Outcomes

- 5.1 Both the Total Place programme and the Drug System Change Project are guided by the principle that service outcomes can be improved through robust joint commissioning approaches across organisational and service area boundaries.
- 5.2 The proposed model will bring together the contributions of different partner organisations to deliver a more coherent set of services and represents the most efficient approach to commissioning this element of the treatment system. The proposed commissioning model presents an opportunity to rationalise back office support functions, and strengthen the entire commissioning process. The joint commissioning model provides the platform for more efficient use of resources, and effective delivery at every stage of the commissioning process. This will result in the optimum CJ treatment system, with the desired outcomes for service users.
- 5.3 The proposals streamline the procurement process and also allow for consideration of how System Change pilot status can be utilised to secure freedoms and flexibilities. For example, should the proposals be agreed, administrative burden could be reduced through a request to receive a single sub-regional DIP Main Grant allocation.

	Responsible Who performs the activity or does the work	Accountable Who is accountable and has Yes/No/Veto	Consulted Who needs to feedback and contribute to the activity	Informed Who needs to know about the decision or action
Analyse				
Data and Intelligence	DAAT Officers (City and County)	SLP JCG and County CSG/County DAAT Board	PCT, NOMs, Prison and wider stakeholders	
Stakeholder Mapping	DAAT Officers (City and County)	SLP JCG and County CSG/County DAAT Board	PCT, NOMs and Prison	
Consultation and Engagement	DAAT Officers (City and County)	SLP JCG and County CSG/County DAAT Board	PCT, NOMs, Prison and wider stakeholders	
Needs Analysis/Assessment	DAAT Officers (City and County)	SLP JCG and County CSG/County DAAT Board	PCT, NOMs, Prison and wider stakeholders	
Identify Commissioning Priorities	DAAT Officers (City and County)	SLP JCG and County CSG/County DAAT Board	PCT, NOMs, Prison	
Policy, Legislation and Best Practice	DAAT Officers (City and County)	SLP JCG and County CSG/County DAAT Board	PCT, NOMs, Prison	
Supply Mapping	DAAT Officers (City and County)	SLP JCG and County CSG/County DAAT Board	PCT, NOMs, Prison	
Plan				

Identify Gaps in Supply	DAAT Officers (City and County)	SLP JCG and County DAAT Board		
Agree Priorities	DAAT Officers (City and County)	SLP JCG and County CSG/County DAAT Board	Prison Partnership Board (HMP Leicester)	
Agree Treatment Plans	DAAT Officers (City and County)	SLP JCG and County CSG/County DAAT Board	Prison Partnership Board (HMP Leicester)	
Undertake EIA	DAAT Officers (City and County)	SLP JCG and County CSG/County DAAT Board		
Consider Delivery Options	DAAT Officers (City and County)	SLP JCG and County CSG/County DAAT Board	Prison Partnership Board (HMP Leicester). Category Management.	
Agree Commissioning Intentions	DAAT Officers (City and County)	SLP JCG and County CSG/County DAAT Board - These must be reconciled at this point. County CSG/County DAAT Board to communicate to SLP JCG for final sign-off.	Prison Partnership Board (HMP Leicester)	
Do				
Develop Service Specifications	1)City PCT for IDTS 2) DAAT Officers (City and County)	1)Prison Partnership Board 2)SLP JCG	1)City DAAT Officers	

Prepare Contract Documentation	1)City PCT for IDTS 2) DAAT Officers (City and County)	1)Prison Partnership Board 2)SLP JCG	1)City DAAT Officers	
Negotiate and Hold Contract	1)City PCT for IDTS 2) DAAT Officers (City and County)	1)Prison Partnership Board 2)SLP JCG		
Contract Management	1)City PCT for IDTS 2) DAAT Officers (City and County)	1)Prison Partnership Board 2)SLP JCG		

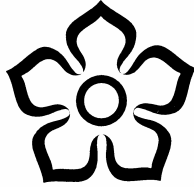
Review				
Contract Monitoring	1)City PCT for IDTS 2) DAAT Officers (City and County)	1)Prison Partnership Board 2)SLP JCG		
Performance Management	1)City PCT for IDTS 2) DAAT Officers (City and County)	1)Prison Partnership Board 2)SLP JCG		2) County CSG/County DAAT Board and Safer Rutland Partnership
Undertake Strategic/Operational Review	Operational Review - DAAT Officers (City and County) Strategic Review – SLP JCG and County CSG	SLP JCG and County DAAT Board		
Service Improvement/Redesign or Decommissioning	1) City PCT for IDTS 2)DAAT Officers (City and County)	1) Prison Partnership Board 2)SLP JCG and County CSG/County DAAT Board	1)City DAAT Officers	

Clinical Governance				
Agree Clinical Governance/Quality Schedule	City PCT	NHS Leicester City Quality Directorate		County DAAT Board

Monitoring of Clinical Governance Schedule	1)City PCT for IDTS 2)DAAT Officers (City and County)	1)Prison Partnership Board 2)SLP JCG via Clinical Governance Forum		1&2) NHS Leicester City Quality Directorate
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Budgets and Financial Control				
Identify Resources	1) City PCT for IDTS 2)DAAT Officers (City and County)	1)Prison Partnership Board 2)SLP JCG and County DAAT Board		
Budget Setting	1) City PCT for IDTS 2)DAAT Officers (City and County)	1)Prison Partnership Board 2)SLP JCG and County DAAT Board	1)City DAAT Officers	
Financial Controls	1) City PCT for IDTS 2)City DAAT for all other services	1)Prison Partnership Board 2)SLP JCG		2)County DAAT Board and NOMs
Budget Changes/New Commissioning Intentions		1)Prison Partnership Board 2)SLP JCG	2)County DAAT Board and NOMs	
Final Accounts	1) City PCT for IDTS 2)City DAAT for all other services	1)Prison Partnership Board 2)SLP JCG		2)County DAAT Board and NOMs
Audit Requirements	1) City PCT for IDTS 2)City DAAT for all other services	1)Prison Partnership Board 2)SLP JCG		2)County DAAT Board and NOMs

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Leicester
City Council

WARDS AFFECTED
All Wards

STANDARDS COMMITTEE
CABINET

30TH JUNE 2010
12TH JULY 2010

CORPORATE GOVERNANCE: ANNUAL REPORT FOR 2009/10

REPORT OF THE DIRECTOR OF CORPORATE GOVERNANCE

1. PURPOSE OF REPORT

1.1 The purpose of this report is to:

- * Enable compliance with the requirements of the Council's Corporate Governance Code by carrying out an annual review of Corporate Governance arrangements for the year 2009/10;
- * Report the position regarding Local Government Ombudsman complaints;
- * Inform the Council's Annual Governance Statement which was reported to and approved by the Audit Committee on the 20th May and Cabinet in June and forms part of the Council's Statutory Statement of Accounts;
- * Gain support for the proposal to monitor implementation of action plans via quarterly performance management reporting.

2. SUMMARY

- 2.1 An annual review has been carried out in consultation with lead officers responsible for all key policies and procedures which form the Council's Corporate Governance Framework. Wherever possible assurances have been given but where this has not been possible an action plan has been presented with the aim of enabling assurance to be given within a reasonable timescale. The outcome is summarised in **Appendix 1**, attached, and shown in full in **Appendix 2 (this will be available on the intranet only for Standards Committee and Cabinet)**.
- 2.2 The Framework requires an annual self-assessment as to compliance with CIPFA/SOLACE's six core principles of good governance. See **Appendix 3**.
- 2.4 This report also summarises the position in respect of complaints to the Local Government Ombudsman during 2008/9. See **Appendix 4 and 5**. There have been no findings of maladministration during the year.

3. RECOMMENDATIONS

3.1 **Audit and Standards Committees** are asked to review the position as summarised in this annual report and to forward any comments to Cabinet for consideration.

3.2 **Cabinet is recommended to:**

3.2.1 Review the position as summarised in this annual report together with any comments received from Audit and Standards Committees; and

3.2.2 Authorise the Director of Legal Services to produce a final form of Corporate Assurance Statement in consultation with the Council's Leader and Chief Executive;

4. REPORT

4.1 **What do we mean by governance?**

Corporate Governance has been defined as "the system by which organisations are directed and controlled".

Every Council operates through a governance framework; the more effective the framework the more effective the Council will be as a community leader and deliverer of services.

CIPFA has stated that governance is "about how Local Government bodies ensure that they are doing the right things, in the right way, for the right people, in a timely, inclusive, open, honest and accountable manner.

It comprises of systems and processes, and cultures and values, by which Local Government bodies are directed and controlled and through which they account to, engage with and, where appropriate, lead their communities".

4.2 **The Authority's current Corporate Governance Code**

Leicester's well established Code was updated in 2008 to comply with CIPFA/SOLACE's most recent guidance in 2007, "Delivering Good Governance in Local Government".

The Framework has been enhanced to provide for an annual self assessment as to whether the Authority complies with CIPFA/SOLACE's six core principles of good governance:

- i. Focusing on the purpose of the Authority and on outcomes for the community and creating and implementing a vision for the local area;
- ii. Members and officers working together to achieve a common purpose with clearly defined functions and roles;

- iii. Promoting values for the Authority and demonstrating the values and good Governance through upholding high standards of conduct and behaviour;
- iv. Taking informed and transparent decisions which are subject to effective scrutiny and managing risk;
- v. Developing the capacity and capability of members and officers to be effective;
- vi. Engaging with local people and other stakeholders to ensure robust public accountability;

The Code builds on the private sector's experience and makes use of a governance system to provide a framework of accountability as a basis for continuous improvement in the delivery of services.

4.3 **Annual Review 2009/10**

Lead officers have been appointed for all key policies and procedures, as set out in **Appendix 1**. They are responsible for satisfying themselves that the policies and procedures work properly in practice and must provide the necessary reports and assurance statements to enable the annual report to be co-ordinated.

The outcome of the Annual Review for 2008/9 is detailed in **Appendix 2 (available on the intranet only for Committees and Cabinet)** and the level of assurance given in respect of each Key Policy and Procedure is summarised in **Appendix 1**. A five category traffic light approach has been used i.e

- * Green
- * Green/amber
- * Amber
- * Amber/red
- * Red

“Green” means the standards have been met, compliance can be assured, and that the evidence of compliance can be provided by management.

“Green/amber” means controls sufficiently reduce the level of risk but there are some reservations; most risks are adequately managed for others there are minor issues that need to be addressed by management.

“Amber” means only some of the risks are adequately managed; for others there are significant issues that need to be addressed by management.

“Red/amber” means there are indications that the level of risk remains high and immediate action is required by management.

“Red” means the level of risk remains high and immediate remedial action is required by management.

Lead officers have been asked to complete the Annual Assurance Statements so that it is clearly linked to that of the previous year; to update action plans to show:

- * Tasks completed with completion date.
- * Tasks ongoing with a realistic target date.
- * Tasks that have been carried forward from one year to the next with an explanation of a realistic target date.
- * New tasks identified matched with a realistic target date.

There has also been a request for action plans to be prioritised, by showing the priority to be given for each action i.e. “high” (**H**), “medium” (**M**), or “low” (**L**).

The Director of Change and Programme Management has carried out an assessment of the Authority’s compliance with CIPFA/SOLACE’s Six Core Principles of Good Governance. See **Appendix 3**.

The Chief Executive is the officer responsible for signing off an “Annual Assurance Statement”, together with the Leader of the Council.

Oversight of the Council’s corporate governance arrangements is a function of Cabinet and also falls within the remit of the Audit and Standards Committees.

4.5 Overall position and future development

Wherever possible lead officers have provided assurances that procedures work properly in practice. Where they cannot give a full assurance an action plan has been produced with the aim of enabling assurance to be given within a reasonable timescale.

In a number of cases, assurances provided by a lead officer have been supported by assurances received from Service Departments.

The overall corporate position is positive, all assessments are shown as green, green/amber or amber. See the summary in **Appendix 1**.

Assurance statements have been given subject to implementation of action plans, so it is proposed that implementation be monitored as part of the quarterly performance reporting mechanism, significant delays to be reported by way of exception. Lead officers have been notified that they are required to produce their first progress report for Quarter 1 i.e. June, 2010.

4.6 Comments of Audit Committee

Audit Committee on the 20th May reviewed this report, noted the position but also asked that Cabinet consider what action was necessary in those areas where no progress had been made over the past three years and that consideration be given to the position regarding the Communication Strategy where no assurance had been given for 2009/10.

4.7 CAA use of resource report – August, 2009

In addition to providing a useful basis for ensuring improvement in performance, the Annual Corporate Governance review provides essential evidence for the CAA process.

The CAA use of resources report in August, 2009 noted significant progress but also identified areas for improvement which need to be addressed:

- * Ensure that all councillors are fully aware of ethical governance issues through a systematic, personalised programme.
- * Ensure that partnership governance arrangements are robust including dispute resolution procedures.

4.8 Internal Audit

Corporate Governance procedures are subject to annual scrutiny by internal audit. Each year to date the outcome has been positive, supported by recommendations for improvement which have been implemented. The 2009/10 review is currently subject to audit and any recommendations will be reported to Committees and Cabinet.

4.9 Complaints to the Ombudsman

A summary of Local Government Ombudsman complaints received from 1st April 2009 to 31st March 2010 is shown attached as **Appendix 4** including a comparison with the previous two years 2007/8 and 2008/9.

There have been no findings of maladministration in 2009/10 against the Council.

Appendix 5 is a comparison table Family Authorities for the years 2007/8, 2008/9 and 2009/10.

Local settlements: 12 complaints were closed as “local settlements” i.e. where a complaint does not warrant a full investigation by the Ombudsman or where it is not necessary to bring the matter to the public attention. In such cases the Council can initiate a local settlement by taking action or agreeing to take action which the Ombudsman considers to be satisfactory in the

circumstances. This can take the form of compensation or provide some other benefit for that person.

This is an increase compared to 9 complaints closed in this way during 2008/9.

A total of £39,756 compensation has been paid to complainants which is a dramatic increase compared to a total of £4,717.10 paid in 2008/9. However, this can be explained by the fact that £36,731 was paid in respect of one settlement.

5. FINANCIAL, LEGAL AND OTHER IMPLICATIONS

5.1 Financial Implications

Covered in the report.

5.2 Legal Implications

Covered in the report

6. OTHER IMPLICATIONS

OTHER IMPLICATIONS	YES/NO	Paragraph references within supporting information
Equal Opportunities	Yes	E.g consultation strategy policy
Policy	Yes	E.g. partnership policies
Sustainable and Environmental	Yes	EMAS policy
Crime and Disorder	Yes	E.g. partnership policies
Human Rights Act	Yes	E.g. information governance
Elderly/People on Low Income	Yes	E.g. partnership policies

7. RISK ASSESSMENT MATRIX

See Appendices 1 and 2: all lead officers have provided assurance statements together with prioritised action plans.

8. BACKGROUND PAPERS – LOCAL GOVERNMENT ACT 1972

Relevant legislation, national policies and guidance, the Council's corporate rules, policies and standards referred to in this report.

9. CONSULTATIONS

Miranda Cannon, Perry Holmes, Jill Craig, John Doyle, Mark Bentley, Fiona Skene, James Royston, Carol Brass, Geoff Organ, Laurie Goldberg, Mark Noble, Tony Edeson, Rachel Dickinson, Andy Smith, Johanne Robbins.

5. REPORT AUTHOR

Peter Nicholls, Director of Legal Services, x6302

Key Decision	No
Reason	N/A
Appeared in Forward Plan	N/A
Executive or Council Decision	Executive (Cabinet)

APPENDIX 1

(Page numbers refer to full document on insite only)

Page no.	KEY POLICIES AND PROCEDURES	LEAD OFFICER	ASSESS- MENT OF LEVEL OF ASSURANCE 07/08	ASSESS- MENT OF LEVEL OF ASSURANCE 08/09	ASSESS- MENT OF LEVEL OF ASSURANCE 09/10	SUMMARY POSITION
18	Consultation strategy	Director of Change and Programme Management	Green / amber	Green / Amber	Green / amber	The consultation toolkit continues to meet best practice.
21	Performance management framework	Director of Change and Programme Management	Amber	Green	Green	The Audit Commission have looked at performance management arrangements as part of the CAA assessment (including as part of a review of ODI) and have confirmed that the direction we are taking is positive.
24	Project management	Director of Change and Programme Management	Amber	Green	Green	A programme of assurance reviews across a sample of the Council's portfolio of programmes and projects is continuing. The process involves assurance of each project / programme against a "best practice" checklist with a report produced and action plans agreed. The lessons learnt from each 6 monthly programme of reviews are compiled and shared with senior officers and members. Directors receive reports from reviews conducted on projects / programmes in their portfolios.

Page no.	KEY POLICIES AND PROCEDURES	LEAD OFFICER	ASSESS- MENT OF LEVEL OF ASSURANCE 07/08	ASSESS- MENT OF LEVEL OF ASSURANCE 08/09	ASSESS- MENT OF LEVEL OF ASSURANCE 09/10	SUMMARY POSITION
						<p>The process provides a picture of the Council's overall performance in this area, and helps target future training and development activity. The Corporate Portfolio Management Office (CPMO) determine the programme in conjunction with Internal Audit and Corporate Risk Management.</p> <p>In addition the work on project and programme management has recently been reviewed by the Audit Commission in their review of the ODI programme overall. The report which was received in January 2010 confirmed that arrangements had significantly improved for project and programme management.</p>
28	Members' Code of Conduct and Political Conventions and Members support framework	Director of Corporate Governance	Green / amber	Green/Amber	Green / amber	<p>Good evidence of Members conducting business of Council according to law and Constitution. Monitoring Officer and Legal Officers providing support in meetings.</p> <p>Good evidence of Members acting within the Code of</p>

Page no.	KEY POLICIES AND PROCEDURES	LEAD OFFICER	ASSESS- MENT OF LEVEL OF ASSURANCE 07/08	ASSESS- MENT OF LEVEL OF ASSURANCE 08/09	ASSESS- MENT OF LEVEL OF ASSURANCE 09/10	SUMMARY POSITION
						<p>Conduct within the Chair of the Standards Committee annual report. Good profile for Standards Committee. Monitoring Officer has visible presence at key meetings to deal with conduct issues.</p> <p>Good evidence of good Officer/Member relations even during period of political change.</p> <p>Good evidence of effective constituency work by Councillors.</p> <p>Internal audit report into Members Allowances scheme did not indicate any instances of violation.</p>
31	The Council Constitution	Director of Legal Services	Green / amber	Green/Amber	Green / Amber	Assurance can be given in all areas subject to an improvement plan.
33	Information Governance	Director Information Support.	Amber	Amber / red	Amber ☺	<p>Assurance can be given in all areas covered by the central function.</p> <p>Assurance cannot be given at member level.</p> <p>All divisions now have reasonable compliance for Freedom of Information requests and much improved processes in place to deal with them. However "Reasonable compliance" is not legislative compliance required by law which entails 100% compliance. Many access to</p>

Page no.	KEY POLICIES AND PROCEDURES	LEAD OFFICER	ASSESS- MENT OF LEVEL OF ASSURANCE 07/08	ASSESS- MENT OF LEVEL OF ASSURANCE 08/09	ASSESS- MENT OF LEVEL OF ASSURANCE 09/10	SUMMARY POSITION
						<p>information requests have been answered outside of legal timescales; last year saw 23% answered outside the legislative timescales.</p> <p>Assurance cannot be given that Subject Access Requests are consistently being answered in time or in accordance with the law. The central function does not have oversight of these requests, and therefore cannot monitor or manage performance. The complaints procedure indicates that many Subject Access Requests are not answered within 40 calendar days. Some Staff seem unaware that they should charge £10 for requests and do not understand exemptions under the data protection Act 1998. An audit will be undertaken during the coming year to assess levels of compliance.</p> <p>A detailed Information Security work programme with SIRO oversight continues to improve the security condition across the information estate following two previous locally high profile incidents. Work covers both manual and electronic data and considers extensive dependencies. Through</p>

