



Leicester  
City Council

WARDS AFFECTED  
All Wards

CABINET  
AUDIT COMMITTEE  
STANDARDS COMMITTEE

22<sup>ND</sup> JUNE, 2009.  
30<sup>th</sup> JUNE, 2009.  
15<sup>TH</sup> JULY, 2009

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**CORPORATE GOVERNANCE: ANNUAL REPORT FOR 2008/9**

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**REPORT OF THE DIRECTOR OF RESOURCES**

**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 2008/9;
- \* Report the position regarding Local Government Ombudsman complaints.
- \* This annual review will inform the Council's Annual Governance Statement which will be reported to the Board on the 12<sup>th</sup> May, Audit Committee in May, Cabinet in June., Standards Committee in July and will form part of the Council's statutory Statement of Accounts.

**2. SUMMARY**

- 2.1 The 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 (available on the intranet only for Committees and Cabinet)**.
- 2.2 The Framework provides that the Authority must carry out a 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 **Corporate Directors' Board, 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 Corporate Governance Code, adopted in May, 2002 was updated in 2008 to comply with CIPFA/SOLACE's 2007 guidance "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 2008/9**

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. Internal Audit has recommended that each lead officer sign a hard copy of the Assurance Statement given.

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
- \* Red/amber
- \* 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 Partnership, Performance and Policy has carried out an initial 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 Audit Commission’s Corporate Assessment**

The Audit Commission’s Corporate Assessment, published in June, 2008 identified areas for improvement:

- \* The Council should strengthen the transparency and accountability of decision making.
- \* The role of the Standards Committee, Monitoring Officer and Leader in setting and maintaining the highest standards of ethical governance should be clarified and a more proactive approach taken to training and developing councillors and staff in modern corporate governance.
- \* The Council should consider whether some training such as one the Council’s Code of Conduct should be mandatory.
- \* Some practices such as Cabinet members also being members of regulatory committees should be discontinued immediately. Such measures will help to reinforce the Council’s standing in the community and demonstrate effective and confident community leadership.

The Council’s Standards Committee has been proactive. It received a report entitled “Standards Activities” in September, 2008 which considered the Audit Commission’s recommendations and this was the basis of an improvement

programme. A work programme was approved by Standards Committee in November, 2008 and is subject to regular review whenever it meets.

The Council has also responded positively to the Audit Commission's Public Interest Report, published in December, 2007 relating to procurement. An improvement plan has been implemented. The Audit Commission's recommendations following a progress audit will also be reported to the Audit Committee and Cabinet.

#### 4.6 Overall position

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 respect of a number of key policies / procedures assurances provided by a lead officer have been supported by assurances received from Service Departments.

The assessment of level of assurance shows that the overall corporate position is positive because all assessments are green/amber or green except for one. See the summary in **Appendix 1**. This includes a comparison with the previous two years.

Progress has been made in a number of areas; for example, Communication Strategy. However, there has been a deterioration in some areas, notably Information Governance. Steps continue to be taken to address this and a full corporate review of service provision is underway.

Whilst the overall position is positive, particular attention should be given to action plans for areas in need of improvement.

#### 4.7 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 2007/8 review is currently subject to audit and any recommendations will be reported to Committees and Cabinet.

#### 4.8 Complaints to the Ombudsman

A summary of Local Government Ombudsman complaints received from 1<sup>st</sup> April 2008 to 31<sup>st</sup> March 2009 is shown attached as **Appendix 4** including a comparison with the previous two years 2006/7 and 2007/8.

There have been no findings of maladministration in 2008/9 against the Council.

**Appendix 5** is a comparison table Family Authorities for the years 2006/7, 2007/8 and 2008/9.

Nine 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.

A total of £4,817.10 compensation has been paid to complainants.

**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**

Trevor Croote for the External Auditor, Corporate Directors’ Board, Charles Poole, Lee Harrison, Mark Noble, Laurie Goldberg, Johanne Robbins, Ed Smith, Liz Reid Jones, Carol Brass, Geoff Organ, Mark Bentley, James Royston, Stewart Leverett, Miranda Cannon.