Page no.	KEY POLICIES AND PROCEDURES	LEAD OFFICER	ASSESS- MENT OF LEVEL OF ASSURANCE 07/08	ASSESS- MENT OF LEVEL OF ASSURANCE 08/09	ASSESS- MENT OF LEVEL OF ASSURANCE 09/10	SUMMARY POSITION
						<p>independent external assessment connectivity to GCSx has been gained and PCI compliance recognised.</p> <p>The number of Access to information requests continue to increase with a 25% increase being recorded for the first quarter of 2010 for Freedom of Information requests. Requests continue to be considerably more complex. An increase in numbers and complexity has seen a knock on effect of more appeals being submitted, putting a resource pressure on the central team.</p> <p>Information Sharing Agreements are positively being put in place across the Council, although there are still some areas where staff still claim to be unaware of the need for a legal basis to share information.</p>
39	Communication strategy	Chief Executive (Mark Bentley)	Red / amber	Amber	Amber	The review of the Communications function is now underway – the strategy will be completed by April 2011.
41	Partnership policies	Director of Change and Programme Management	Green / amber	Green	Green	<p>The Council has adopted a governance framework for major partnerships.</p> <p>Internal Audit are currently conducting a review of</p>

Page no.	KEY POLICIES AND PROCEDURES	LEAD OFFICER	ASSESS- MENT OF LEVEL OF ASSURANCE 07/08	ASSESS- MENT OF LEVEL OF ASSURANCE 08/09	ASSESS- MENT OF LEVEL OF ASSURANCE 09/10	SUMMARY POSITION
						partnership arrangements, and will continue to audit the Local Area Agreement and Area Based Grant as key performance management and resource allocation arrangements within the Leicester Partnership.
44	Effective Human Resource Policies	HR Director	Green / amber	Green / Amber	Green / amber	A new 'pay and workforce strategy' for the organisation was agreed by CDB in late 09/10. An action plan for the strategy's implementation was developed and approved by members and progress against the action plan has been reviewed by Performance and Best Value Committee. Good progress has been made against the action plan particularly in relation to single status.
49	Whistle blowing	HR Director	Green / amber	Green / Amber	Green / amber	The Council has a whistleblowing policy and the associated processes for proper handling of disclosure in place. Periodic awareness raising of the policy is undertaken. The existing policy subject to formal agreement to reflect concerns raised by External Audit. However, a new

Page no.	KEY POLICIES AND PROCEDURES	LEAD OFFICER	ASSESS- MENT OF LEVEL OF ASSURANCE 07/08	ASSESS- MENT OF LEVEL OF ASSURANCE 08/09	ASSESS- MENT OF LEVEL OF ASSURANCE 09/10	SUMMARY POSITION
						modernised policy is currently being written.
50	Code of Conduct (officers)	HR Director	Green / amber	Green / Amber	Green / amber	Current code works well. However, a new modernised code is being written.
51	EMAS	Strategic Director of Development, Culture and Regeneration	Green / amber	Green / Amber	Green / amber	November 2009 Verification The annual verification of the Council's EMAS system (including schools) was undertaken by LRQA, the Council's external verifiers, during November 2009. LRQA raised nine minor non-conformities and two minor non-conformities from previous visits were left open. Two of the new minor non-conformities are specific to schools. No major non-conformities were raised during the visit so EMAS re-registration proceeded immediately.
56	Procurement strategy	Chief Finance Officer	Green / amber	Green	Amber ☹	A Contract Management and Procurement Improvement Plan is being implemented on target.
57	Contract Procedure Rules	Chief Finance Officer	Green / amber	Green	Green	CPRs re-written and simplified. Approved by Council. A further review will be carried out once a decision on the introduction of Category Management has taken place.
58	Anti-fraud and corruption	Chief Finance Officer	Green / amber	Green	Green	The Anti-Fraud and Corruption Policy was reviewed and updated by the Audit Committee on 22 nd June 2009. There is an increasing trend of referrals to the

Page no.	KEY POLICIES AND PROCEDURES	LEAD OFFICER	ASSESS- MENT OF LEVEL OF ASSURANCE 07/08	ASSESS- MENT OF LEVEL OF ASSURANCE 08/09	ASSESS- MENT OF LEVEL OF ASSURANCE 09/10	SUMMARY POSITION
						<p>Corporate Counter-Fraud Team and improved performance by the HB Counter-Fraud Team in terms of its position relative to other Unitary Authorities. (There are currently no national performance measures for either element of Counter-Fraud work.</p> <p>The programme of fraud awareness training is progressing well and fraud awareness training is increasingly being targeted at key risk areas of Council business.</p> <p>The Council participates in the National Fraud Initiative and the most recent exercise identified minimal issues for further investigation.</p> <p>On the basis of the above significant assurance can be provided that the Policy is effective in managing the risk of fraud. Further developments planned include use of new systems to capture outcomes in a systematic way to provide benchmark information on the effectiveness of our investigation work.</p>
61	Risk management strategy	Chief Finance Officer	Green	Green amber /	Green amber /	A Corporate Risk Management strategy and action plan was approved by Cabinet on 30 November 2008 and endorsed by the Audit Committee on 3 February 2010.

Page no.	KEY POLICIES AND PROCEDURES	LEAD OFFICER	ASSESS- MENT OF LEVEL OF ASSURANCE 07/08	ASSESS- MENT OF LEVEL OF ASSURANCE 08/09	ASSESS- MENT OF LEVEL OF ASSURANCE 09/10	SUMMARY POSITION
						<p>One of the actions is to replace the old Corporate Risk Register (agreed at Cabinet in January 2009) with Operational and Strategic Risk registers that better reflect the new structure of the Council. These are planned to be in place by the end of April 2010.</p> <p>Assurances that this strategy is being complied with is derived from the formal consideration of risks at departmental management team level, Operational Directors Board and Strategic Management Board. There is considerable evidence that risk management is becoming better embedded in the authority, based on the identification of issues for which support is sought. This position should be enhanced following the launch in March 2010 of the RMIS training programme for 2010.</p>

Page no.	KEY POLICIES AND PROCEDURES	LEAD OFFICER	ASSESS- MENT OF LEVEL OF ASSURANCE 07/08	ASSESS- MENT OF LEVEL OF ASSURANCE 08/09	ASSESS- MENT OF LEVEL OF ASSURANCE 09/10	SUMMARY POSITION
64	Effective administration of financial affairs (Finance Procedure Rules and associated guidance)	Chief Finance Officer	Green	Green/amber	Green ☺	<p>A framework exists through finance procedure rules which is fit for purpose. Audit testing suggests minor non-compliance is still tolerated in too many instances but that the position has improved as indicated from levels of assurance from arising from Internal Audit's work during 2009/10.</p> <p>FMSIS audits suggest continuing improvement in schools.</p>
66	Health and safety policy	HR Director	Green / amber	Green / Amber	Green / amber	<p>The corporate H&S report and action plan ensures that senior management are aware that senior managers are aware of current H&S performance, key H&S challenges. HSE interventions throughout the organisation and priority actions for the coming year.</p> <p>A head of profession for the H&S function is in place.</p>
71	Safeguarding Children	Strategic Director of Children	Green	Green / Amber	Green / Amber	<p>Well embedded safer recruitment procedures across the council & preparations in place for new ISA arrangements. 09/10 has seen a significant increase in referrals to children's social</p>

Page no.	KEY POLICIES AND PROCEDURES	LEAD OFFICER	ASSESS- MENT OF LEVEL OF ASSURANCE 07/08	ASSESS- MENT OF LEVEL OF ASSURANCE 08/09	ASSESS- MENT OF LEVEL OF ASSURANCE 09/10	SUMMARY POSITION
						care & child protection activity, which continues to place additional pressure on front line services. However, no priority areas for action were identified from unannounced inspection completed by Ofsted in Aug 09. Safe disaggregation of the former tripartite LSCB to a city LSCB. The division has an action plan in place covering all key priorities over the next 12 months. This includes implementing recs arising from Lord Laming's report which includes the new Working Together guidance, recs from the Social Work Taskforce Report, all of which is challenging due to issues of limited capacity and resources.

APPENDIX 2 AVAILABLE ON INSITE ONLY

APPENDIX 3

GOOD GOVERNANCE IN LOCAL GOVERNMENT – LEICESTER CITY COUNCIL

SUPPORTING PRINCIPLES	LOCAL AUTHORITY REQUIREMENTS
1. Focusing on the purposes of the Authority and on outcomes for the community and creating and implementing a vision for the local area.	
1.1 Exercising strategic leadership by developing and clearly communicating the Authority's purpose and vision and its intended outcome for citizens and service users.	(a) Develop and promote the Authority's purpose and vision. (b) Review on a regular basis the Authority's vision for the local area and its implications for the Authority's governance arrangements. (c) Ensure that partnerships are underpinned by a common vision of their work that is understood and agreed by all partners. (d) Publish an annual report on a timely basis to communicate the Authority's activities and achievements, its financial position and performance.
1.2 Ensuring that users receive a high quality of service whether directly or in partnership or by commissioning.	(a) Decide how the quality of service for users is to be measured and make sure that the information needed to review service quality effectively and regularly is available. (b) Put in place effective arrangements to identify and deal with failure in service delivery.
1.3 Ensuring that the Authority makes best use of resources and that tax payers and service users receive excellent value for money.	(a) Decide how value for money is to be measured and make sure that the Authority or partnership has the information needed to review value for money and performance effectively. Measure the environmental impact of policies, plans and decisions.

WHERE ARE WE NOW?	ACTION PLANNED	RESPONSIBILITY	TIMESCALE
<p>1.1 One Leicester remains the overarching vision & direction for the City. State of the City report reviews the current position of the city and has informed the Corporate plan for 2010/11 – 12/13 approved by Council in March 2010. Response to CAA has resulted in an action plan focused on delivering outcomes through improved partnership working.</p>	<p>Implementation of the CAA action plan to drive improvements in relation to Partnerships.</p>	<p>Director of Change & Programme Management</p>	<p>June 2010</p>
<p>1.2 CAA service scores in the organisational assessment are at 2 out of 4 for managing performance and overall the Council is rated as adequate. Organisational Development and Improvement Plan 2010/11 approved by Cabinet in March 2010 which aims to deliver One Excellent Council scoring a 4 by 2012. New performance management framework agreed by SMB in March 2010 to support delivery of improvements.</p>	<p>Delivering the priorities set out in the 2010/11 Organisational Development and Improvement Plan.</p>	<p>Director of Change & Programme Management</p>	<p>Ongoing – to achieve excellence by 2012.</p>
	<p>Implementation of the performance management framework.</p>	<p>Director of Change & Programme Management</p>	<p>April 2010</p>

1.3 Managing resources judgement in the organisational assessment indicates that the council regularly operates above minimum standards (3) with an adequate Value for Money rating. Efficiencies described in the ODI plan for 2010/11.	As above	As above	As above
2. members and officers working together to achieve a common purpose with clearly defined functions and roles			
2.1 Ensuring effective leadership throughout the Authority and being clear about executive and non-executive functions and the roles and responsibilities of the scrutiny function.	(a) Set out a clear statement of the respective roles and responsibilities of the executive and of the executive's members individually and the Authority's approach towards putting this into practice. (b) Set out a clear statement of the respective roles and responsibilities of other Authority members, members generally and senior officers.		
2.2 Ensuring that a constructive working relationship exists between Authority members and officers and that the responsibilities of members and officers are carried out to a high standard.	(a) Determine a scheme of delegation and reserve powers within the constitution, including a formal schedule of those matters specifically reserved for collective decision of the Authority, taking account of relevant legislation and ensure that it is monitored and updated when required. (b) Make a Chief Executive or equivalent responsible and accountable to the Authority for all aspects of operational management. (c) Develop protocols to ensure that the Leader and Chief Executive (or equivalent) negotiate their respective roles early in the relationship and that a shared understanding of roles and objectives is maintained. (d) Make a senior officer (the S151 officer) responsible to the Authority for ensuring that appropriate advice is given on all financial matters, for keeping proper financial records and accounts and for maintaining an effective system of internal financial controls. (e) Make a senior officer (usually the Monitoring Officer) responsible to the		

	Authority for ensuring that agreed procedures are followed and that all applicable statutes and regulations are complied with.
2.3 Ensuring relationships between the Authority, its partners and the public are clear so that each knows what to expect of the other.	<p>(a) Develop protocols to ensure effective communication between members and officers in their respective roles.</p> <p>(b) Set out the terms and conditions for remuneration of members and officers and an effective structure for managing the process, including an effective remuneration panel (if applicable).</p> <p>(c) Ensure that effective mechanisms exist to monitor service delivery.</p> <p>(d) Ensure that the organisation's vision, strategic plans, priorities and targets are developed through robust mechanisms, and in consultation with the local community and other key stakeholders, and that they are clearly articulated and disseminated.</p> <p>(e) When working in partnership, ensure that members are clear about their roles and responsibilities both individually and collectively in relation to the partnership and to the Authority.</p> <p>(d) When working in partnership:</p> <ul style="list-style-type: none"> - ensure that there is clarity about the legal status of the partnership. - ensure that representatives of organisations both understand and make clear to all other partners the extent of their Authority to bind their organisation to partner decisions.

WHERE ARE WE NOW?	ACTION PLANNED	RESPONSIBILITY	TIMESCALE
2.1 Constitution and scheme of delegation were revised to reflect the new organisational structures.	Review scheme of delegation to ensure it supports timely & effective decision making	Director of Corporate Governance	June 2010
Roles descriptions being drafted for all councillor positions.	Finalise descriptions through the member development forum.	As above	July 2010
2.2 These protocols exist and the roles are identified in the existing structure.	As above	As above	June 2010
2.3 a & b – these protocols and terms exist.			
2.3 c & d – Quarterly performance monitoring is in place to the Partnership, SMB, Priority Boards and Operational Board, and to Scrutiny. This is confirmed in the agreed performance management framework. ODI Plan includes a priority to continue to improve performance management.	Deliver ODI priority to further improve performance management	Director of Change & Programme Management	March 2011
2.3 e & f - Leicester Partnership agreed its current constitution in September 2009. The constitution sets out the aims and objectives, membership rules and process for making decisions.	Deliver CAA action plan which includes actions to ensure the partnership is fit for purpose through a review of structures and membership, development of a clear scheme of delegation for decision making & development of a protocol setting out the role of the City Council in relation to the Partnership	Director of Change & Programme Management	June 2010

3. Promoting values for the Authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour.	
3.1 Ensuring Authority members and officers exercise leadership by behaving in ways that exemplify high standards of conduct and effective governance.	<p>(a) Ensure that the Authority's leadership sets a tone for the organisation by creating a climate of openness, support and respect.</p> <p>(b) Ensure that standards of conduct and personal behaviour expected of members and staff, of work between members and staff and between the Authority, its partners and the community are defined and communicated through codes of conduct and protocols.</p> <p>(c) Put in place arrangements to ensure that members and employees of the Authority are not influenced by prejudice, bias or conflicts of interest in dealing with different stakeholders and put in place appropriate processes to ensure that they continue to operate in practice.</p>
3.2 Ensuring that organisational values are put into practice and are effective.	<p>(a) Develop and maintain shared values including leadership values for both the organisation and staff reflecting public expectations, and communicate these with members, staff the community and partners.</p> <p>(b) Put in place arrangements to ensure that systems and processes are designed in conformity with appropriate ethical standards, and monitor their continuing effectiveness in practice.</p> <p>(c) Develop and maintain an effective standards committee.</p> <p>(d) Use the organisation's shared values to act as a guide for decision making and as a basis for developing positive and trusting relationship within the Authority.</p> <p>(e) In pursuing the vision of a partnership, agree a set of values against which decision making and actions can be judged. Such values must be demonstrated by partners' behaviour both individually and collectively.</p>

WHERE ARE WE NOW?	ACTION PLANNING	RESPONSIBILITY	TIMESCALE
3.1 A Code of Conduct is in place and 'One Leicester' sets out the culture for public services aspired to by the Council and its partners .	Review and refresh the approach and offer in relation to member development to ensure members understand their roles & responsibilities and are effectively supported	Director of Corporate Governance	September 2010
3.2 Values are set out in One Leicester and are shared across the Leicester Partnership. The Standards Committee has been reconstituted.	As above	As above	As above
4. Taking informed and transparent decisions which are subject to effective scrutiny and managing risk.			
4.1 Being rigorous and transparent about how decisions are taken and listening and acting on the outcome of constructive scrutiny.	(a) Develop and maintain an effective scrutiny function which encourages constructive challenge and enhances the Authority's performance overall and that of any organisation for which it is responsible. (b) Develop and maintain open and effective mechanisms for documenting evidence for decisions and recording the criteria, rationale and considerations on which decisions are based. (c) Put in place arrangements to safeguard members and employees against conflicts of interest and put in place appropriate processes to ensure that they continue to operate in practice. (d) Develop and maintain an effective audit committee (or equivalent) which is independent of the executive and scrutiny functions or make other appropriate arrangements for the discharge of the functions of such a committee. (e) Ensure that effective, transparent and accessible arrangements are in		

	place for dealing with complaints.
4.2 Having good quality information, advice and support to ensure that services are delivered effectively and are what the community wants/needs.	<p>(a) Ensure that those making decisions whether for the Authority or the partnership are provided with information that is fit for the purpose – relevant, timely and gives clear explanations of technical issues and their implications.</p> <p>(b) Ensure that proper professional advice on matters that have legal or financial implications is available and recorded well in advance of decision making and used appropriately.</p>
4.3 Ensuring that an effective risk management system is in place.	<p>(a) Ensure that risk management is embedded into the culture of the Authority, with members and managers at all levels recognising that risk management is part of their jobs.</p> <p>(b) Ensure that effective arrangements for whistle blowing are in place to which officers, staff and all those contracting with or appointed by the Authority have access.</p>
4.4 Using their legal powers to the full benefit of the citizens and communities in their area.	<p>(a) Actively recognising the limits of lawful activity placed on them by, for example, the ultra vires doctrine but also strive to utilise their powers to full benefit of their communities.</p> <p>(b) Recognise the limits of lawful action and observe both the specific requirements of legislation and the general responsibilities placed on Authorities by public law.</p> <p>(c) Observe all specific legislative requirements placed upon them as well as the requirements of general law, and in particular to integrate the key principles of good administrative law</p> <ul style="list-style-type: none"> - rationally, legally and natural justice. - into their procedures and decision making processes.

WHERE ARE WE NOW?	ACTION PLANNED	RESPONSIBILITY	TIMESCALE
4.1 These arrangements and functions are in place.	Continue to consider arrangements and effectiveness	Director of Corporate Governance	Ongoing
4.2 Structure of formal reports has been reviewed and guidance produced to ensure they are robust and evidence based. Reports on which decisions are made are required to set out legal and financial implications provided by the relevant professional officers.	Communicate and embed the guidance	Director of Change and Programme Management	June 2010
4.3 Risk management arrangements have been reviewed to align with the new organisational structures to include strategic and operational risk registers. Risk management training is in place. The Council has a whistleblowing policy & procedure in place.	Continue to embed the revised risk management arrangements.	Corporate Risk Manager	Ongoing
4.4. These principles are followed for the benefit of communities.			
5. Developing the capacity and capability of members and officers to be effective.			
5.1 Making sure that members and officers have the skills, knowledge, experience and resources they need	(a) Provide induction programmes tailored to individual needs and opportunities for members and officers to update their knowledge on a		

to perform well in their roles.	regular basis. (b) Ensure that the statutory officers have the skills, resources and support necessary to perform effectively in their roles and that these roles are properly understood throughout the Authority.
5.2 Developing the capability of people with governance responsibilities and evaluating their performance, as individuals and as a group.	(a) Assess the skills required by members and officers and make a commitment to develop those skills to enable roles to be carried out effectively. (b) Develop skills on a continuing basis to improve performance, including the ability to scrutinise and challenge and to recognise when outside expert advice is needed. (c) Ensure that effective arrangements are in place for reviewing the performance of the executive as a whole and of individual members and agreeing an action plan which might, for example, aim to address any training or development needs.
5.3 Encourage new talent for membership of the Authority so that best use can be made of individual's skills and resources in balancing continuity and renewal.	(a) Ensure that effective arrangements are in place designed to encourage individuals from all sections of the community to engage with, contribute to and participate in the work of the Authority. (b) Ensure that career structures are in place for members and officers to encourage participation and development.

WHERE ARE WE NOW?	ACTION PLANNED	RESPONSIBILITY	TIMESCALE
<p>5.1 Induction for staff and managers has recently been revised and strengthened. A review to test the effectiveness of the new arrangements has been undertaken and findings are being acted on. A further review is planned later in 2010 to ensure the arrangements continue to be fit for purpose. Induction for members is in place but requires review.</p>	<p>Review and refresh the approach and offer in relation to member development to ensure members understand their roles & responsibilities and are effectively supported</p>	<p>Director of Corporate Governance</p>	<p>September 2010</p>
<p>5.2 The appraisal scheme for officers is being redeveloped to a competency based approach and which better links incremental pay progression to a positive appraisal. Working towards the IDEA member development charter. All Elected Members who elected to opt-in to sessions issued with Personal Development Plans. 70% of Elected Members participated.</p>	<p>As above</p>	<p>As above</p>	<p>As above</p>
<p>5.3 Structures and resources for community engagement are being reviewed as part of the Support Services Transformation. The Council is also focused on embedding strategic commissioning to include robust analysis and understanding of the needs of communities.</p>	<p>Deliver ODI priorities relating to support service transformation and strategic commissioning in the ODI Plan</p>	<p>Director of Change & Programme Management</p>	<p>March 2011</p>

6. Engaging with local people and other stakeholders to ensure robust public accountability	
6.1 Exercising leadership through a robust scrutiny function which effectively engages local people and all local institutional stakeholders, including partnerships, and develops constructive accountability relationships.	<p>(a) Make clear to themselves, all staff and the community to whom they are accountable and for what.</p> <p>(b) Consider those institutional stakeholders to whom the Authority is accountable and assess the effectiveness of the relationships and any changes required.</p> <p>(c) Produce an annual report on the activity of the scrutiny function.</p>
6.2 Taking an active and planned approach to dialogue with and accountability to the public to ensure effective and appropriate service delivery whether directly by the Authority, in partnership or by commissioning.	<p>(a) Ensure clear channels of communication are in place with all sections of the community and other stakeholders and put in place monitoring arrangements and ensure that they operate effectively.</p> <p>(b) Hold meetings in public unless there are good reasons for confidentiality.</p> <p>(c) Ensure that arrangements are in place to enable the Authority to engage with all sections of the community effectively. These arrangements should recognise that different sections of the community have different priorities and establish explicit processes for dealing with these competing demands.</p> <p>(d) Establish a clear policy on the types of issues they will meaningfully consult on or engaged with the public and service users about including a feedback mechanism for those consultees to demonstrate what has changed as a result.</p> <p>(e) On an annual basis publish a performance plan giving information on the Authority's vision, strategy plans and financial statements as well as information about its outcomes, achievements and the satisfaction of service users in the previous period.</p> <p>(f) Ensure that the Authority as whole is open and accessible to the community, service users and its staff and ensure that it has made a commitment to openness and transparency in all its dealings, including partnerships, subject only to the need to preserve confidentiality in those specific circumstances where it is proper and appropriate to do so.</p>

6.3 Making best use of human resources by taking an active and planned approach to meet responsibility to staff.		(a) Develop and maintain a clear policy on how staff and their representatives are consulted and involved in decision making.	
WHERE ARE WE NOW?	ACTION PLANNED	RESPONSIBILITY	TIMESCALE
6.1 A Scrutiny annual report was prepared and published to reflect the work of scrutiny which was undertaken during 2008/09.	Develop and publish the Scrutiny annual report for work undertaken during 2009/10.	Director of Corporate Governance	July 2010
6.2 The ODI Plan includes a clear priority to develop strategic commissioning. As part of this the approach to consulting and engaging communities in the commissioning cycle is being reviewed and strengthened. The consultation toolkit continues to be revised and updated and consultation work is co-ordinated across the Council. Support service transformation will strengthen the structures and resources which support this work.	Deliver ODI priorities relating to support service transformation and strategic commissioning in the ODI Plan	Director of Change & Programme Management	March 2011
6.3 Framework for relationships with Trade Unions has been revised in light of the new organisational arrangements. The ODI programme has placed a strong emphasis on developing internal communications with staff. A staff survey has been conducted and the findings published.	<p>Embed the new framework for TU relations.</p> <p>Deliver the action plan from the staff survey which includes a focus on listening and engaging with staff.</p>	<p>Director of Human Resources</p> <p>Senior Leadership Team (SMB / Divisional Directors / Heads of Service)</p>	<p>Ongoing</p> <p>March 2011</p>

LOCAL GOVERNMENT OMBUDSMAN COMPLAINTS

COMPLAINTS RECEIVED			
	0708	08/9	09/10
Complaints received	130	136	117
Complaints closed	109	117	108
Complaints closed – less premature	70	73	71
Complaints open at year end 31 March 2008	21	19	9

	07/08	08/09	09/10
Chief Executive	0	0	0
R&C	18	29	24
C&YPS	18	17	17
Adults and Housing	88	88	73
Resources	6	2	3
<i>TOTAL</i>	130	136	117

Divisional Breakdown	09/10
Adult Services	6
Chief Executive's Office	0
Corporate Governance	3
Environmental Services	6
Financial Services	15
Housing Services	43
Housing Strategy	6
Learning Environment	2
Learning Services	8
Planning & Economic Development	5
Regeneration, Transport & Highways	9
Social Care & Safeguarding	13
Older Persons Services	1
Total	117

LOCAL GOVERNMENT OMBUDSMAN COMPLAINTS			
BREAKDOWN OF OUTCOMES			
	07/08	08/09	09/10
No Maladministration	30(28%)	35(30%)	30
Local Settlement	14(13%)	10(8%)	20
Outside Jurisdiction	10(9%)	8(7%)	12
Ombudsman's Discretion*	15(14%)	20(17%)	9
Premature	39(35%)	44(38%)	37
Discontinued/Withdrawn	1(1%)	0	0
Maladministration found	0	0	0
Total	109	117	108

*complaints described as Ombudsman's Discretion are those which have been terminated for reasons other than that there was no evidence of maladministration or that the complaint was locally settled. For example, a complaint might be terminated because the complainant wishes to withdraw his/her complaint.

LOCAL GOVERNMENT OMBUDSMAN COMPLAINT OUTCOMES BY DIVISION 2009/2010								
	NM	LS	OJ	OD	MI	P	W	TOTAL
Adult Services	4					1		5
Chief Executive's Office						0		0
Corporate Governance		1	1	1				3
Environmental Services	3					3		6
Financial Services	3	3		3		4		13
Housing Services	12	10	3	1		10		36
Housing Strategy	1		2			6		9
Learning Environment	1					1		2
Learning Services	4	1	0					5
Planning & Economic Development		2	2			2		6
Regeneration, Transport & Highways		1	2	3		2		8
Social Care & Safeguarding	2	1	2	1		8		14
Older Persons Services		1						1
Total	30	20	12	9		37		108

NM No Maladministration

LS Local settlement

OJ Outside Jurisdiction

OD Ombudsman Discretion

MI Maladministration & Injustice

P Premature (opportunity to put the complainant through our 3 stage complaint procedure **NOT** recorded in the Ombudsman's year end figures.

The total amount paid out in Local Settlement payments was
£39406.00 detailed below:

Department	Ref No	Subject	Compensation
Planning & Economic Development	07/14792	Failed to take action to enforce planning permission	£750.00
	07/11511	Failed to take action to enforce planning permission	£250.00
			Total: £1000.00
Housing Services	08/016574	Delay in completing repairs	£150.00
	09/019561	Failure to keep the tenant informed of planned works to windows and doors	£100.00
	09/014307	Delay in completing repairs	£200.00
	09/012963	Carrying out repairs that were defective	£125.00
			Total: £575.00
Financial Services	08/012765	Recovery action for Council Tax	£250.00
	08/010787	Incorrectly amended the complainants rent account	£250.00
			Total: £500.00
Housing Strategy	09/007837	Failure to take appropriate action to deal with serious racial harassment and ASB	£350.00
			Total: £350.00
Adult Services	09/004883	Failings in respect of the implementation and review of Section 17 and after care for part of which was overcharged	£36731.00
			Total: £38256.00
Social Care & Safeguarding	09/10623	Failure to invite the complainant to LAC meetings	£250.00
			Total: £250.00
			Total: £39406.00

**Complaints – Findings of Maladministration
Comparison Table of Family Authorities**

Authority	07/08		08/09		09/10	
	Findings of Maladministration	Total No. of complaints	Findings of Maladministration	Total No. of complaints	Findings of maladministration	Total No. of complaints
Leicester	0	94	0	78	Figures not released by the LGO until July 2010	Figures not released by the LGO until July 2010
Birmingham	0	386	0	303		
Blackburn with Darwen	0	41	0	31		
Bolton	0	54	0	48		
Bradford	1	80	1	72		
Bristol	3	116	30	120		
Coventry	1	59	0	47		
Derby	0	37	0	30		
Dudley	6	71	0	55		
Kingston-upon-Hull	0	63	0	57		
Nottingham	1	74	0	60		
Plymouth	1	54	1	59		
Portsmouth	0	37	1	35		
Southampton	0	41	0	27		
Wolverhampton	1	40	0	51		

These figures do not include complaints which are 'premature'. That is complaints which the authority has not had an opportunity to deal with.

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APPENDIX 2

PROCESS: CONSULTATION STRATEGY				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Director of Change & Programme Management	<ol style="list-style-type: none"> 1. The established strategy is not appropriate to the Council's needs. 2. Current approaches to consultation fail to engage the community effectively and result in poorly informed decision making. 3. Consultation is not co-ordinated across agencies and results in 'consultation fatigue' 4. There is insufficient ownership and understanding of the strategy and approach to consultation. 5. The strategy is not given the appropriate level of leadership by the members and senior managers. 	The consultation toolkit continues to meet best practice.	<p>The Chief Executive now takes responsibility for the strategy.</p> <p>A mapping of current activity carried out in March 09 is now informing an action plan to improve effectiveness</p>	<p>Our approach to consultation now forms part of the ODI priority relating to embedding strategic commissioning and is overseen by a Strategic Commissioning Project Board chaired by the Chief Executive. The approach is linked to improving overall how we undertake needs analysis and research and intelligence.</p> <p>The consultation toolkit remains in place and continues to be updated, and current/future/closed consultations are captured on the 'Have Your Say' section of the website.</p> <p>Work is underway to further develop the approach including implementation of corporate standards,</p>

				clear forward planning and co-ordination of consultation activity, alignment to strategic commissioning, working on a joined up approach with partners and piloting of new approaches to consultation and engagement.
Assessment of level of assurance (Delete those not applicable)		Green / Amber		

Action Plan as at March 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	There is a consistent and co-ordinated approach to consultation across the Council.	Develop and implement corporate standards for consultation and community engagement activity across all Council Services and with partners Develop forward plan of consultations and engagement activity across the Council and for each Strategic Theme Group	Partnership Executive Team – Team Leader for R&I & Strategic Commissioning	31 st May 2010	No	Standards and processes in development	H	Forms part of the work-plan for the team and relates to delivery of the ODI priority on strategic commissioning	ODI plan Work-plan for Partnership Executive Team.

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
		Implement a sign-off process for all consultation & engagement activity, both for forward plan and for anything outside of forward plan							
2	The approach is joined up with partner organisations where appropriate which avoids 'consultation fatigue' within the city.	Identify opportunities to work across the Partnership to improve and join up consultation and engagement activity.	Partnership Executive Team – Team Leader for R&I & Strategic Commissioning	31 st May 2010	No	Task & Finish Group being established to support this work	M	Forms part of the work-plan for the team and relates to delivery of the ODI priority on strategic commissioning	ODI plan Work-plan for Partnership Executive Team.
3	Maximise use of new technologies in consultation and engagement	Pilot out new approaches to consultation & engagement, through using social media as part of communication mix	Partnership Executive Team – Team Leader for R&I & Strategic Commissioning	31 st July 2010	No	Yes	M	Forms part of the work-plan for the team and relates to delivery of the ODI priority on strategic commissioning	ODI plan Work-plan for Partnership Executive Team.
4	Consultation activity is aligned with the organisational management and governance arrangements	Develop a framework/matrix showing when, where and how the various stakeholders should be involved, engaged & informed across the commissioning cycle. Develop standards,	Partnership Executive Team – Team Leader for R&I & Strategic Commissioning	31 st July 2010	No	Yes	M	Forms part of the work-plan for the team and relates to delivery of the ODI priority on strategic commissioning	ODI plan Work-plan for Partnership Executive Team.

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
		toolkit & methodologies and link to strategic commissioning framework and roll out as part of wider commissioning training.							

Signature of Lead OfficerDate.....

PROCESS: PERFORMANCE MANAGEMENT FRAMEWORK				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Director of Change & Programme Management	<ol style="list-style-type: none"> 1. The established framework is not appropriate to the Council's needs. 2. There is insufficient ownership of performance management across the Council which means there is not a culture of continuous improvement. 3. Performance data and information is not sufficiently robust to support effective decision making. 4. Performance management is not given the appropriate level of leadership by the political and managerial executive. 5. The policy and resultant guidance is not fully implemented by the Council's management and so used to drive up performance. 6. The framework does not interface correctly with other frameworks e.g. the Leicester Partnership. 	The Audit Commission have looked at performance management arrangements as part of the CAA assessment (including as part of a review of ODI) and have confirmed that the direction we are taking is positive.	A 'Delivering Excellence' review of Performance Management is building on developments already implemented.	<p>A new performance management framework has been agreed by Strategic Management Board. This aligns the Council's performance management arrangements with the new organisational structures and with One Leicester, and continues to support our partnership arrangements.</p> <p>A new Corporate Plan for 2010/11 – 2012/13 has been agreed and signed off by Council which supports delivery of One Leicester. This is underpinned by commissioning statements for Strategic Theme Groups and Priority Boards setting out more detail around the specific outcomes and actions that will be delivered for each priority.</p> <p>Quarterly performance reporting to Cabinet, Performance & Value for Money Select Committee, Leicester Partnership Executive SMB, Priority Boards and Operational Board is well established.</p> <p>Further developing our approach</p>

				to performance management remains a priority within the ODI Plan. This includes a focus on the roll out of Performanceplus as our corporate performance monitoring system. The structures and resources which support operational and strategic performance management are currently under review as part of the support services transformation programme. This will further strengthen arrangements.
Assessment of level of assurance (Delete those not applicable)		Green		

Action Plan as at March 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	Ensure the organisation has a strong performance orientated culture.	Review the existing learning and development offer in relation to performance management and seek to strengthen this. Implement a clear communications plan to embed performance management across LCC.	Partnership Executive Team Lead for Performance, Planning & Partnerships	30 th Sept 2010	Initial proposals developed	Embed into corporate induction & induction for managers. Develop specific offers around certain themes. Roll out a clear comms plan which ensures performance is visible across	H	Forms part of the work-plan for the team and relates to delivery of the ODI priority on performance management	ODI plan Work-plan for Partnership Executive Team.

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
						LCC.			
2	Ensure the partnership performance management framework is well defined and understood	Develop a Leicester Partnership Performance Management Framework	Partnership Executive Team Lead for Performance, Planning & Partnerships	30 th June 2010	No	Framework to be developed	M	Forms part of the work-plan for the team and relates to delivery of the ODI priority on performance management	ODI plan Work-plan for Partnership Executive Team.
3	Put in place a common performance management system (Performance Plus)	PerformancePlus to be rolled out across all Divisions. Divisional and priority Board scorecards to be managed through PerformancePlus	Partnership Executive Team Lead for Performance, Planning & Partnerships	30 th June 2010	Roll out plan prepared. Initial pilot work done with Cultural Services Division.	Framework to be developed	H	Forms part of the work-plan for the team and relates to delivery of the ODI priority on performance management	ODI plan Work-plan for Partnership Executive Team.

Signature of Lead OfficerDate.....

PROCESS: PROJECT MANAGEMENT				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Director of Change and Programme Management	<ol style="list-style-type: none"> 1. New project and programme management gateway and portfolio management processes are not robustly embedded 2. Programme management standards and procedures for major programmes are insufficiently defined, communicated and applied 3. Poor articulation and measurement of project and programme benefits means that the portfolio does not achieve maximum impact in relation to the One Leicester priorities 4. Risks and wider corporate resource implications of major projects inadequately identified and addressed. 5. Insufficient management skills, resources and professional support available to major projects and programmes. 6. Completed projects inadequately reviewed so that lessons learnt and potential improvements are not applied. 7. Insufficiently planned handover of project outputs to the business means project benefits are not fully realised. 	<p>A programme of assurance reviews across a sample of the Council's portfolio of programmes and projects is continuing. The process involves assurance of each project / programme against a "best practice" checklist with a report produced and action plans agreed. The lessons learnt from each 6 monthly programme of reviews are compiled and shared with senior officers and members. Directors receive reports from reviews conducted on projects / programmes in their portfolios. The process provides a picture of the Council's overall performance in this area, and helps target future training and development activity. The Corporate Portfolio Management Office (CPMO) determine the programme in</p>	<p>A project management training programme has been delivered and project management standards developed and placed on the LCC intranet. Approval, monitoring and review of projects remains a focus area. This is being addressed under the ongoing LCC Delivering Excellence "Programme Management " programme. This will establish a Corporate Portfolio Management Office by September 2009 which will be responsible for the ongoing management, coordination and monitoring of these issues. Processes for ongoing management of the latter are currently under development.</p>	<p>Implemented a Strategic Portfolio Management (SPM) and Gateway process to support our new Priority Boards and ensure visibility and control of our project and programme activity. We have standardised these new approaches to project and programme management into our business as usual ways of working and evaluated the initial operation of them. Established a Corporate Portfolio Management Office to manage and coordinate our SPM and Gateway process, to support good practice in the delivery of projects and programmes and to build our internal project management capability. Introduced simpler, readily accessible project management standards which are easier to use and focus project managers more on delivery of benefits from projects, as well as helping monitor benefits delivery.</p>

		<p>conjunction with Internal Audit and Corporate Risk Management.</p> <p>In addition the work on project and programme management has recently been reviewed by the Audit Commission in their review of the ODI programme overall. The report which was received in January 2010 confirmed that arrangements had significantly improved for project and programme management.</p>		<p>Delivered high-quality training to 240 project managers and directors from across the Council in the new project management standards and approach. Completed Project Assurance Reviews for over 40 key projects and programmes and evaluated the first 6 month project assurance programme. Established a successful and well-supported Project Management Network to act as a "Centre of Excellence", help with transfer of skills and learning between our project managers and to provide mutual support and guidance.</p>
Assessment of level of assurance (Delete those not applicable)		Green		

Action Plan as at March, 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	Ensure that training supports the effective embedding of the project and	A new project management learning and development framework is being developed and put in	Head of Portfolio Management	31 st August 2010	LCC project standards course has been revamped	Detailed delivery arrangements now being worked on	H	Part of the next stage of development of the CPMO and reflected in their workplan	Outline learning and development framework CPMO work-plan

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
	programme management standards and processes	place to reflect the new arrangements and to support new and existing project and programme managers across the Council.			and continues to be delivered. 240 Project Managers and Project Directors have been briefed on the new portfolio management and gateway processes. Outline framework has been completed				
2	Ensure consistency around programme management building on the work undertaken around project management	New programme management standards are being developed and will be implemented supported by necessary training during 2010/11	Head of Portfolio Management	31 st July 2010	Initial standards developed and piloted	Training proposals being developed	H	Part of the next stage of development of the CPMO and reflected in their workplan	CPMO work-plan Initial draft standards
3	Strengthen the approach to benefits management within projects and programmes	CPMO to support the development and identification of benefits for significant projects and programmes.	Head of Portfolio Management	30 th April 2010	Incorporated into the learning and development activities and assurance	Finalise the CPMO benefits monitoring arrangements	H	Part of the next stage of development of the CPMO and reflected in their workplan	

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
		<p>CPMO to commence monitoring of benefits for significant projects and programmes</p> <p>Build in appropriate support on benefits management into the project management learning and development framework .</p> <p>Focus on this aspect as part of the assurance review programme</p>		31 st July 2010	review process.				
4	Ensure that our approach is aligned and understood by key partners particularly where joint projects / programmes are undertaken.	Share and communicate our approach and frameworks with key partner organisations. Agree working arrangements for partnership / joint projects	Head of Portfolio Management	31 st July 2010	Underway	Meetings scheduled for discussions	L	Part of the next stage of development of the CPMO and reflected in their workplan	CPMO work-plan

Signature of Lead OfficerDate.....