**5. REPORT AUTHOR**

Peter Nicholls, Director of Legal Services, x6302

## APPENDIX 1

Page no. in App. 2	KEY POLICIES AND PROCEDURES	CURRENT LEAD OFFICER	ASSESSMENT OF LEVEL OF ASSURANCE 06/07	ASSESSMENT OF LEVEL OF ASSURANCE 07/08	ASSESSMENT OF LEVEL OF ASSURANCE 08/09	SUMMARY POSITION
1	Consultation strategy	Lee Harrison Head of Partnership Performance and Policy on behalf of the Chief Executive.	Green / amber	Green / Amber	Amber	We identified that the toolkit needs to be reviewed to ensure that it is up to date.
2	Performance management framework	Adam Archer, Special Projects Manager on behalf of the Chief Executive	Green / amber	Amber	Green	Assurance can be given in all areas subject to implementation of an action plan which addresses internal audit recommendations.
3	Project management	Miranda Cannon, Director of Change and Programme Management.	Green / amber	Amber	Green / amber	Since the previous review in 07/8 the development of project and programme management across the Council is now a specific programme in our organisational development portfolio. This work commenced in January, 2009 and is targeted for completion in September, 2009 at which point it will become our business as usual way of working. It is not yet a green rating until this is achieved.
10	Members' Code of Conduct and Political Conventions and	Charles Poole, Service Director – Democratic Services	Green / amber	Green / Amber	Green/Amber	Assurance can be given in all areas, subject to



Page no. in App. 2	KEY POLICIES AND PROCEDURES	CURRENT LEAD OFFICER	ASSESS- MENT OF LEVEL OF ASSURANCE 06/07	ASSESS- MENT OF LEVEL OF ASSURANC E 07/08	ASSESS- MENT OF LEVEL OF ASSURANCE 08/09	SUMMARY POSITION
	Members support framework					continuation of regular awareness training
13	The Council Constitution	Peter Nicholls, Director of Legal Services	Green / amber	Green / Amber	Green/Amber	Assurance can be given in all areas subject to an improvement plan.
15	Information Governance	Ed Smith, Head of Information Governance, on behalf of Peter Nicholls, Director of Legal Services	Green / amber	Amber	Amber / red	Assurance can be given in all areas covered by the central function but not at member level. Audits are planned and an improvement plan being implemented. The Board has authorised a review to strengthen corporate arrangements.
22	Communication strategy	Mark Bentley, Head of Communications, on behalf of the Chief Executive	Red / amber	Red / Amber	Amber	New strategy to be produced over coming months, based on One Leicester work.
23	Partnership policies	Lee Harrison, Head of Partnership, Performance and Policy on behalf of the Chief Executive	Green / amber	Green /Amber	Green	The Council has adopted a governance framework for major partnerships.
24	Effective Human Resource Policies	Fiona Skene, HR Director	Green / amber	Green / Amber	Green / Amber	HR strategy and annual HR work programme are in place with agreed review arrangements.
29	Whistle blowing	Fiona Skene, HR Director	Green / amber	Green / Amber	Green/Amber	New policy subject to formal agreement to reflect

Page no. in App. 2	KEY POLICIES AND PROCEDURES	CURRENT LEAD OFFICER	ASSESS- MENT OF LEVEL OF ASSURANCE 06/07	ASSESS- MENT OF LEVEL OF ASSURANC E 07/08	ASSESS- MENT OF LEVEL OF ASSURANCE 08/09	SUMMARY POSITION
						concerns raised by external audit.
30	Code of Conduct (officers)	Fiona Skene, HR Director	Green / amber	Green / Amber	Green / Amber	Current code works well.
31	EMAS	Carol Brass, Team Leader, Environment Team, on behalf of Jeff Miller, Director of Regeneration, Highways and Transportation.	Green / amber	Green / Amber	Green / Amber	There have been no major non conformities raised by the EMAS verifiers.
46	Procurement strategy	Geoff Organ, Head of Corporate Procurement, Support and Income Services, on behalf of the Chief Finance Officer	Green – R3 / Green / amber – R1,2,5. Red / amber – R4 (but will change to green by the end of the year)	Green / amber	Green	The revised procurement strategy is complete. A Contract Management and Procurement Improvement plan is being implemented on target. Progress is monitored by the VFM Select Committee.
48	Contract Procedure Rules	Geoff Organ, Head of Corporate Procurement, Support and Income Services on behalf of Chief Finance Officer	Green / amber – R1 / amber	Green / amber	Green	Compliance can be assured in respect of contracts handled by Legal Services but not in respect of contracts handled and managed within departments. A Corporate Improvement Plan is being implemented on target. The new CPRs were approved by Council on 25 <sup>th</sup> November,