PROCESS: MEMBERS' CODE OF CONDUCT AND POLITICAL CONVENTIONS AND MEMBERS SUPPORT FRAMEWORK				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Director of Corporate Governance	<ol style="list-style-type: none"> 1. Members not sufficiently trained to enable them to conduct the business of the Council in accordance with the law and the Council's Constitution. 2. Members' conduct not in accordance with the provisions of the Members Code of Conduct. 3. Deterioration in Member/officer relations leading to less effective strategic management of the authority. 4. Members unable to carry out their duties, including constituency work, in an effective manner leading to personal stress and a disengagement with their electorate and a less effective democratic interface with constituents. 5. Members violate provisions of Members Allowance Scheme. 	<p>Good evidence of Members conducting business of Council according to law and Constitution. Monitoring Officer and Legal Officers providing support in meetings.</p> <p>Good evidence of Members acting within the Code of Conduct within the Chair of the Standards Committee annual report. Good profile for Standards Committee. Monitoring Officer has visible presence at key meetings to deal with conduct issues.</p> <p>Good evidence of good Officer/Member relations even during period of political change.</p> <p>Good evidence of effective constituency work by Councillors.</p> <p>Internal audit report into Members Allowances scheme did not indicate</p>	<p>Annual mandatory training provided for Committee Members on Regulatory issues (Planning, Development Control and Licensing).</p> <p>Members Development Strategy produced and endorsed by full Council (Sept 08) with implementation co-ordinated by Members Development Forum.</p> <p>Specific approved revenue budget allocated for Member Development Charter.</p> <p>Cross Party support and signing of IDEA Members Development Revised process for dealing with Member complaints – Local Assessment of Complaints – Making the New System work – endorsed by full Council, Sept 08. Review of Members Allowances Scheme, approved by Council, Nov 09 and including support provisions for Councillors.</p> <p>Approval by full Council, June 08 of process for decisions by individual Cabinet Members.</p> <p>Visits and presentations to political groups and Cabinet on Code of Conduct and Member</p>	<p>Completion during year of strategic developments in members training and development and implementation of strategy initiated (with ongoing work in 2009/10).</p> <p>Review of Political Conventions initiated.</p>

		any instances of violation.	complaint issues by Chair of Standards Committee. Review of Political Conventions initiated. Guidance produced for Members and public attending Ward Community meetings on Members interests at such meetings. Review and update of documentation on register of Members interests and issue of revised documentation for member completion	
Assessment of level of assurance (delete those not applicable)		Green/ Amber		

Action Plan as at March, 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	Members' conduct	Member training and development programme to include Code and ethical issues. Regular meetings between Monitoring Officer and Whips to build strong relationship and allow raising of political issues for dealing with internally as well as conduct	Director of Corporate Governance (Monitoring Officer)	May 2011	Development of Whips meetings and informal resolution of conduct issues have started.	Programme of Members Development to be designed.	M		Completed programme of workshops with attendances. Minutes. File notes.

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
		issues for informal resolution.							
2	Effective ward representation	Further embedding and development of the Ward Community Meetings	Director of Corporate Governance	May 2011		Closer alignment of the Council's neighbourhood working agenda with the ward community meeting structure	M		Case studies
3	Member / Officer relations maintained in run up to Council elections in 2011	Regular meetings with Senior Management Board and Cabinet. Chief Executive and Leader. Monitoring Officer and Whips. Regular briefing of Cabinet leads.	Director of Corporate Governance	May 2011			M		Minutes of meetings. Lack of conduct complaints from Officers.

Signature of Lead OfficerDate.....

PROCESS: THE COUNCIL'S CONSTITUTION				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Director of Legal Services	Failure to maintain the Constitution so as to comply with current legal and managerial requirements.	Assurance can be given subject to implementation of the action plan below.	Adequate.	Adequate
Assessment of level of assurance (Delete those not appropriate)		Green / Amber		

Action Plan as at March, 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	The Constitution will need to be amended to reflect the requirements of the new Administration.	The Constitution has been updated to reflect all changes authorised by Council to date.	Director of– Legal Services	June 2009	Yes				
2	Constitution needs to be updated regularly and published on the internet / intranet.	The need for change is kept under review following each Council meeting and any changes required are published within five working days following approval by full Council.	Director of Legal Services	Monthly	Yes	Yes			
3	Cabinet's terms of reference and scheme of delegation need to be updated to reflect the new Cabinet.	Reviewed regularly.	Director of Legal Services	June, 2009	Yes				

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
4	Training for Elected members.	There is ongoing need to identify training needs which will be managed via the Members Development Programme.	Director of Corporate Governance	Sept, 2010		Yes	H		
5	Training for officers	There is also a need for ongoing training for officers. A further training programme needs to be prepared and offered.	Director Corporate Governance	Sept, 2010		Yes	H		
6	Review scheme of delegation to ensure it supports timely and effective decision making	Planned.	Director of Corporate Governance.	Sept 2010		Yes	H		

Signature of Lead OfficerDate.....

PROCESS: INFORMATION GOVERNANCE				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Director – Information and Support	<ol style="list-style-type: none"> 1. Non-compliance with Information law requirements will result in enforcement action including potential corporate fines and possibly criminal proceedings against individual officers. 2. Failure to provide adequate training and guidance may result in non-compliance through ignorance by staff 3. Poor quality data will result in flawed decision making and service delivery failure 4. Information availability at heightened risk during a period of organisational and physical change 	<p>Assurance can be given in all areas covered by the central function.</p> <p>Assurance cannot be given at member level.</p> <p>All divisions now have reasonable compliance for Freedom of Information requests and much improved processes in place to deal with them. However “Reasonable compliance” is not legislative compliance required by law which entails 100% compliance. Many access to information requests have been answered outside of legal timescales; last year saw 23% answered outside the legislative timescales.</p> <p>Assurance cannot be given that Subject Access Requests are consistently being answered in time or in accordance with the law. The central function does not have oversight of these requests, and therefore cannot monitor or manage performance. The complaints procedure</p>	<p>Weaknesses exist across the Council in the areas of:</p> <p>1. Training/awareness Significant work has been undertaken. Corporate training team provides some courses. Staff still say they are unaware of the legislation. Level of training resources is insufficient to ensure Council staff are adequately trained. Information Commissioner’s undertaking will require a heavier commitment to training and awareness raising</p> <p>2. Departmental procedures Not all departments have procedures in place to support devolved functions. Progress has been hampered by staff changes in several areas.</p>	<p>Weaknesses exist across the Council in the areas of:</p> <p>1. Training/awareness Significant levels of work continue to be undertaken. Corporate training team provides some courses. Both FOIA and DPA have been included in completely refreshed mandatory Corporate and IT induction processes. FOIA and DPA course offered as part of core training, but is not mandatory. Provision through e-learning courses is under development. Some staff however, still claim to be unaware of the legislation or recent policy changes. Level of training resources is insufficient to ensure adequate staff training.</p> <p>2. Divisional procedures Progress has been made in all divisions with permanent staff being appointed as co-ordinators, who are becoming well versed in information rights practice. Other staff remain sometimes slow at providing information and FOIA deadlines are still being missed although the majority are now responded</p>

		<p>indicates that many Subject Access Requests are not answered within 40 calendar days. Some Staff seem unaware that they should charge £10 for requests and do not understand exemptions under the data protection Act 1998. An audit will be undertaken during the coming year to assess levels of compliance.</p> <p>A detailed Information Security work programme with SIRO oversight continues to improve the security condition across the information estate following two previous locally high profile incidents. Work covers both manual and electronic data and considers extensive dependencies. Through independent external assessment connectivity to GCSx has been gained and PCI compliance recognised.</p> <p>The number of Access to information requests continue to increase with a 25% increase being recorded for the first quarter of 2010 for Freedom of Information requests. Requests continue to be considerably more complex.</p>	<p>3. Central function Is insufficiently staffed to cope with major incidents, significant changes in legislation or staff departures and long term absences. Two temporary staff provided by CDB (until Sept 09) corporate review being actioned.</p>	<p>to in timescales. Lack of resources in some divisions (e.g. Access to Records, HR) means it is proving difficult to meet legislative deadlines for complex and time consuming Subject Access Requests.</p> <p>3. Central Function. Has been strengthened, a new Head of Information Governance recruited on the retirement of the previous incumbent, two permanent IG Officers recruited to replace the temporary staff and a Corporate Registers Officer as a shared resource for the Information Governance, Security and Management areas recruited. The ever increasing volumes of Governance work however means that both the central Team and Divisional specialists are all working under considerable and constant pressure.</p> <p>4. Logging systems Systems in place to record FOIA requests, RIPA authorisations are inadequate. Unable to provide statistics and management information quickly and easily. Customers cannot</p>
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		<p>An increase in numbers and complexity has seen a knock on effect of more appeals being submitted, putting a resource pressure on the central team.</p> <p>Information Sharing Agreements are positively being put in place across the Council, although there are still some areas where staff still claim to be unaware of the need for a legal basis to share information.</p>	<p><u>General position</u></p> <p>1. Guidance All required centrally is in place and a full review is being conducted by IG. Departmental guidance is not complete in all areas.</p> <p>2. Registers Registers are maintained information is usually provided when needed. A specialist resource is being recruited.</p> <p>3. Information sharing Core document being maintained. A corporate register is being finalised. Awareness levels are inconsistent. Further publicity/ workshop needed Campaign planned for 2009/10 following countywide review of protocol.</p> <p>4. Training / awareness This is a major risk area and the Council is still not doing enough to ensure it is in a position to meet its legislative obligation. Significant work has been undertaken, further work needed of which some is scheduled for</p>	<p>submit requests by e-forms. Improvements in all areas are planned for 2010.</p> <p><u>General position:</u></p> <p>1. Guidance All required centrally is in place and a full review is being conducted by IG to update and revamp of the IG pages on both the Council Intranet and Internet.</p> <p>2. Registers A specialist resource (full time Registers Officer) has been in place for 9 months.</p> <p>3. Information sharing Core document being maintained and register of all sharing agreements being compiled. Awareness levels are inconsistent but rising. Further publicity/ workshop needed; Campaign planned for 2010.</p> <p>4. Training / awareness Significant work has been undertaken but this remains a major risk area and more is still required to fully meet legislative obligations.</p>
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			<p>2008/0. Consolidation of departmental functions, neglected DPA/FOIA training. Corporate training team is working to overcome this. Information Commissioner has indicated he expects the Council to do more in this area.</p> <p>5. Data quality Corporate standards being produced to ensure best informed decision making.</p> <p>6. Information Management Team in place. EDRMS being rolled out in property services information management strategy, IM policy and under lying procedures being produced.</p> <p>7. Information security Policy approved and published 2 Jul 2008. Guidance notes produced to address issues during the year. Security audits on-going special audit undertaken following recent security scares outside the Council.</p>	<p>5. Data quality Corporate Data Quality Policy now exists and standards are being produced by the Information Management Programme Board to ensure best informed decision making. This will be linked to work to identify named Divisional Data Custodians.</p> <p>6. Information Management Team in place. EDRMS has been implemented in property Services and Complaints, and is being rolled out in social care.</p> <p>7. Information security Policy and process reviews and updates continue with detailed embedding within refreshed induction processes. A fully information estate review of holdings both manual and electronic is underway to improve essential data access and auditable compliance to our Retention & Disposal Policy and schedules.</p>
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			8. Complaints A new FOIA/DPA complaints procedure has been introduced to meet the requirements of FOIA S45 and EIR. This was done in consultation with the Resources Cabinet link and under delegated powers to SRG.	8. Complaints FOIA/DPA complaints procedure working adequately.
Assessment of level of assurance (Delete those not applicable)		Amber		

Action Plan as at March, 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	All departments to be 100% legislative compliant in responding to information access requests.	Agree plan with IG Co-ordinators to improve compliancy and implement.	HIG	June 2010	No	Audit Subject Access Request response times. Proposals for improving compliance to be produced by HIG Regular events and campaigns to raise awareness of IG issues	H	Council only 80% compliant on FOIA requests. Unknown on DP requests. Whilst evidence indicates a poor record for DP time responsiveness it must be noted that no SAR complaint against the Council has even been upheld.	FOIA register held by IG Team. DP complaints held by IG team.

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
2	Ensure corporate registers are accurate, complete and up to date	Reinforce message and monitor performance	IGG	Sep 2010	No	Registers Officer has a planned programme of work	M	Several registers are legislative obligations. Depts. Are not as yet providing all required information and the Registers Officer is addressing this within the Work Programme	
3	Production of accurate FOIA stats (Ministry of Justice model)	Identify and procure new logging system	HIG	Sep 2010	No	Report to Director of Information and Support for May 2010 with options and recommendations.	H	IG Team assessing options.	
4	Increase functionality and use of website and Insite	Review and update all IG pages on Insite and website, including addition of e-forms and disclosure log, and update guidance for staff.	HIG	June 2010	No	Work with web team to develop website pages.	H		
5	Data Quality needs to be assured	Prove the quality of internal and external data at all times.	HIG	Mar 2008	No	Yes	M	Pan County IMAG quality strategy produced. Leicester Partnership Information Group developing City Strategy. IM team developing Council standards.	

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
6	Ensure compliance with policies and procedures to process information security.	Identify needs and implement action plan.	Head of Information Security	Q4/2010	No	Yes	H	Policies and procedures are published however there is a weakness in compliance as evidenced by the breach last year following which the information has asked that the Chief Executive sign an undertaking with regard to the Council's secure processing of its information.	Policy on INSITE.

Signature of Lead OfficerDate.....

PROCESS: COMMUNICATION STRATEGY				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Head of Communications	Assurance depends on successful refocusing, realignment and centralisation of communications and marketing function planned for 2010.	New communications strategy awaiting development, so assurance not possible at this stage.	Ongoing uncertainty of communications and marketing review and impending change programme made future direction unclear.	Future of review of communications and marketing now much clearer and progress can now be made with a new communications strategy.
Assessment of level of assurance (Delete those not applicable)		Amber		

Action Plan as at March 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	Strategy should emerge as a key part of the transformation and centralisation of communications and marketing function.	Production of an annual communications plan is already underway as part of the commissioning work around the new priority boards. These priority board requirements, along with other corporate requirements, will help shape the new communications and marketing function and guide the development	Mark Bentley, Head of Communications	Oct 2010	No	Oct 2010	H		

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
		of a new strategy.							
2	Strategy will need to be assured post – introduction.	Strategic management board will provide assurance of compliance.	Mark Bentley, Head of Communications	Oct 2010	No	Oct 2010	M		

Signature of Lead OfficerDate.....

PROCESS: PARTNERSHIP POLICIES				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Director of Change & Programme Management	<ol style="list-style-type: none"> 1. Failure to work as an effective partner. 2. Failure to fulfil the Council's community leadership role. 3. Failure to sufficiently safeguard the Council's legal, financial and other interests as a member of any partnership. 	<p>The council has adopted a governance framework for major partnerships.</p> <p>Internal Audit are currently conducting a review of partnership arrangements, and will continue to audit the Local Area Agreement and Area Based Grant as key performance management and resource allocation arrangements within the Leicester Partnership.</p>	<p>Directors will provide assurance of compliance with the framework.</p> <p>A DE review of strategic partnership arrangements is underway to improve effectiveness.</p>	<p>In response to CAA an action plan has been developed focused on improving outcomes through effective partnership working. This action plan has been approved by the Leicester Partnership Executive and provides a focus for our work and the work of partners. Further developing and improving the way we work in partnership is a priority in the ODI Plan and the milestones in that plan are consistent with this action plan.</p>
Assessment of level of assurance (Delete those not applicable)		Green		

Action Plan as at March 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	There is a clear understanding of the role of partners particularly in relation to elected member responsibilities	Develop a protocol or similar setting out the role of the City Council in relation to the Leicester Partnership to ensure clarity about the relationship particularly between	Partnership Executive Team Lead for Performance, Planning & Partnerships	30 th June 2010	No	Yes	H	Forms part of the work-plan for the team and relates to delivery of the ODI priority on performance management	<p>ODI plan</p> <p>Work-plan for Partnership Executive Team.</p> <p>CAA action plan</p>

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
		<p>cabinet portfolios and the thematic partnership work to ensure decisions are made with pace</p> <p>Develop proposals for elected member engagement with the LP</p> <p>Provide briefing sessions for LCC elected members on the role of LSPs and the role of local authorities as community leaders and the accountable body for LSPs generally, and the relationship between the LP and Leicester City Council specifically</p>							
2	Partnerships contribute effectively to improved outcomes	<p>Re-establish LP Performance Scrutiny Board and have it operating effectively</p> <p>Work with partners to drive improvement in the CAA red flagged areas within CAA and</p>	Partnership Executive Team Lead for Performance, Planning & Partnerships	30 th June 2010	<p>LP Perf Scrutiny Board has been re-established.</p> <p>Commissioning statement</p>	Yes	H	Forms part of the work-plan for the team and relates to delivery of the ODI priority on performance management	<p>ODI plan</p> <p>Work-plan for Partnership Executive Team.</p> <p>CAA action plan</p>

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
		<p>seek to remove the red flags</p> <p>Develop a strategy and action plan for neighbourhood working which is agreed by the council and Leicester Partnership</p>			<p>s have been produced for red flagged areas.</p> <p>Project set up to deliver the neighbourhood working strategy.</p>				

Signature of Lead OfficerDate.....

PROCESS: EFFECTIVE HUMAN RESOURCES POLICIES				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
HR Director	<p>Failure to identify and implement opportunities to modernise – leading to inability to make the best use of resources, act with probity / integrity or be fair / inclusive.</p> <p>Substantial fraud leading to major loss of resources and crisis budget cuts.</p> <p>Loss of key staff leading to non availability of key knowledge / expertise and /or effective leadership.</p> <p>Breach of legislation for HR leading to major damages being awarded against the Authority.</p>	A new 'pay and workforce strategy' for the organisation was agreed by CDB in late 09/10. An action plan for the strategy's implementation was developed and approved by members and progress against the action plan has been reviewed by Performance and Best Value Committee. Good progress has been made against the action plan particularly in relation to single status.	<p>Although implementation of the original single status agreement has been abandoned, it is still expected that large sections of T&Cs will be removed by the new SS agreement.</p> <p>As part of Delivering Excellence, five key HR policies are currently being revised for adoption in early 09/10. A second phase of work on HR policies will take place in 09/10.</p> <p>As part of the above work a more structured approach to policy review, consultation and approval is being defined.</p>	The single status project was restarted with a new more robust approach which has been subject to regular auditing and regarded as a robust process. Over 80% of the evaluation process has been completed and a new draft framework agreement has been negotiated with the trade unions who are expected to put it to ballot in June. This includes proposals on revised allowances for unsocial hours and the removal of a number of outdated allowances which cover duties which are covered by the job evaluation process. 7 new policies have been written and are at different states of approval.
Assessment of level of assurance (Delete those not applicable)		Green / Amber		

Action Plan as at March, 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	Revised job evaluation scheme and new grading	New job evaluation and pay grade structure due to be	HR Director	July 2010	No	1 st July, 2010	H	Implementation of the original agreement was abandoned in 2008.	Reports to SS/JE Project Board, CDB and Cabinet and

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
	structure	implemented on 1 st July 2010						The timetable for the new agreement is implementation in July 2010.	associated minutes.
2	Clear direction for learning and development across the Council.	New workforce learning and development strategy.	Head of Organisational Development and Learning	March 2010	Yes		High	A comprehensive training offer is now available.	Learning and Development Strategy in place.
3	Modernise Recruitment policy and procedures.	New Recruitment policy and procedure approved by Cabinet and consulted on with unions. Commenced implementation.	HR Director	March 2010	Yes		H	Achieved	Policy and procedure
4	Modernise Disciplinary procedure	New policy developed, approved by SMB, Opps Board and Member Working Group. Currently receiving final feedback from TUs on changes	HR Director	March 2010		No	H	Close to completion. Due to go to Council in May.	Policy document / SMB minutes. Cabinet briefing minutes.
5	Develop new redundancy policy and new organisational review policy	New policies and procedures written and submitted to SMB and Cabinet Briefing. Currently in consultation phase.	HR Director	June 2010		No	H	In progress	Policy documents / SMB and Cabinet Briefing minutes
6	Improve HR data	Use resourcelink to provide regular management reports on performance	Head of Pay and Workforce Strategy	By April 2006	Yes (now a main streamed issue)		Medium / high (depending on data subject /	Resourcelink is now delivering demonstrable improvements in the quality and scope of HR data available.	Documents produced by ESC.