Page no. in App. 2	KEY POLICIES AND PROCEDURES	CURRENT LEAD OFFICER	ASSESS- MENT OF LEVEL OF ASSURANCE 06/07	ASSESS- MENT OF LEVEL OF ASSURANC E 07/08	ASSESS- MENT OF LEVEL OF ASSURANCE 08/09	SUMMARY POSITION
						2008 and 6 briefing sessions were held in February, 2009 with over 250 officers attending.
49	Anti-fraud and corruption	Mark Noble, Chief Finance Officer	Green / amber	Green / Amber	Green / amber	Limited assurance can be derived from the work carried out as to the effectiveness of the anti-fraud and corruption strategy. More work needs to be done to address the raising of fraud awareness by members of staff.
53	Risk management strategy	Mark Noble, Chief Finance Officer	Green / amber	Green	Green / amber	Assurance can be derived from the work outlined as to the effectiveness of the risk management strategy, although we need to remain vigilant that it is effective. Changes to the management structure of the Council will further embed Risk Management.
55	Effective administration of financial affairs (Finance Procedure Rules and associated guidance)	Mark Noble, Chief Finance Officer	Green	Green	Green	Reasonable assurance on the effectiveness of the system of financial controls can

Page no. in App. 2	KEY POLICIES AND PROCEDURES	CURRENT LEAD OFFICER	ASSESS-MENT OF LEVEL OF ASSURANCE 06/07	ASSESS-MENT OF LEVEL OF ASSURANCE 07/08	ASSESS-MENT OF LEVEL OF ASSURANCE 08/09	SUMMARY POSITION
						be derived from the internal audit work delivered during 2007/8 as reflected in the review of the System of Internal Control.
58	Health and safety policy	Fiona Skene, HR Director	Green / amber	Green / Amber	Green / Amber	The corporate H&S report and action plan ensures that senior managers are aware of current H&S performance, key H&S challenges, HSE intervention throughout the organisation and priority actions for the coming year.
64	Safeguarding Children	Rachel Dickinson, Strategic Director Children's Services	1. Green / amber. 2. Green / amber 3. Green 4. Green 5. Green / amber. 6. Green amber	Green	Green / Amber	The change in assessed risk level to green/amber from green reflects impact of any serious cases review post baby Peter and risks if Laming requirements of Council are not met, and not any reduction in safeguarding actions. Appropriate actions are being taken to address this.

**Available on Insite only.**

**GOOD GOVERNANCE IN LOCAL GOVERNMENT – LEICESTER CITY COUNCIL**

<b>SUPPORTING PRINCIPLES</b>	<b>LOCAL AUTHORITY REQUIREMENTS</b>
<b>1. Focusing on the purposes of the Authority and on outcomes for the community and creating and implementing a vision for the local area.</b>	
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.

<b>WHERE ARE WE NOW?</b>	<b>ACTION PLANNED</b>	<b>RESPONSIBILITY</b>	<b>TIMESCALE</b>
<p>1.1 Clear vision and priorities established and communicated via One Leicester plan. Revised Corporate Plan agreed by Strategic Management Board in March 09 which reflects the One Leicester vision. An organisational development and efficiency plan and new service improvement and efficiency plans are being drafted which support the delivery of the corporate plan. A strategic portfolio of projects and programmes which support delivery of the corporate plan and One Leicester is also in place. The corporate and service planning framework has been reviewed by SMB to ensure it is aligned to the new organisational structures.</p>	<p>Agreement of Cabinet and full Council to the new corporate and service plans. Implementation of these plans.</p>	<p>Strategic management Board.</p>	<p>June 2009</p>

<p>1.2 CPA service scores reflect that all services are operating at minimum standards (2), with two consistently operating above minimum standards. Performance Management project is reviewing and development our arrangements for managing quality of service. New Operational Board will focus on managing service performance and risk on a quarterly basis which will feed into quarterly reporting to the Priority Boards and Strategic Management Board.</p> <p>1.3 The Use of Resources judgment indicates that the council regularly operates above minimum standards (3) with an adequate Value for Money rating. Revised service planning process includes a strong focus on value for money and efficiency.</p>	<p>Implementation of changes arising from Performance Management Project.</p> <p>Implementation of new management arrangements.</p>	<p>Chief Executive and Chief Operational Officer.</p>	<p>Sept 2009</p>
<p><b>2. members and officers working together to achieve a common purpose with clearly defined functions and roles</b></p>			
<p>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.</p>	<p>(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.</p> <p>(b) Set out a clear statement of the respective roles and responsibilities of other Authority members, members generally and senior officers.</p>		