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
							issue)	<p>However, this has highlighted some areas of significant data gaps (e.g. lack of data re sickness causes / reasons provided by schools).</p> <p>A well established set of HR PIs are in place but will require review in 09/10 in response to the removal of BVPIs.</p> <p>A 3rd workforce data leaflet was produced in 08/09. This is likely to be superseded by a new workforce profile report that is currently being developed for introduction in 09/10.</p> <p>A set of 3 new reports on absence management have been introduced as part of a Cabinet approved strategy to reduce sickness absence. These are to be reviewed in 09/10 to identify any areas for improvement.</p>	

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
7	Employee and managerial self – service	Roll out of all functions	HR Director	April 2010	Yes		Medium	Further functionalities will come on stream from Resourcelink and will be considered for future use.	Project minutes and plans.
8	Equality standard	Continue drive to achieve equality standard level 4	Head of Equalities	No time scale to achieve level 4 was set	Yes	Yes	Medium	Confirmation of the Council achieving level 4 was received in April 08. Most elements of level 5 now achieved.	ESSG minutes
9	Improve disability management within the Council	Report to be submitted to the Corporate Equalities Strategy Group in June 2006	Service Director, Business Improvement	June 2006	Yes (now a main streamed annual activity)		Medium	<p>LCC is statutorily required to do an annual review. The outcome (a revised disability equality scheme) was presented to CESG March 2009 and will be circulated for consultation.</p> <p>Changes to recruitment and selection procedures have been made to make them more accessible to people with learning difficulties (identified as a key target group).</p> <p>LCC is also involved in several initiatives to promote LCC as a potential employer to</p>	CESE minutes issued documents.

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
								<p>people with learning difficulties, including a joint project with Leicester College. The project is currently under consideration for expansion to regional level.</p> <p>Design guidelines on building accessibility have also been developed and published</p>	
10	Review of HR strategy	Agree new HR strategy for the Council	Head of Pay and Workforce Strategy	By March 2007	Yes		H	A new pay and workforce strategy was approved by CDB in late 08/09. An action plan for its implementation was developed and approved by members	Report to CDB and associated minutes
11	Whistleblowing policy in place	Promoted through In contact	Head of HR	n/a	Yes		H	Policy introduced in November 2005	<p>In contact 15/05. Policy is posted on the intranet and internet.</p> <p>See also separate assurance statement re whistleblowing policy.</p>

Signature of Lead OfficerDate.....

PROCESS: WHISTLE BLOWING				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Director of HR	1. Policy commenced and implemented.	<p>The Council has a whistleblowing policy and the associated processes for proper handling of disclosures in place. Periodic awareness raising of the policy is undertaken.</p> <p>The existing policy subject to formal agreement to reflect concerns raised by External Audit.</p>	<p>An article was placed in FACE in early 09 to refresh awareness of the policy. It is intended that promotion of the policy will also take place in 09/10.</p> <p>Revision of the current Code of Conduct has been identified as a potential task for 09/10 on the draft HR work plan (TBC, depending on issue of national code of conduct – see also Whistleblowing assurance statement).</p>	The existing whistle blowing policy is currently being reviewed to produce a new disclosure policy for the Council.
Assessment of level of assurance (Delete those not applicable)		Green / Amber		

Action Plan as at March, 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	Periodic review of existing policy.	The existing whistle blowing policy is currently being reviewed to produce a new disclosure policy for the Council	Director of HR / Director of Legal Services	Aug 2010		Yes	High	Employees and managers will be made aware of the new policy as part of its implementation.	Draft revised disclosure policy.

Signature of Lead Officer Date.....

PROCESS: CODE OF CONDUCT (OFFICERS)				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Director of HR	<p>Failure to identify and implement opportunities to modernise – leading to inability to make the best use of resources, act with probity / integrity or be fair / inclusive.</p> <p>Substantial fraud leading to major loss of resources and crisis budget cuts.</p>	Current code works well.	A consultation paper on a new national code of conduct was issued in late 2008. Consultation closed on 24 th December 08.	<p>The Council's existing code of conduct for officers is being reviewed to reflect the draft national code of conduct for officers.</p> <p>The LGE website states that the Government is currently considering the responses received to its consultation. However, there is no firm indication regarding when the national code will be produced.</p>
Assessment of level of assurance (Delete those not applicable)		Green / Amber		

Action Plan as at March, 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	Periodic review of current officers' Code of Conduct	A revised officer code of conduct is being developed to reflect the draft national code.	Director of HR	August, 2010		Yes	M	See above.	LGE website.

Signature of Lead OfficerDate.....

PROCESS: EMAS				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Carol Brass / Anna Dodd (job share)	<p>Failure to maintain EMAS registration by not being able to close out major* non- conformities raised by the external EMAS verifier.</p> <p>*The EMAS verifiers, LRQA define their non conformities as major, and minor. Only major non conformities will prevent registration. Minor non conformities replace the former improvement note classification. They can be escalated to major non conformities if they remain open and the Council is unable to demonstrate that it is responding appropriately.</p>	<p>There have been no major non conformities raised by the EMAS verifiers between 2003, and Nov 2007 3 minor non conformities were closed at the November 2007 visit:</p> <ul style="list-style-type: none"> * compliance with volumetric discharge consents for Leisure centre trade effluent. * monitoring of environmental clauses in contracts. * setting of climate change objectives and targets within EMAS. <p>2 minor non conformities were raised by the verifiers during the November 2007 visit and 1 remains open from a previous visit (total 3). During the November 2008 visit, 2 of the previous minor non conformities were closed with 1 remaining open. A further 10 minor non conformities were raised, making the new total 11.</p> <p>November 2009 Verification The annual verification of the Council's EMAS system (including schools) was undertaken by LRQA, the Council's external verifiers, during November 2009. LRQA raised nine minor non-conformities and two minor non-conformities from previous visits were left open. Two of the new minor non-conformities are specific to schools. No major non-conformities were raised during the visit so EMAS re-registration proceeded immediately.</p> <p>See table below of non conformities and actions proposed (extracted from report to Strategic Management Board 16th March 2010</p>	EMAS continues to be audited as previously reported.	EMAS continues to be audited as previously reported.

Assessment of level of assurance (delete those not applicable)	Green/ Amber
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Action plan as at | March 2010

Corporate Non Conformity (extracts from LRQA report December 09)	Action Required By
<p>Minor non-conformity, New 0911CER01</p> <p>EMAS requires that when establishing and reviewing its objectives and targets, an organization shall take into account the legal requirements and other requirements to which the organization subscribes, and its significant environmental aspects. It shall also consider its technological options, its financial, operational and business requirements, and the views of interested parties.</p> <p>Top management lacks a vision of what Leicester and its council would be like in 2025/6 with CO2 emissions reduced by 50% from the 1990 levels. For example, what population could it support, what type of houses and shops would there be, would there be any industry, how many people would the council employ, what services could it provide, what buildings would it occupy, what services could it provide? What technology would be needed? And finally what would it cost and who would pay for it?</p> <p>Without this vision it not possible to determine a programme that will deliver the 50% reduction and the objective will remain delusional.</p>	<p>All Priority Boards will receive a presentation on Carbon Reduction by May. This will explore the vision of a low carbon city relevant to that Board.</p> <p>The vision will be explored through the Carbon Training programme being presented to Directors, Heads of Service and Team leaders in April- May 2010 (650 staff)</p> <p>A more detailed visioning exercise for each service will be undertaken as part of creating Carbon Action Plans for each of the 18 divisions. This will be completed by the end of August 2010.</p> <p>Action: Strategic Director responsible for Reducing Our Carbon Footprint, supported by other members of the Reducing Our Carbon Footprint Priority Board and the Environment Team.</p>
<p>Minor non-conformity, New 0911CER01</p> <p>Section Annex 3.2 of EMAS requires that the EMAS Statement should include a summary of the data available on the performance of the organisation against its environmental objectives and targets with respect to its significant environmental impacts.</p> <p>The information relating Section 15.1 of the Statement 'The Waste from Leicester' was validated. However, the statement lacks any reference to LCC's current and projected performance against the Landfill Allowance Trading Scheme (LATS) targets and the financial implications of not meeting future targets. Future statements need to include this information and other information of material interest regarding Leicester's waste.</p>	<p>Future statements will include this information and other information on Leicester's waste of interest to the public. Action: Head of Waste Management, supported by the Environment Team.</p>

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<p>Minor non-conformity, New 09110JC01</p> <p>Castle Park Depot - Gulley drain directly in front of tack coat store is connected to a surface water drain. Evidence of oily residue on the ground. Although drain via interceptor this design is not favourable and an alternative should be identified</p> <p>There is no drainage plan for the Monks Rest site</p>	<p>The possibility of relocating the tack coat store will be investigate and working practices revised so tack coat residue is collected. Action: Quantity Surveying & Finance Manager, City Highways</p> <p>A drainage plan will be prepared for Monks Rest Depot. Action: Parks Manager for Area 2</p>
<p>Minor non-conformity, New 09110JC02</p> <p>A number of issues noted with waste management duty of care requirements at various sites:-</p> <p>Castle Park Depot – Highways - It was stated that ad-hoc consignments of waste such aerosols by Haz Industrial Services had not been subject to duty of care checks.</p> <p>Castle Park Depot – Cleansing - Cylinders disposed of by Aquaforce (through Acumen contract) had duty of care paperwork supplied by Acumen prior to waste leaving the site; this was not the same for disposal of chemicals from the graffiti section – taken by Augean (again via the Acumen contract) – need to ensure that duty of care checks are completed prior to waste leaving the site.</p> <p>Leicester Leys - Paper and cardboard is taken by ENVIRON but no transfer notes are generated.</p> <p>Spence Street - Hazardous waste is removed by Haz Environmental – there have been no quarterly returns received by the site since May and whereas a copy of the carrier license for Haz was available locally, the waste management license was not and it was unclear who was responsible for registering the site as a hazardous waste producer (no formal record on site that NEG 731 was the site number). At present the site is using an adjacent transfer station for disposing of paper; however fluorescent tubes are also being taken here but no paperwork is generated – as fluorescent tubes are hazardous this practice must cease and a correct disposal route set up.</p> <p>Monks Rest - Waste generated by the activities of the grounds maintenance function</p>	<p>Duty of care checks will be made on all waste. Action: Quantity Surveying & Finance Manager, City Highways</p> <p>Evidence to close out this finding has already been provided.</p> <p>Waste transfer notes will be generated for all future consignments of paper and cardboard taken by Groundwork. Action: Manager, Leicester Leys Centre Manager</p> <p>Comprehensive paperwork associated with the removal of hazardous waste by Haz Environmental will be collected and held on site, and a waste management contract will be established for the disposal of fluorescent tubes. Action: Manager, Spence Street Centre supported by the Environment Team</p> <p>Conformation will be sought from the Environment Agency on whether a waste</p>

<p>such as pruning, general litter and dog waste is brought back to Monks Rest – there is no waste exemption license for this activity and LCC should confirm with the EA whether this is required. Duty of care checks for interceptor waste taken recently by Redstripe does not appear to have taken place and there are no transfer notes for scrap metal removed from the site by Burgess.</p> <p>There appears to be some confusion over where duty of care checks should be undertaken – locally or through the environment team. Could a central register of waste companies be set up?</p>	<p>exemption license is required for activities at the depot and waste transfer notes for scrap metal removed from the site by Burgess will be obtained. Action: Parks Manager for Area 2. Duty of care checks for the interceptor waste have already taken place.</p> <p>A central register of waste companies used by the Council will be investigated. Action: Environment Team and Waste Management.</p>
<p>Minor non-conformity, New 09110JC03</p> <p>Leicester Leys and Spence Street - Although there are records of servicing for air con units on both sites – there is no information on the types and quantities of refrigerant and the service sheets do not specifically state that leak checks have been completed – it was stated that this is the responsibility of the landlord (Property Services). In addition it was not clear how competency of contractors handling refrigerant is verified. Records should be held locally.</p> <p>Spence Street - Water Monitoring – there were two instances in October and November where the cold tap temperatures were above the 20°C limit – it was unclear by local personnel who would action this – via the landlord helpdesk or James Seaton. The risk assessment on file was dated April 06 and it was not clear whether it had been reviewed since (L8 requires a review at least every two years).</p>	<p>The completion of service sheets will be improved to ensure that leak checks are recorded. Verification of the competency of contractors handling refrigerant requires further investigation. Action: Property Services with Leicester Leys and Spence Street Centre Managers</p> <p>Staff at Spence Street Centre to seek training on water temperature monitoring from Property Services and ensure risk assessment is updated. Action: Property Services with Spence Street Centre Manager</p>
<p>Minor non-conformity, New 09110JC04</p> <p>The leisure centre manager at Spence Street is quite new to the role and no formal environmental training appears to have taken place especially in relation to the EMAS manual and requirements. LCC must ensure that personnel involved in key roles in EMAS are identified and suitable training completed.</p>	<p>Environment Team to deliver environmental training for management at Spence Street Centre. Action: Environment Team with Spence Street Centre Manager.</p>
<p>Minor non-conformity, New 09110JC05</p> <p>Whilst the information supplied in Table 6.1a could be verified (just) – two tables provided which led to some confusion on how the numbers were generated, some of the figures in table 6.1b could not be verified (unfavourable declining and suffered significant decline / damage). All the figures in the table should be reviewed to ensure that they are correct.</p>	<p>The figures in the table in the public statement that relate to the condition of Local Wildlife Sites will be reviewed to ensure that they are correct. Action: Conservation Officer and Environment Team</p>

<p>Minor non-conformity, Open 0811DRF04</p> <p>The site inspections mechanism currently only addresses limited environmental aspects. These could be identified and managed by a Local Aspects register. A clearer reporting system also needs to be developed so that any non conformity can be used to identify areas of weakness, trends and route causes.</p>	<p>A generic site inspection and reporting mechanism has been developed by the Environment Team and will be rolled out to sites along with site based environmental aspects registers (see below). Action: Environment Team</p>
<p>Minor non-conformity, Open 0811DRF13</p> <p>Whilst a corporate aspects register is maintained there was limited evidence that aspect registers exist at a local level. As the aspects register is used to establish, implement and maintain the Management system, a local register would manage the local aspects and any legal requirements.</p>	<p>A corporate environmental aspects register for the council is currently being developed by the Environment Team as the basis for developing site based aspects registers, starting with the sites with higher environmental risk (eg depots and leisure centres). Action: Environment Team.</p>
<p>Schools Non Conformity (extracts from LRQA report December 09)</p>	<p>Action Required By</p>
<p>Minor non-conformity, New 0911CER03</p> <p>The Environmental Protection Act Part 2 and associated regulations specify requirements regarding the 'duty of care' for waste. Waste storage and segregation at the Coleman Primary School does not entirely meet these requirements in that:</p> <ul style="list-style-type: none"> • A large pile of used IT equipment has accumulated and is awaiting disposal. This is being stored outside and not in a secure container. Adjacent to the IT equipment are a number of waste fluorescent tubes, also in the open and not in a secure container. There was also considerable litter in and around the waste compound. <p>Waste management documentation was reviewed. The Site Manager maintains a waste management file. This contains a selection of Waste Transfer Notes, Hazardous Waste Consignment Notes and Waste Carrier Licenses. However, the documentation does not cover all waste streams and all transfers. For example there were no details of file regarding PB Electronics (WEEE contractor) and Olivetti Building Contractors (who undertake building works at the school).</p>	<p>Training will be provided for the school on the waste management 'duty of care' and waste storage and segregation improved as necessary. Action: Head Teacher and Site Manager, Coleman Primary School, supported by Groundwork Leicester and Leicestershire</p>
<p>Minor non-conformity, New 0911CER04</p> <p>Section 85 of Water Resources Act 1991 makes it an offence to cause or knowingly</p>	<p>A guidance note will be produced for schools on producing a simple site drainage plan</p>

<p>permit the pollution of controlled waters. LCC could not demonstrate the fate of sink waste water from one of the building blocks as there are no drainage plans for the site. LCC has identified that professionally surveyed drainage plans are beyond the budgets of schools. However, the facilities manager at each school could undertake a simple survey which would identify the main features of the drains and their destination.</p>	<p>by the Environment Team. The guidance note will be implemented by the schools with support from Groundwork, starting in schools with oil tanks or water courses running close to the building. Action: Head Teachers and Site Managers at Leicester Schools, supported by Groundwork Leicester and Leicestershire and the Environment Team</p>
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Signature of Lead OfficerDate.....

PROCESS: PROCUREMENT STRATEGY				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Head of Corporate Procurement, Support and Income	Failure to protect the Council's financial and legal interests and failure to maximise purchasing power.	<p>A Contract Management and Procurement Improvement Plan is being implemented on target.</p> <p>Whilst matters have improved there are still areas where procurement policies are not wholly complied with.</p>	<p>New CPRs launched via a series of briefing sessions, 250 officers attended.</p> <p>Procurement Toolkit amended in light of the changes to CPRs.</p> <p>Accredited Training Programme has run for the last six months and continues.</p> <p>Approved Officer List is up to date and only trained APOs are highlighted.</p> <p>09/10 Procurement Plan approved by Cabinet on 30 March.</p> <p>System is in place to remind Contract Owners when contracts are due to expire (reminders sent out in three month intervals commencing at 12 months.</p> <p>System is in place to remind Contract Owners when suppliers insurances are due to expire.</p>	<p>CPRs are under review to accommodate the many changes resulting from the developing Strategic Commissioning agenda. The toolkit is also under review driven by the same agenda and the adoption of Category Management. The 2010/11 Procurement Plan is due for consideration by Cabinet on 29th March. Bulletins have been circulated to all APOs regarding the Remedies Directive. Training continues to be delivered by specialist contractors.</p>
Assessment of level of assurance (Delete those not applicable)		Amber		

Action Plan as at March, 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	Procurement Strategy	The revised procurement strategy is complete. A contract management and procurement	Geoff Organ	Continuous	Complete		H	The strategy was approved by Cabinet on 23/6/08	HoCP / minutes of Cabinet meeting.

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
		improvement plan is being implemented on target.							

Signature of Lead Officer**Geoff Organ**.....Date.....26th March, 2010.

PROCESS: CONTRACT PROCEDURE RULES				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Geoff Organ	None	All	Complete	Complete
Assessment of level of assurance (Delete those not applicable)		Green		

Action Plan as at March, 2010									
No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	Complete review of CPRs.	CPRs re-written and simplified. Approved by Council on 25 th November, 2008. Briefing sessions held in February 2009.	Head of Corporate Procurement	Feb 2009	Feb 2009	A further review ill be carried out once a decision on the introduction of Category Management has taken place.	M	.250 officers briefed. CPRs updated on insite	Cabinet report CPT (Amina Laher)

Signature of Lead Officer **Geoff Organ** Date...12th April 2010.....

PROCESS: ANTI-FRAUD AND CORRUPTION				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Chief Finance Officer	Failure to identify and tackle fraud and corruption leading to financial and/or reputational loss.	<p>The Anti-Fraud and Corruption Policy was reviewed and updated by the Audit Committee on 22nd June 2009.</p> <p>There is an increasing trend of referrals to the Corporate Counter-Fraud Team and improved performance by the HB Counter-Fraud Team in terms of its position relative to other Unitary Authorities. (There are currently no national performance measures for either element of Counter-Fraud work.</p> <p>The programme of fraud awareness training is progressing well and fraud awareness training is increasingly being targeted at key risk areas of Council business.</p> <p>The Council participates in the National Fraud Initiative and the most recent exercise identified minimal issues for further investigation.</p> <p>On the basis of the above significant assurance can be</p>	<p>A Corporate Anti-Fraud and Corruption Policy was approved by the Cabinet on 31st March 2008 and endorsed by the Audit Committee on 25th June 2008.</p> <p>As measured by the number of fraud referrals handled by the Corporate Fraud Team, the policy and training undertaken as part of its delivery, has increased the level of referrals, indicating a greater awareness by staff of fraud. To that extent significant assurance can be provided.</p>	<p>All departments are encouraged the need for CRB clearance for relevant posts, but there is no absolute requirement imposed other than for those posts where it is a statutory imperative. PCI standards require staff who will handle payment card data to be CRB checked.</p> <p>The review of HR as part of the Business Improvement Programme has lead to the establishment of a team located within the Shared Services Centre to co-ordinate obtaining of CRB clearance for all relevant staff.</p> <p>The corporate counter-fraud team have developed a core training programme for all certifying officers to be developed as part of City Learning's core training programme.</p>

		provided that the Policy is effective in managing the risk of fraud. Further developments planned include use of new systems to capture outcomes in a systematic way to provide benchmark information on the effectiveness of our investigation work.		
Assessment of level of assurance (Delete those not applicable)		Green		

Action plan as at March, 2010 (to show action taken, areas assured since March, 2005)

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	Training in fraud awareness	Training will be provided as requested by departments and as part of an ongoing programme of seminars.	Head of audit and Governance	Ongoing		Yes	H	The training programme has been developed and delivered to all certifying officers. The programme will address refresher training for existing staff on an ongoing basis.	
2	Positive vetting of new appointees and existing employees	Extension of CRB checks on new and existing staff as indicated by specific job requirements.	HR Director	Ongoing		Yes	H	A new team within the ESC has been established to manage and co-ordinate CRB checks for all staff.	
3	Use of Resources	Develop process to show that staff have clearly acknowledged and accepted their	Head of Audit and Governance	March, 2011		Yes	H	The increase in fraud referrals to the Corporate Counter Fraud Team coupled	See anti-fraud and corruption policy. Articles appeared in FACE in 2007 and

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
		responsibility to prevent and detect fraud and corruption.						with resource shortages has taken precedence over proactive fraud searching work during the year which has been consequently limited. However, the results of reactive work forms a key component of the Internal audit Risk scoring methodology used to develop the Internal Audit Operational Plan.	2008 and the local press produced positive items on the back of the Annual Fraud Report (June, 2009).

Signature of Lead OfficerDate.....

PROCESS: RISK MANAGEMENT STRATEGY				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Chief Finance Officer	Failure to develop and implement an effective strategy leading to business critical systems being unavailable to support Council services and clients not receiving essential services.	<p>A Corporate Risk Management strategy and action plan was approved by Cabinet on 30 November 2008 and endorsed by the Audit Committee on 3 February 2010. One of the actions is to replace the old Corporate Risk Register (agreed at Cabinet in January 2009) with Operational and Strategic Risk registers that better reflect the new structure of the Council. These are planned to be in place by the end of April 2010.</p> <p>Assurances that this strategy is being complied with is derived from the formal consideration of risks at departmental management team level, Operational Directors Board and Strategic Management Board. There is considerable evidence that risk management is becoming better embedded in the authority, based on the identification of issues for</p>	<p>Members of the Audit Committee have received training and training for Cabinet members is planned.</p> <p>The post of Corporate Risk Manager remains unfilled on a permanent basis and the interim manager remains in post as at 31/3/09.</p> <p>Attempts to recruit a permanent manager have proved fruitless, and a further attempt will be made. The Interim manager will reduce her input to the post over the next 7 months so that by November 2009, her contract will cease. By that time it is hoped that a permanent manager will have been appointed.</p>	<p>The post of Corporate Risk Manager has finally been filled and the Terms of Reference for the Audit Committee (to be Audit and Risk Committee) have been revised to reflect the change in reporting lines for Risk Management. It is hoped that these will drive a need for further Member training which will be delivered by Risk Management as part of its 2010/2011 Training Programme.</p> <p>The Corporate Business Continuity plan has been updated and re-issued. Part of the RMIS Training Plan will include desk top exercises for the BCM Team (covering Business Critical Activities) delivered in partnership with Zurich Municipal (the Council's external insurers) and Contingency Planning training for all other business managers.</p>

		which support is sought. This position should be enhanced following the launch in March 2010 of the RMIS training programme for 2010.		
Assessment of level of assurance (Delete those not applicable)		Amber / Green		

Action Plan as at March, 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	Risk management strategy – review 2010/11	To be reported to Audit Committee and Cabinet	Corporate Risk Manager	March 2011		Yes	H		
2	Risk management Strategy – review 2009/10		Corporate Risk Manager	Sept 2009	Yes				Minutes of Cabinet 30/11/08. Audit Committee 3/2/10.
3	Risk management Strategy – review 2008/9		Corporate Risk Manager	March 2008	Yes				Minutes of Cabinet 31/8/08. Audit Committee 19/6/08
4	Risk management strategy – review 2006/7		Corporate Risk Manager	March / April 2007	Yes				Minutes of Standards and audit Committee (28/3/07) and Cabinet (23/4/07)
5	Corporate Business Continuity Plan	Publish and maintain	Corporate Risk Manager	April 2010		Yes	H		Plan can be viewed in Risk

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
									Management Services.
6	Operational and Strategic Risk Registers	Establish, review and challenge operational and strategic risk registers and renew reporting to Operational and Strategic Boards on significant operational and strategic risks.	Strategic and Divisional Directors with support from Corporate Risk Manager	April 2010		Yes	H		See Cabinet minutes 30/11/09
7	Process for assuring risk assessments in support of new developments and projects	Risk Management and Insurance Services to assure risk assessments as necessary.	Corporate Risk Manager	Ongoing		Yes	M		

Signature of Lead OfficerDate.....

PROCESS: EFFECTIVE ADMINISTRATION OF FINANCIAL AFFAIRS				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Chief Finance Officer	<ol style="list-style-type: none"> 1. Incorrect monies paid out. 2. Sums due not received. 3. Inadequate keeping of financial records. 	<p>A framework exists through finance procedure rules which is fit for purpose. Audit testing suggests minor non-compliance is still tolerated in too many instances but that the position has improved as indicated from levels of assurance from arising from Internal Audit's work during 2009/10.</p> <p>FMSIS audits suggest continuing improvement in schools.</p>	<p>In most cases, systems are operating soundly, but some weaknesses needing attention are a common finding in this (and any) organisation. Processes exist (including the role of Scrutiny Committees and the Audit Committee) to ensure that recommendations to resolve weaknesses are followed up. Assurance statements from Heads of Finance and others mean that reasonable assurance can be given that systems covered are working effectively. The system is now well established and operating effectively. This is subject to regular review by Internal Audit. An analysis of levels of assurance derived from Internal Audit work during 2008-9 indicates an improving picture with greater numbers of reports attracting higher levels of assurance than was reported last year (57% as against 56% in 2007-8 now reflect Full or Significant assurance levels)</p> <p>Audit Commission Annual Audit Letter 2007/8 states "The standard of the Council's accounts remains good and we have issued an unqualified</p>	<p>In most cases, systems are operating soundly, but some weaknesses needing attention are a common finding in this (and any) organisation. Processes exist (including the role of Scrutiny Committees and the Audit Committee) to ensure that recommendations to resolve weaknesses are followed up</p> <p>Processes are changing with the introduction of RMS, and these will need to be assured once all implementation effort is complete</p>

			opinion on your 2007/08 financial statements and a conclusion that your VFM arrangements are adequate."	
Assessment of level of assurance (Delete those not applicable)		Green		

Action Plan as at March, 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	Assurance statements from Heads of Finance in relation to financial systems operated within relevant areas of departmental control.	The system of assurances is now embedded.	Heads of Finance all departments.		Yes				
2	Improve standard of internal audit	An external audit review of internal audit concluded that the service now meets the CIPFA standards			Yes				
3	Ensure RMS implementation maintains effective procedures.	Part of 10/11 internal audit programme.	Head of Audit	March 2011		Yes	M		

Signature of Lead OfficerDate.....

PROCESS: HEALTH AND SAFETY POLICY				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Director of HR	Non-compliance with health and safety requirements leading to personal injury and / or prosecution of the authority or individual officers.	<p>The Corporate H&S report and action plan ensures that senior managers are aware of current H&S performance, key H&S challenges, HSE interventions throughout the organisation and priority actions for the coming year.</p> <p>A head of profession for the H&S function is in place.</p>	<p>The IOSH accredited "safety for senior managers course" has now been delivered to the vast majority of senior managers (approx. 150) in the Council.</p> <p>The H&S Service continues to report on the outcome of H&S audits in the Corp annual report (and 6 month update reports).</p> <p>The content of all former Dept H&S manuals has been mapped. 'Duplicate' policies have largely been removed, with the remainder to be removed as the corresponding Corporate policy is reviewed or revised.</p>	<p>In response to changes to the Council's internal structure, the Deputy Chief Executive/Chief Operations Officer is now the organisation's corporate H&S champion.</p> <p>The annual H&S report and plan continues to be received by senior managers. The report covers H&S performance, details of HSE interventions, outcomes of audits of organisationally significant H&S issues, etc.</p> <p>The section of the Council's H&S policy which details roles and responsibilities is currently being reviewed to ensure it reflects the new organisational structure.</p>
Assessment of level of assurance (Delete those not applicable)		Green / Amber		

Action Plan as at March, 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	Property related H&S risks are properly managed (e.g. asbestos, water hygiene, etc.)	Joint work with LCC's property function on asbestos and water hygiene to: * develop new / revised systems. * monitor actions to implement new / revised systems	Head of Pay and Workforce Strategy	Ongoing work		Yes (now a 'main streamed' activity of the service)	H	<p>Several audits (internal and external) of asbestos and water hygiene management have now been carried out. In common with many Las, significant work remains to be done but demonstrable progress (particularly in relation to water hygiene risk assessments) is being made. The H&S function continues to work with LCC's Property function.</p> <p>Comprehensive action plans for both asbestos and water hygiene management are in place and being monitored.</p> <p>Senior managers (including Heads of Property) receive regular update reports on progress.</p>	<p>Audit reports produced by LCC insurers Zurich Municipal and the Council's H&S service.</p> <p>Asbestos and Water Task and Finish Group minutes.</p> <p>Reports to Operations Board, Heads of Property and associated meeting minutes.</p>

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
2	Corporate H&S policy and guidance is up to date, clear and understandable	An incremental revision of all existing corporate guidance is now underway. This work includes a review of the section detailing H&S roles and responsibilities to ensure it reflects the new organisational structure.	Head of Pay & Workforce Strategy	Ongoing work		Yes	Medium/ High (depending on policy issue)	Production of new and revision of existing guidance is an ongoing core task. Work to deliver a single H&S manual is progressing including making use of existing 'departmental' policies to form corporate policies (see 'adequacy of process' comments earlier).	Minutes of HSMT and Authority Wide H&S Consultative Committee.
3	Key corporate H&S risks are adequately monitored.	A model for corporate level H&S audits is in place. A protocol for identifying key audit areas has been developed. Findings of all corporate level H&S audits is included in the corporate H&S report to senior managers	Head of Pay & workforce Strategy	Ongoing work	Yes Yes Yes (audit activity is now main streamed into the service's work)		High	Audits of corporate H&S risks commenced in 06/07. The significant findings of these audits are reported to senior management via corporate H&S report and action plan received by Operations Board. One outcome of the review has been to allow a more co-ordinated audit and inspection programme	Copies of audit reports. Corp. H&S reports and associated minutes (e.g. Operations Board).

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
								and sharing of information across the H&S service.	
4	The organisational and individual implications of ill health (work – related and other causes) are properly understood and managed.	'Musculoskeletal rehabilitation' has been rolled-out to all non-schools parts of LCC (an opt-in route for schools is available).	Head of Pay and Workforce Strategy	May 2006	Yes		High	Periodic reviews have identified that the expected benefits are being demonstrated but that there remain areas of high MSD absence but low take up. Specific activities to improve take-up are being undertaken.	Minutes of Operations Board, and associated review reports. Contract with the provider.
		As part of the Cabinet approved 'Improving Attendance Strategy' a well-being strategy for the Council is being developed.	Head of Pay and Workforce Strategy	May 2010			High	A working group, led by the Director of Public Health & Health Improvement, has developed a draft strategy which is progressing towards formal adoption by the Council.	Report to Operations Board, SMB, etc. and associated minutes.
		Instances of work related are identified via reports from resourcelink, compared with H&S incident returns and followed up with the appropriate line	Head of Pay and Workforce Strategy	March 2007	Yes (now a 'main streamed' activity)		Medium	Data on work related ill health is now included in the Corporate H&S report (see earlier).	Reports from Resourcelink. Minutes of HSMT. Reports to Operations Board and associated

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
		manager as relevant.							minutes.
		A systematic approach for the identification and delivery of employee health surveillance is being put place.	Head of Pay and Workforce Strategy	March 2007	Yes (now a 'main streamed' activity)		High	<p>An audit of health surveillance was completed in 07/08. Significant areas for improvement were identified and actions agreed with relevant officers. Work to put in place a comprehensive health surveillance programme continues with the Council's OH provider.</p> <p>The number of employees receiving health surveillance is increasing, though work remains to be done to ensure all employee groups requiring surveillance have been identified.</p>	<p>Audit report.</p> <p>Minutes of HSMT.</p> <p>Minutes of OHUG.</p>
		A revision of the Council's existing stress management policy was undertaken in 2006/7.	Head of Pay and Workforce Strategy	March 2007	Yes		High	A new stress management policy was introduced in 2007. A further review of the policy was completed in	<p>Policy document.</p> <p>Minutes of HSMT and AWH&SCC</p>

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
								late 09. Changes included reducing OH referral timescales in cases of stress-related absence and improved guidance for managers on managing stress-related absence.	

Signature of Lead OfficerDate.....

PROCESS: SAFEGUARDING CHILDREN				
Lead Officer	Potential key risks as at 3/2010	Areas assured as at 3/2010	Adequacy of process as at 3/2009	Adequacy of process as at 3/2010
Interim Divisional Director Social Care and Safeguarding	Recruitment and management of City Council staff, including schools, those who work in areas beyond CYPS and those contracted / supply teaching / agency, does not fully comply with statutory guidance	Green	Procedures are operating: there is ongoing work on monitoring and auditing and further work to do on implementing ISA	Safer Employment Group well embedded now, and working through key areas to support consistent practice being prompted across the City Council. Workplan which covers key developmental areas – safer working practices and ISA.
	Disciplinary processes relating to staff are not sufficiently robust where these relate to safeguarding issues.	Green	Work now starting to strengthen safeguarding disciplinary processes within the HR review	See above. Allegations management is firmly embedded with safeguarding unit support risk assessment processes where there are contra-indicators and providing increasingly an advice service for the Council as a whole.
	Service delivery within child protection fails to respond appropriately to the needs for protection of Leicester children within their families	Green	APA service in 2008 rated safeguarding as good.	Unannounced inspection was positive with no priority areas identified. Comprehensive social care and safeguarding action plan is in place to underpin continuous improvement.
	Staff in all areas in contact with children do not receive child protection awareness training	green	Problems identified across agencies in applying the LSCB training strategy; review undertaken by consultant and recommendations made to LSCB regarding a new approach. Strategy being revised.	Revised strategy in place. Most local agencies able to undertake / or plans in place to ensure training at level 2 for relevant staff. Corporate induction raises safeguarding profile from outset. Despite disaggregation of LSCB, joint training programmes maintained to ensure safe transition. Clear work plan in place through CWFD strategy to

				develop safeguarding learning, training and development.
	Responsibilities across all departments for safeguarding and promoting the welfare of children are not addressed at each level of accountability.	Green / amber	Following Baby P case and revisions to the roles of the DCS and lead member, the document has been amended and is due to be taken to Cabinet on 20.4.09/	Roles and responsibilities document was agreed, and was supplemented by a similar document regarding adult safeguarding. However, it is unclear how well this is integrated across the Council. Increasing attention is being given to the need to promote safeguarding of all vulnerable people, with early work including appointment of same independent chair for emerging safeguarding children and safeguarding adults board; joint work within safer Leicester partnership and within LSCB / ISH arrangements.
	Serious case review cause adverse publicity and impact on CAA as well as on moral, recruitment and retention.	Green / amber	New process agreed by LSCB for managing SCRs including improved processes for producing SCRs, implementing action plans and handling media.	All SCRs which have reported during 2009 received an adequate rating from OFSTED. Processes will need further tweaking to reflect revised National Guidance and with the advent of new LSCB arrangements for Leicester, there will be new staff supporting the processes – arrangements are in hand to ensure smooth transition on this.
	Capacity to respond to Laming recommendations – is now translated into just published revised Working Together Guidance.	Amber	Comprehensive early preparation work, a summary of which is to be taken to Cabinet on 20.4.09. Awaiting government response due in late April 09.	SC and S division undertook a self assessment when government response was received at end of April 2009 and issues identified were included in the SC & S action plan for the division with much

				<p>work undertaken subsequently.</p> <p>However, there has been a significant increase in social care activity (e.g. 47% rise in referrals) which increases the demand on the service.</p> <p>Revised working together guidelines will require further work with LSCB and division.</p>
	<p>Disaggregation of joint LSCB reduces capacity to respond to statutory requirements because of restraints from reduced economies of sale.</p>	Amber	<p>Not listed in last year as decision on disaggregation was taken since April 2009.</p>	<p>Planning for transition has been thorough and new arrangements agreed.</p> <p>Many aspects of subgroup processes where the work takes place are as yet untried. A number of aspects still to be disaggregated – not least the office support functions, but Leicester LSCB manager appointed, safe transition plan are sound and good collaborative arrangements should emerge to support future work. Ultimately a Leicester focused LSCB should better support and challenge the Leicester Children's Trust and should enable closer working with a Leicester Safeguarding Adults Board.</p>
<p>Assessment of level of assurance (Delete those not applicable)</p>		<p>Green/ amber</p>		

Action Plan as at March, 2010

No	Requirement	Management response	Responsible officer	Target date	Implementation			Comments	Evidence Documentary / location ref.
					Complete	Planned	Priority (H, M or L)		
1	Ensure implementation and integration of Council wide safeguarding roles and responsibilities document.	Revisit in Operations Board	A. Smith	By Oct 10					

Signature of Lead OfficerDate.....

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FORWARD TIMETABLE OF CONSULTATION AND MEETINGS:

**Children's Scrutiny Committee
Cabinet
2010**

**31st August 2010
6th September**

**Leicester City Council's Pledge to Looked After Children and Leaving
Care and the Children In Care Council**

Report of the Strategic Director, Children

1. Purpose of Report

- 1.1 Care Matters introduced a mandate for all Local Authorities to make a Pledge, or Promise, to their Looked After Children and Young People, to set out what they undertake to provide for them. Care Matters also introduced the idea of a Council for Children and Young People "in care", which would allow them direct access to the Strategic Director, Children and the Lead Member, in order to enable their involvement in policy and service design at all levels of the organisation.
- 1.2 This report sets out the work completed by Leicester City Council in respect of the Pledge and Care Council and makes recommendations for the Local Authority, ensuring the pledge is fully integrated through the council.

2. Recommendations

- 2.1 It is recommended that Cabinet receive and endorse the content of this report
- 2.2 That the 'Pledge' is adopted by the City Council and monitored and reviewed accordingly.
- 2.3 The Children in Care Council continue to be supported and inform the Local Authority about the progress of implementing the Pledge.

3. Summary

- 3.1 There is an expectation for all local authorities to work with children and young people to develop a 'pledge' for the children in their care. This is their commitment to support the most vulnerable children and establishes Looked After Children as being integral to communities and neighbourhoods.
- 3.2 Care Matters identifies underpinning principles that Local Authorities must adhere to in complying with the basic statutory duties relating to Looked After Children. It places a responsibility on Local Authorities to ensure children in care have been consulted and involved in developing the pledge, the regular review of the 'pledge' and it is reflected in the Children and Young People's Plan.
- 3.3 The pledge is a statement about the support and services children in care can expect to receive in relation to: -
- what they can expect from Leicester City Council as a child in care
 - encouraging best practice
 - promoting better outcomes
 - reinforcing our corporate parent responsibilities.

4. REPORT

4.1 Background

- 4.1.1 The Care Matters programme requires every local authority to work with its key partners to produce a "pledge" for the children and young people in care. In addition to this there is a requirement for children to have the 'right to have their voice heard and influence the work of the local authority, through participation in a 'Children in Care Council'. (Care Matters: Transforming the Lives of Children and Young People in Care page 11)

4.2 Children In Care Council

- 4.2.1 In order to meet these requirements, work has been undertaken and a Children in Care Council was established enabling regular, good quality dialogue and involvement in planning and delivering services. To strengthen the quality of this work a new post of a care-experienced worker was developed to facilitate and advocate for Looked After Children and work with the Children in Care Council.
- 4.2.2 The Children in Care Council is here for children and young people that are currently in care or have left care, To date the Children In Care Council has a diverse membership of 15 children and young people. The council meets regularly and undertakes a range of work. The Children in Care Council role is to listen to children and young people in care and to work on their behalf to help improve services for them.
- 4.2.3 The types of activities undertaken thus far have included an exploration into the life experiences of all those young people involved in the care council. There has been a particular focus on important issues that the young people have faced when 'coming into care' 'being in care' & 'leaving care'. Issues that were

important were discussed and then collated by Tim Clare LAC – project worker and then through collaborative working were incorporated into the 'pledge'. The aim of the CICC will then be to assess and evaluate the services looked after children receive working alongside the council's pledge to view whether or not the pledge is being adhered to.

- 4.2.4 In terms of the composition of the CICC please note that it was open to all LAC and that young people were not "cherry picked".

4.3 Pledge

- 4.3.1 Leicester City Council's Pledge has been developed in consultation with a range of young people, the Corporate Parenting Forum and Operational Groups. A draft pledge was circulated to elected members, partners, carers and officers of the council for consultation. Amendments were made following a series of consultations over a 6-month period. The final Pledge consists of 55 statements of intent relating to all aspects of children's care and relates to the Every Child Matters Outcomes For Children. The Pledge states how the City Council will ensure Looked After Children:-

- Stay Healthy
- Stay Safe
- Enjoy and Achieve
- Achieve Financial Well-being
- Are Involved in Positive Activities
- Are provided with good services that are fair and meets their needs

- 4.3.2 In June 2010 Children and Young People, Elected Members, Senior officers, the Strategic Director for Children and facilitators attended a joint event where all participants made a commitment and endorsed the pledge by signing an enlarged copy of the pledge. The plan is to have the pledge framed and placed in a prominent position within the Town Hall for all to see.

4.4 Future Plan

- 4.4.1 The Care Matter Board will monitor the pledge following endorsement by Cabinet and the Children's Trust and it is intended that progress will be reported to the Corporate Parenting Forum on a regular basis.
- 4.4.2 Work will be progressed by the Care Matters Board in consultation with the Children In Care Council to ensure positive actions are agreed for the ongoing delivery of the pledge. A marketing and communication process will be agreed to ensure Looked After Children have ready access, understand and continue to contribute to the pledge.
- 4.4.3 It is intended that the Pledge will be issued to all Looked After Children, elected Members and officers of the Local Authority and Partners with professional responsibility to or working with Looked After Children, emphasizing the

expectation that in carrying out their duties they deliver all aspects of the Pledge throughout their work.

4.4.4 A Corporate Parenting and Safeguarding Training Program for Elected Members has now been established and there is a specific session on the Children in Care Council and the Pledge.

4.4.5 Both the Pledge and the Children in Care Councils views about the progress of the Pledge will be subject to Ofsted's Inspection Process for Looked After Children. Additionally, all Children in Care Council members are invited to meet with Dr Roger Morgan, Children's Rights Director, on behalf of the Government, to ascertain children's views on how Local Authorities are doing in meeting their 'promises' to children through the Pledge.

5. FINANCIAL, LEGAL AND OTHER IMPLICATIONS

5.1 Financial Implications

5.1.1 This report presents a progress update on the work completed across the Council to develop the Children In Care council and the Children's Pledge. As such there are no direct financial implications arising and no additional funding has been requested, although it should be noted that the funding for the dedicated worker is from the Care Matters Beacon Award and is time-limited (Colin Sharp, Head of Finance , Investing in our Children, Ext 29 7750).

5.2 Legal Implications

5.2.1 There are no direct legal implications (Kamal Adatia, Head of Legal Services, Ext 29 7044).

5.3 Climate Change Implications

5.3.1 N/A

5.4 Other Implications

OTHER IMPLICATIONS	YES/ NO	Paragraph/References Within Supporting information
Equal Opportunities	Yes	Entire report
Policy	Yes	Entire report
Sustainable and Environmental	N/A	
Crime and Disorder	N/A	
Human Rights Act	Yes	Entire report
Elderly/People on Low Income	N/A	

Corporate Parenting	Yes	Entire report
Health Inequalities Impact	N/A	

6. Report Author

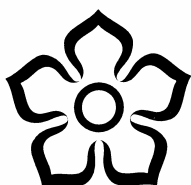
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Key Decision	No
Reason	N/A
Appeared in Forward Plan	N/A
Executive or Council Decision	Executive (Cabinet)

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Leicester
City Council

WARDS AFFECTED
All Wards

FORWARD TIMETABLE OF CONSULTATION AND MEETINGS:

C&YP Scrutiny
Cabinet
Council

31st August 2010
6th September 2010
16th September 2010

RUSHEY MEAD SCHOOL - SPORTS AND SCIENCE COLLEGE FINAL BUSINESS CASE DIRECTION OF TRAVEL

1. PURPOSE OF REPORT

1.1 The purpose of this report:

To secure approval of the direction of travel towards Final Business Case (FBC) for the Council's Building Schools for the Future Rushey Mead School project and to obtain the necessary authority to progress the project.

- 1.1.2 Cabinet received a report on 15th February 2010, presenting the Council's Outline Business Case. The OBC was approved as the 'Direction of Travel' for the BSF programme and described in some detail the BSF programme of educational transformation and plans to significantly improve outcomes for children, young people and their families and communities. It was noted in the last report that the analysis of the long-term affordability of the programme had been completed and the Cabinet approved an affordability position. Detailed financial and design plans for the Rushey Mead School project are now being developed for the Financial Close of the project.

2. SUMMARY

- 2.1 BSF is the most substantial programme of investment in Leicester's Schools for 100 years. The total programme will rebuild or remodel every secondary school (excluding the Madani High School, which was completed as a full new build in 2007 under 'Targeted Capital' funding granted from the then DCSF) with a total investment in excess of £324m. Four schools have already been successfully completed. There will also be substantial investment in Special schools and Pupil Referral Units. Rushey Mead School is the next school to be constructed under the programme.
- 2.2 The FBC will set out the detail of how the Rushey Mead School will be rebuilt, and is part of the formal process of securing government funding from Partnership for Schools (PfS). Plans and artist's impressions of the new school are included at Appendix A with a description of the project given at section 4.2.

- 2.3 Additionally the approval of the FBC by the Council and PfS is the trigger for the implementation stage of the process to reach Financial Close and to begin the construction phase by awarding the contract to the Local Education Partnership (LEP). The LEP is the private sector partner procured as a prerequisite to BSF delivery. The contracts signed by LCC and Leicester Miller Education Company (LMEC – the company name of the LEP) gives exclusivity to the LEP for all BSF projects providing the Council is assured of the quality and affordability of each of the school projects. LCC is a 10% shareholder in LMEC and the Strategic Director, Development Culture and Regeneration sits on the LMEC Board of Directors.
- 2.4 A project of this nature conveys with it risk, which it is necessary for the Council to accept for the project to succeed. A risk log for the programme and Rushey Mead School project was included in the OBC approved by Cabinet in February 2010. This risk log is updated on a monthly basis.
- 2.5 Final amendments to the OBC were submitted to Partnerships for Schools on the 12th July 2010. This document set out relevant details for all remaining projects planned as part of the City's BSF programme including all remaining secondary schools, special schools and behaviour support settings. The approvals process by PfS will normally take approximately six weeks. Approval of OBC will be the trigger to begin moving all other projects towards their FBC.

3. RECOMMENDATIONS

- 3.1 The Children and Young People Scrutiny Committee is recommended to consider this report and make any comments it wishes for consideration by Cabinet.
- 3.2 Cabinet is recommended to:
- 3.2.1 Approve the direction of travel for the Final Business Case as presented in this paper.
- 3.2.2 Endorse the Director's Action in approval of the staged process towards Final Business Case.
- 3.2.3 Note that the Rushey Mead contract will be a 'Design and Build' contract, not a PFI contract
- 3.2.4 Approve the further design development of the Rushey Mead project on the basis that the cost capital build does not exceed £19,607,335. The FBC is to provide a separate cost analysis reconciled against the OBC for both the design and build plus the ICT elements of the project. The most recent analysis indicates the proposal is affordable and within the funding envelope.
- 3.2.5 Pursuant to 3.2.3, note the expenditure required to progress the project to completion as identified in section 5 below.
- 3.2.6 Approve the use of prudential borrowing against future receipts from land sales to support the project as shown in Section 5.1.2.

- 3.2.7 Approve in principle the expected commercial proposal offer from the LEP to pay the capital amount required for the Combined Heat and Power plant and to receive energy saving gains to repay that capital cost and thereby avoid any financial contributions from the City Council.
- 3.2.8 Authorise the Divisional Director, Learning Environment to negotiate on behalf of the Council project specific amendments to the standard form of contracts (without prejudice to final business case approval).
- 3.2.9 Following Cabinet approval of FBC, authorise the Head of Legal Services to sign necessary contracts to enable construction to start on the basis of delivering the scheme described in the FBC. These will be the Design and Build contract, FM contract and ICT contract as well as the commercial contract for the CHP unit.
- 3.2.10 Authorise the Chief Finance Officer to provide PfS with assurance that the Council understand this report is concerned with the Final Business Case (FBC). When submitting the FBC, the Chief Finance Officer is required to certify that the Council understands the content of the Final Business Case, and that it is affordable, value for money and deliverable.
- 3.2.11 Note the intention to provide flexible access for communities to facilities in the school and the use of 'zoning' of the school buildings to provide a more cost effective and environmentally sustainable solution to community use of these public buildings.
- 3.2.12 Authorise the Strategic Director Children, in consultation with the Cabinet Lead, to take such decisions as she thinks fit to implement the scheme within the scope of the FBC.
- 3.2.13 Note the requirement for Full Council approval of the FBC prior to sign off by PfS. Rushey Mead School FBC Direction of Travel report has been added to the full Council agenda of 16th September 2010.
- 3.3 Council is recommended to;
- 3.3.1 Add £19.607m to the Capital Programme for the Rushey Mead School project (noting that Cabinet approval of the FBC will be required before the scheme proceeds)
- 3.3.2 Approve the responsibilities and accountabilities delegated to Cabinet as set out in Section 3.2 above.

4. THE FINAL BUSINESS CASE

- 4.1 The Council and its partners' ambitions for children are to raise standards of attainment, improve their well-being and close the equality gaps in health and education. Although outcomes for children in Leicester continue to improve steadily, the Building Schools for the Future Programme offers a once in a lifetime opportunity to transform secondary education and bring about a step change. It also offers an opportunity to capitalise on this large investment of public funds to further the localities and neighbourhood agenda of the City Council.

To support these ambitions, the aims of the BSF programme are to:

- a) Position schools as vital hubs for neighbourhood working and community activities. Schools will be promoted as resources for the whole community with facilities that are accessible to all citizens and at all times of the week and year.
- b) Provide an inclusive learning environment within which every child can reach their full potential with personalised learning designed to meet their own individual needs;
- c) Provide all teachers with a 21st Century working environment; and
- d) Offer a comprehensive range of services within easy reach of every family.

4.2. **Rushey Mead School BSF project description**

- 4.2.2 Rushey Mead school is a high achieving college and is one of two City secondary schools awarded the Ofsted Outstanding category. It is a popular school and is heavily oversubscribed: with a published admission number of 1397 (PAN 1350) and with an increasing demand for places. The School has combined Science and Sport Specialism and is a newly designated High Performance Specialist Schools (HPSS) Leadership Partner School. Rushey Mead School serves a diverse multicultural community with 94.4% of students from minority ethnic groups, and 5.6% of students classified white. The local community has mixed levels of deprivation with 71.4% of students living in city wards such as Belgrave and Latimer which are classified as the within the 10% most deprived in the country.
- 4.2.3. The school has an excellent track record of achievement, however it delivers the majority of the curriculum from a poorly planned range of buildings, with poor adjacencies, and many in a very poor condition. The current site restricts the school in developing a more flexible and personalised curriculum, whilst the existing sporting and dining facilities undermine the school's efforts to promote healthy living. The school's interior needs to be enhanced, the number of buildings rationalised, the adjacencies improved and accessibility provided to all areas within the school so an inclusive curriculum can be delivered.
- 4.2.4 Rushey Mead School is situated in an urban location, close to one of the city's principal arterial routes. A small stream bisects the playing fields and divides the site. The stream presents both a constraint and an opportunity. By developing the sports facilities to the south of the stream along with the main school to the north, the existing geography of the site is reinforced. New opportunities for using the stream as a teaching and learning tool are created and the natural barrier created by the stream can be used to divide the public-facing and school-facing areas. This will assist the management of the out of hours use of the site.
- 4.2.5 The external envelope and cladding of the school has been subject to extensive scrutiny by the planning authorities. Through collaboration with school users and neighbours, and development of a close working relationship with the planners, proposals have been developed and the school has obtained planning permission.

This process has included extensive work on the highways impact with the inclusion of a new roundabout and vehicular access to the school.

4.2.6 Scope of the Project

Procurement route:	Design & Build
Size:	1500 pupils (11-16)
Capital development option:	32% new build 39% remodel 29% leave alone
Minimum redeveloped floor area:	12,128 m ²
Target cost (inflated to Q1 2010):	£17,094,028

4.2.7 Following the issue of the New Project Proposal (NPP) letter in November 2010 the Council issued further instructions amending the terms of the letter and increasing the capital available, these are summarised below:

- Sustainability – a £1m grant secured by the Authority to support sustainability.
- Co-Location of an Integrated Services Hub (ISH) – co-location funding to locate central services at more accessible locations throughout the City.
- Kitchen and dining enhancement – funding to improve the dining experience and quality of food offered.
- Funding contribution from school to support new build option
- Additional funding from Authority prudential borrowing based on energy savings from sustainable energy applications, to support new build option. (This proposal has subsequently been revised with the LEP now to provide a commercial proposal).

4.2.8 The very significant additional funding referred to above has amended the target cost as follows:

PfS Construction	13,534,930	(Confirmed in Stage 0 letter from PfS)
PfS – ICT	2,198,000	(Confirmed in Stage 0 letter from PfS)
Council Receipts:	1,874,396	(From proposed land sales and Prudential Borrowing in interim) Land for sale has been identified at a number of sites including Cherryleas Special School, Nether Hall Special School and City of Leicester (part of site). This land will be sold when market conditions allow a favourable price to be achieved. In the meantime prudential borrowing has been identified as an interim measure to enable the BSF programme to proceed. The use of Prudential borrowing was approved by Cabinet as part of the OBC report in February 2010.
School:	297,852	(Deposited with LCC)

Co-location fund	150,000	(To be reviewed following reduction in funding announced in July 2010)
Kitchen and dining:	551,957	(DfE grant confirmed)
Sustainability:	1,000,000	(DfE grant not yet confirmed)
Total	<u>19,607,335</u>	

4.2.9 School Vision: Summary

Rushey Mead School aspires to be a community of learners, without boundaries, where every person matters and is valued for their uniqueness. The school will seek “next practice”, being vibrant and dynamic, and encouraging innovation underpinned by emotional intelligence and ethical values. The school seeks to engage with local, national, and global communities, building on the continued significant worldwide links and charitable foundation overseas, through reciprocal partnerships providing mutual learning experiences, expertise and extended services.

- 4.2.10 The school will be at the leading edge of educational change and technological progress, using innovative ICT to support a culture of inclusion for all learners.
- 4.2.11 The school will continue to be an ambitious college, characterised by high academic expectations. Building on the “outstanding” category awarded by Ofsted, Rushey Mead School is now aiming to be a world-class school, pursuing excellence in all facets of work. ICT will transform learning as learners make good use of increasing access to information in daily life, which will supersede the traditional college emphasis on knowledge acquisition and testing.
- 4.2.12 The school’s specialisms in Science and Sports will focus staff and students on healthy living and be of central importance along with the additional High Performing Specialism in Leadership Partnership which will underpin learning.
- 4.3 The BSF Programme has been through a programme assurance check by the ODI team and has been found to be in good health.
- 4.4 The Council received Stage 0 Approval from Partnership for Schools on the 14th April 2010 for the Rushey Mead project. The Stage 1 submission by the LEP was accepted by LCC and indicated that the project could be delivered within the affordability target. BSF Funding was approved by PfS on the basis of 32% new build, 39% remodel and 29% leave alone. On the basis of this, a Directors Action to approve the Stage 1 submission (under the Strategic Partnering Agreement) triggered the LEP work on the more detailed, ‘Stage 2’, which on approval will proceed to FBC. PfS have issued (conditional) stage 0 approval and the Council’s full OBC is now submitted. The LCC BSF programme is unaffected by the recent Government announcement.

- 4.5 Indications from the LEP are that stage 2 submission is progressing and will be submitted by mid September. There has been a period of intensive work undertaken by the LEP, Council and School and a series of design workshops have taken place with school and Council Officers to progress the plans for the new school. The design proposal contains an innovative stand alone sports facility that can easily be segregated at evenings and weekends for community use, and also a new community 'hub' block that will be the featured 'signature' of the school and again will be a focus for community use.
- 4.6 The Council's OBC case is under active consideration by PfS and Treasury. Officers have made the case that a great deal of work has been put in to Rushey Mead school and that designs and costings are at an advanced stage.
- 4.7 The next stage will be the FBC (Final Business Case) which will be populated from the stage 2 submission and, depending on whether it is 'approved' or 'rejected' contract documentation will be subject to fine tuning and signing. The Strategic Partnering Agreement requires the Council to act reasonably in approving or rejecting a Stage 2 submission, if it unreasonably rejects then it becomes liable to pay the LEP'S abortive costs.
- 4.8 So as to enable a prompt decision, work has already started on the FBC as there are elements of this that can be completed at this stage eg confirmation of land ownership, school 'change' approvals etc, whilst there are other elements that require further detailed work that will be available shortly before the FBC submission date e.g. final detailed costings. When submitting the FBC, the Chief Finance Officer is required to certify that the Council understands the content of the Final Business Case, and that it is affordable, value for money and deliverable.

5 FINANCIAL, LEGAL AND OTHER IMPLICATIONS

5.1 Financial Implications

5.1.1 This report is concerned with financial implications throughout. These implications are significant and the key aspects to note are set out in the OBC which was approved by Cabinet on 15th February 2010. The following paragraphs relate to the Rushey Mead scheme specifically.

5.1.2 The project funding for Rushey Mead Funding is set out below:

PfS – Construction	13,534,930
PfS – ICT	2,198,000
Council Receipts:	1,874,396 (from proposed land sales –Prudential borrowing in interim)
School:	297,852
Co-location fund	150,000 (to be reviewed following reduction in grant funding)
Kitchen and Dining:	551,957 (DfE grant)
Sustainability:	1,000,000 (DfE grant)
Total	<u>19,607,335</u>

- 5.1.3 Capital costs will be kept within the funding available subject to any contingencies. Any such contingencies would be funded by Prudential Borrowing. Contingencies for the whole programme were set as being up to £12m for the purpose of estimating the resulting revenue repayment costs. The proposal regarding the combined Heat and Power Plant is set out in 4.6 (a) above.
- 5.1.4 It is proposed to fund the Council capital receipts from future sales of surplus land at other school sites as part of the BSF Programme (as noted in the SfC report). These capital receipts have not yet been realised and the Council is required to underwrite them in the short term, it is proposed to do this through Prudential Borrowing. If the receipts are ultimately not realised, the Programme contingency would be called upon. This itself would be funded from Prudential Borrowing and the repayment costs would be an annual charge to the BSF account.
- 5.1.5 Revenue - The revenue affordability over the 25 year life of the BSF contracts has been estimated, assuming that the school receives full Facilities Management and Lifecycle maintenance and evening availability aligned with community needs.
- 5.1.6 The ongoing annual revenue costs and funding have been estimated based on the planned design of the school and the current number of pupils (1,391). This shows that the annual costs would be £1.02m and the scheduled funding from the school would be £922,000. This would leave an annual shortfall of £101,737 between the school's contribution and the cost. This would transfer to the City-wide affordability gap to be funded 30% by schools and 70% by the Council.
- 5.1.7 School Affordability: A particular risk is the ability of secondary schools to afford their contributions into the future. Schools will make the 'scheduled' contributions already agreed which broadly match current spending on premises and costs to be covered by BSF contracts and will be required to contribute to 30% of the remaining City-wide revenue affordability gap. In addition, schools will need to provide fully for the ICT managed service and periodic refresh of ICT equipment which falls outside of the revenue affordability gap calculation. The Council will work with schools to set an appropriate budget, but noting that the responsibility rests with each school to ensure that its BSF contribution can be afforded.
- 5.1.8 The impact of the ICT contribution will vary from school to school depending on current spending from both revenue and from Devolved Formula Capital. The key point to note is that schools will be required to commit to setting aside money for a periodic refresh of the IT equipment in the school and the central data centre. The current ICT affordability model for the whole programme is being negotiated with the LEP and Northgate. (The ICT provider and part of the LEP supply chain).
- 5.1.9 The provision for the Clientside function was discussed in the TLE Clientside paper approved by Cabinet on 30th November 2009, which set out a five year cost and funding plan.
- 5.1.10 The implications insofar as they are currently understood of any future transfer to Academy status were set out in a separate report to the Performance and Value for

Money Select Committee on 28th July 2010 and to the TLE Portfolio Board. This report outlined the implications of any changes to school governance in respect of land transference and current investment through Building Schools for the Future. The report detailed current arrangements, risks and issues related to transference to Trust or Academy status. It was noted that the details underpinning new legislation recently passed by Government (Academies Act 2010) may alter the current arrangements significantly including risk profiles for the Council's land assets. It is not yet clear what the changes might mean since there has been little detail released to date. Once the picture had become clearer the potential impact can be better assessed and in the meantime the Committee asked officers to investigate what protection of assets (if necessary) might be legally available to the Council. Officers have begun this work and expect to report back to the Committee in early autumn.

Colin Sharpe, Head of Finance, Investing in Children. Ext. 29 7750

5.2 **Legal Implications**

- 5.2.1 The Council has entered into a Strategic Partnering Agreement with Leicester Miller Education Company for an initial period expiring 19 December 2015 and any proposed changes to what is currently the "strategic business case" need to be taken to the Strategic Partnering Board set up under that agreement.
- 5.2.3 The contracting process for contracts for the Rushey Mead School - Sports and Science College project will follow the "new projects approval process" in the partnering services contract that the Council has entered into with LMEC (The Strategic Partnering Agreement). However it should be noted that the "stage 0" PFS approval contains conditions, and that approval to the Council's whole wave OBC is awaited.
- 5.2.4 The agreed form of Design and Build Contract (as used for Fullhurst and Beaumont Leys schools) will be used for the Rushey Mead project. The ICT Managed Service for Rushey Mead Sports and Science will be effected contractually by "stapling" this onto the current phase 1 contract. This contract is for an initial period of 5 years from January 2008, but is extendable for a further period of 5 years. The whole wave proposal will contain a mechanism for all schools to have at least 4+ years managed ICT service, which will therefore mean that the contract will be re- procured through the Strategic Partnering Agreement by 2015. The proposal therefore effectively means that agreement will be needed with LMEC as to the extension of the ICT Managed Service Contract.
- 5.2.5 Contract prices for the Rushey Mead project are subject to benchmarking against (a) the Phase 1 schools, (b) the PFS data base and (c) local information.
- 5.2.6 The Council has power to enter into the various contracts under the Education Act 1996, School Standards and Framework Act 1998, the Local Government (Contracts) Act 1997 and Section 111 of the Local Government Act 1972 and under Section 2 of the Local Government Act 2000.
- 5.2.7 The Council has powers to finance capital investment within its affordable limit for borrowing under Section 2(1) of the Local Government Act 2003, having regard to the Prudential Code for Capital Finance in Local Authorities.

- 5.2.8 No interest in land is to be disposed of or transferred to the contractor or to a third party. The contractor's proposals do not require the acquisition of interests in land owned by third parties.
- 5.2.9 Staff affected by the FM Services and the ICT managed service will be subject to the Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE) and work has been undertaken to identify those who would transfer under TUPE. The contracts will contain provisions reflecting the obligations of the parties under the TUPE regulations, and also the statutory code on non TUPE transfers, two tier workforce and pensions issues, where this is relevant.
- 5.2.10 Governing Body agreements will be needed in respect of the proposed contractual arrangements for Rushey Mead Sports and Science College. Rushey Mead School - Sports and Science College is a local authority maintained school with a governing body.
- 5.2.11 School change procedures will be needed if there are to be certain alterations to a school, for example enlargement, moving school sites. Further consent may be necessary in respect of loss of playing fields, although there is a "general consent" that may be relevant, depending on the proposals.
- 5.2.12 The Council has a minority share interest in LMEC and has appointed a director.
- 5.2.13 As these proposals are for a change to existing Council policy an Equalities Impact Assessment should be undertaken and taken into consideration.
- 5.2.14 Conditions of third party funding should be carefully examined and legal advice sought so that funding conditions align with the BSF contracts. It is common for funders either to restrict disposals of the funded facility and/or seek clawback at market values.
- 5.2.15 Legal work on this project will be primarily sourced in house, subject to the recruitment of a senior solicitor. This post is temporarily being covered by a locum as numerous attempts to recruit have been unsuccessful. External legal assistance is currently being procured, on the basis of a call off arrangement for specific project work and would be applied to this project if necessary. The cost of legal work will be accounted for as part of the clientside costs and estimates were provided as part of the build up of those costs

Joanna Bunting, Head of Commercial and Property Law, Tel; (0116) 2526450

5.3 **Climate Change Implications**

As part of the BSF Programme the Rushey Mead School project will be required to meet high standards of sustainability and energy usage as well as a requirement to meet BREEAM standards. Providing more energy efficient school buildings should help to reduce the Council's carbon emissions however, this is reliant on energy efficiency measures being implemented as planned and staff and pupils being given the necessary understanding of the energy saving features of the new buildings to be able to use these to the greatest benefit.

Helen Lansdown, Senior Environmental Consultant - Sustainable Procurement

6. RISK ASSESSMENT MATRIX

6.1 The BSF Project has a detailed risk log. The risk matrix below only covers issues arising directly from this report.

	Risk: generic	Likeli- hood	Severity	Control Actions
1	PfS Approvals: Delay to approval of OBC or FBC causes programme to pause	L M	L M	Ongoing discussions and meetings with PfS.
2	Capital reconciliation costs underestimated or unforeseen. Funding inadequate / Capital receipts not achieved	L M	M H	Budget for contingency and value engineer as necessary. Ensure LEP only designs schools within funding envelope.
3	Ongoing project development costs: Expenditure on project development may not be recovered if project does not proceed	L	H	All expenditure assessed before commitment made. No unnecessary work commissioned at risk.
4	Government Policy: Cessation of BSF due to Government funding restrictions part way through the project. Changes in the status of schools leads to schools reviewing their commitments whilst the Council continues to hold the BSF contracts	L M	H M	The approval of an OBC by PfS on behalf of the government, confirms funding. The only variation arises from the inflation indexation which is set later when Stage 0 submissions are made for non-sample projects. A future agreement may however review the total programme in the light of funding constraints. Discussions would be held with the new Governing Bodies, Trusts, etc, Government direction would be sought if appropriate and the cost-sharing arrangements across all schools would be reviewed. P and VF Committee have requested a more detailed report on this.
5	Pupil forecasting: Failure to generate the expected numbers of pupils leading to a shortfall in funding	L	H	Pupil forecasts are based on 2018/19. All pupils attending secondary school at that time are already born. However, pupils may choose to attend school elsewhere.
	Risk: Project Specific	Likeli- hood	Severity	Control Actions
1	Capital overspend	L	H	Rigorous cost control and good project management will ensure that the likelihood of capital overspend is minimised.

2	Schools Contribution not affordable	L	H	In support of school proposed contributions we have letters of commitment from schools signed by both the Chair of Governors and the Headteacher
3	Rushey Mead becomes an Academy	M	H	Effective dialogue to be maintained with the school so as to ensure that they fully appreciate the consequences should they look to a change of status.
4	School becomes less popular	L	L	This is a very popular and successful school that is currently oversubscribed.

- 6.2 The programme is managed through a robust risk management process, with the programme risks register produced through a workshop facilitated by the Corporate Risk Manager, with all attendees from the programme core team, LEP and all the work stream leads. The programme risk register is updated on a quarterly basis.

Through the Corporate Risk Manager and the Divisional Director the major risks on the BSF programme are reported to the Strategic Priority Board and the Operations Board. As necessary the major risks on BSF are included on the Council's corporate risk register.

- 6.3 In mitigation of the above, in terms of capital receipts, the Council would not feel the full effect of any underachievement of capital receipts because of BSF funding rules which require part of the receipts to be paid to PfS. For example, if land sales only achieved 50% of expected values, the Council would still receive £2.1m, only £1m less than accounted for. In terms of possible overspend, it should be noted that Phase 1 was delivered within 3.4% of the estimated cost and affordability models have been built with a £12m contingency. In terms of pupil numbers, it should be noted that projected numbers are based upon children already born and the Council always has the option to omit or reduce the size of the proposed City Centre school if it becomes apparent that expected pupil numbers will not materialise. In summary, these risks will be mitigated by on-going programme management, for example reviewing the scope of future schools and buildings in the light of cost pressures and changes in pupil number forecasts.

7. REPORT AUTHOR

Helen Ryan
Divisional Director (LE)
Tel: 29 8791

Further Information

Weblink to PfS Website [Partnerships for Schools](#)

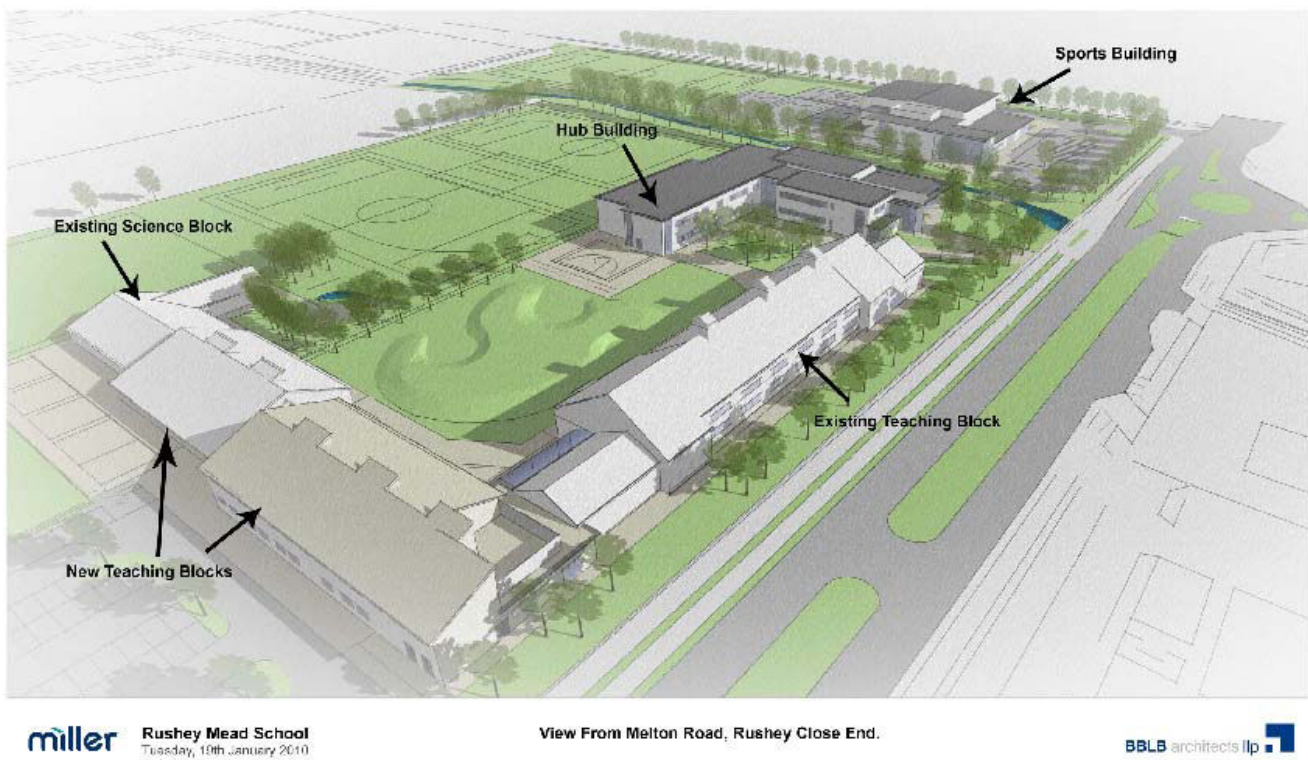
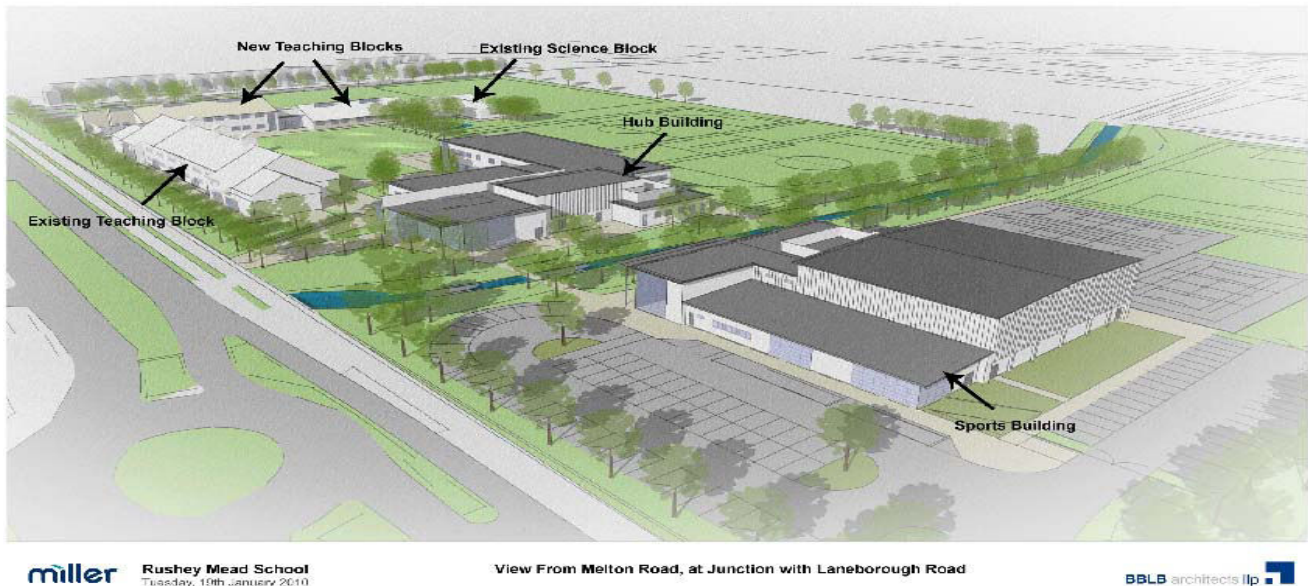
Background Papers

FBC Guidance document

OBC Report submitted to Cabinet [Leicester City Council - Agenda for Cabinet on Feb 15 2010 1:00PM](#)

Key Decision	Yes
Reason	Is significant in terms of its effect on communities living or working in an area comprising more than one ward
Appeared in Forward Plan	Yes
Executive or Council Decision	Executive (Cabinet)

APPENDIX A





Miller Rushey Mead School
Tuesday, 19th January 2010

Main Entrance to Hub Building

BBLB architects llp



Miller Rushey Mead School
Tuesday, 19th January 2010

Main Entrance to Sports Building

BBLB architects llp

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REPORT OF THE MONITORING OFFICER

**7.1 REVIEW OF THE CONSTITUTION
(Decision reserved to Council)**

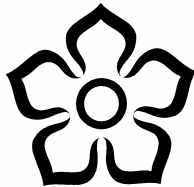
The Monitoring Officer submits a report that enables Council to consider and approve proposed changes to the Constitution.

A copy of the report is attached.

Council is recommended to consider and approve the proposed changes to the Constitution.

**PERRY HOLMES
DIRECTOR OF CORPORATE
GOVERNANCE**

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Leicester
City Council

WARDS AFFECTED
All Wards

COUNCIL

16TH SEPTEMBER 2010

REVIEW OF THE CONSTITUTION

REPORT OF THE DIRECTOR OF CORPORATE GOVERNANCE

1. PURPOSE OF REPORT

To enable Council to consider and approve proposed changes to the Constitution.

2. RECOMMENDATIONS (OR OPTIONS)

Council is recommended to:

1. Consider and approve the proposed changes to the Constitution; and
2. Approve the implementation of changes i, iii and iv as soon as possible with the implementation of change ii at the start of the 2010/11 Municipal Year.

3. REPORT

Changes to the Constitution must be approved by full Council (Article 15.02). It is good practice to keep the Constitution under regular review so as to meet current organisational needs.

The following changes are recommended with further details given in the appendix to the report:

i.

It is proposed that Council Procedure Rule 8 - agenda for ordinary meetings - be amended and a new Procedure Rule inserted to allow verbal Position Statements to be given by the Leader and Members of Cabinet and determine the processes under which they would be accepted. This will enable all Members of the Council to receive up to date information at Council meetings.

ii.

It is proposed that Council Procedure Rule 14 (a) (iii) be amended to define the deadline for questions to Council by Members of the Council as 10am two working

days before the meeting rather than the current 10am on the day before the meeting as at present. This will allow time for more detailed responses to questions particularly those that are complex and cross cutting. It is recommended that this change be implemented at the start of the 2010/11 Municipal Year.

iii.

Currently items of urgent business can be accepted at Council meetings through Council Procedure Rule 40 which sits under the Council Committees section. However it is proposed that this rule be moved to become Procedure Rule 33 to clarify that it applies to both Council Meetings and Council Committees.

iv.

It is proposed that Finance Procedure Rule (Revenue Budgets) 4.4.4 be amended to include reference to the need to retain appropriate documents.

4. FINANCIAL, LEGAL AND OTHER IMPLICATIONS

4.1. Financial Implications

The Council's Constitution includes Financial Procedure Rules. The proposed changes do not impact on these rules and there are therefore no financial implications in this report.

Steve Charlesworth, Head of Finance (Financial Control)

4.2 Legal Implications

The Council has a duty to maintain the Constitution.

Peter Nicholls, Head of Legal Services

4.3 Climate Change

This report does not contain any significant climate change implications and therefore should not have a detrimental effect on the Council's climate change targets.

Helen Lansdown, Senior Environmental Consultant - Sustainable Procurement

5. OTHER IMPLICATIONS

OTHER IMPLICATIONS	YES/NO	Paragraph References Within the Report
Equal Opportunities	N	
Policy	N	
Sustainable and Environmental	N	

Crime and Disorder	N	
Human Rights Act	N	
Elderly/People on Low Income	N	
Corporate Parenting	N	
Health Inequalities Impact	N	

6. BACKGROUND PAPERS – LOCAL GOVERNMENT ACT 1972

None

7. CONSULTATIONS

Peter Nicholls – Head of Legal Services

8. REPORT AUTHOR

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APPENDIX

PROPOSED CHANGES TO THE CONSTITUTION

PAGE NO.	SECTION	ISSUE	ACTION
100/101	Part 4a Council Procedure Rules	Creation of provision for Position Statements	Council Procedure Rule 8 insertion of (ii) Position Statements and consequent renumbering of items and amendment of (b) to read Items (i), (ii), (iii), (iv) and Xii) above must not be displaced.
102	Rule 8 Agenda for Ordinary Meetings Insertion of new Rule 10		<p>Insertion of new Rule 10 and consequent renumbering of subsequent Rules</p> <p>Rule 10</p> <p>Position Statements</p> <p><i>(1) One or more verbal Position Statements may be presented to the Council by the Leader and any member of the Executive at the discretion of the Leader.</i></p> <p><i>(2) The discussion of Position Statements shall not exceed ten minutes but the Lord Mayor, at his or her discretion, may permit an extension of such length as he or she considers appropriate.</i></p>

PAGE NO.	SECTION	ISSUE	ACTION
104	Part 4a Council Procedure Rules. Rule 14 (a) Questions from Councillors (iii)	Amend the deadline for the receipt of questions from Councillors.	Council Procedure Rule 14 (a) (iii) to read: <i>Notice of question (s), in writing, must be received by the Monitoring Officer not later than 10 o'clock in the morning two working days before the meeting.</i> It is proposed that this change be introduced from the start of the 2010/11 Municipal Year.
116 / 120	Part 4a Council Procedure Rules Insertion of new Rule 33	Clarification of the position regarding acceptance of Urgent business at meetings of the Council	Deletion of Council Procedure Rule 40 Insertion of new Procedure Rule 33 with identical text to the deleted Rule and consequent renumbering of subsequent Rules. <i>Rule 33</i> <i>Urgent Business</i> <i>The Lord Mayor / Chair can decide to accept an urgent item on to the agenda where, in his / her opinion, the item should be considered as a matter of urgency because of special circumstances which shall be specified in the minutes.</i>
199	Part 4f Finance Procedure Rules Amendment to rule 4.4.4	Amendment to include reference to the need to retain appropriate documents.	Amend Finance Procedure Rule 4.4.4 to read (additional text underlined for illustration purposes): <i>Where budgeted expenditure is to be met by grant income, Divisional Directors are responsible for complying with the conditions of grant aid. <u>This includes making arrangements for the appropriate retention of documents, including clear working papers, for audit purposes.</u></i>