<p>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.</p>	<p>(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.</p> <p>(b) Make a Chief Executive or equivalent responsible and accountable to the Authority for all aspects of operational management.</p> <p>(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.</p> <p>(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.</p> <p>(e) Make a senior officer (usually the Monitoring Officer) responsible to the Authority for ensuring that agreed procedures are followed and that all applicable statues are regulations are complied with.</p>
<p>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>	<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: - ensure that there is clarity about the legal status of the partnership.</p>

		- 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.	
<b>WHERE ARE WE NOW?</b>	<b>ACTION PLANNED</b>	<b>RESPONSIBILITY</b>	<b>TIMESCALE</b>
2.1 A revised organisational structure has been adopted to ensure delivery of 'One Leicester'. This is now being fully implemented and relevant policies and procedures being updated.	Embedding of the new structure	Chief Executive (CX)	Sept 09
2.2 These roles are identified in the revised structure and relevant changes are being made to the constitution and scheme of delegation.	As above	As above	June, 09
2.3 Protocols exist within the existing structure and guidelines for partnership working have been adopted and reviewed. The Cabinet Lead for Frontline Services has responsibility for performance monitoring. A review of partnership and performance management is part of the organisational development and improvement programme.	1. Implement review of strategic partnership arrangements.  2. Implement review of performance management.	CX	July 2009
<b>3. Promoting values for the Authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour.</b>			
3.1 Ensuring Authority members and officers exercise leadership by behaving in ways that exemplify high	(a) Ensure that the Authority's leadership sets a tone for the organisation by creating a climate of openness, support and respect.		

standards of conduct and effective governance.	<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>

<b>WHERE ARE WE NOW?</b>	<b>ACTION PLANNING</b>	<b>RESPONSIBILITY</b>	<b>TIMESCALE</b>
<p>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. Joint Directors meetings with key partners take place monthly as a key part of corporate management arrangements. Developing a programme of regular engagement of all elected members and middle / senior management.</p> <p>3.2 The Standards Committee has been reconstituted. Values are defined as part of One Leicester and are shared by our partners and therefore reflect how we work as an organisation and how we work in partnership. These inform the way we work and are reflected in our corporate plan and inform the changes we plan to make to our organisation as reflected in our organisational development and improvement plan.</p>	<p>Deliver a programme of elected member, management and partner development in the context of organisational development and improvement.</p> <p>Further development and strengthening of the Standards Committee</p>	<p>DC/ CX</p> <p>Director of Assurance and Democratic Services (DADC)</p>	<p>Ongoing</p> <p>Ongoing</p>
<b>4. Taking informed and transparent decisions which are subject to effective scrutiny and managing risk.</b>			
4.1 Being rigorous and transparent about how decisions are taken and listening and acting on the	(a) Develop and maintain an effective scrutiny function which encourages constructive challenge and enhances the Authority's performance overall		

<p>outcome of constructive scrutiny.</p>	<p>and that of any organisation for which it is responsible.</p> <p>(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.</p> <p>(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.</p> <p>(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.</p> <p>(e) Ensure that effective, transparent and accessible arrangements are in place for dealing with complaints.</p>
<p>4.2 Having good quality information, advice and support to ensure that services are delivered effectively and are what the community wants/needs.</p>	<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>
<p>4.3 Ensuring that an effective risk management system is in place.</p>	<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>
<p>4.4 Using their legal powers to the full benefit of the citizens and communities in their area.</p>	<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</p>

	<p>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"><li>- rationally, legally and natural justice.</li><li>- into their procedures and decision making processes.</li></ul>
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<b>WHERE ARE WE NOW?</b>	<b>ACTION PLANNED</b>	<b>RESPONSIBILITY</b>	<b>TIMESCALE</b>
4.1 Revised Scrutiny arrangements were put in place in 2007	Continue to consider arrangements and effectiveness	CX	Ongoing
4.3 The Corporate Assessment identified that the Council has a culture that is too risk averse rather than risk managing. New risk management arrangements will be embedded that reflect the changes to our officer structures and which embed a fit for purpose approach to managing operational and strategic risks. A new learning and development strategy will help support us in embedding a new corporate culture alongside our specific programme of work on developing individual performance management and development.	Embed the new risk management arrangements as part of the revised structures.	Strategic management Board.	Sept 09
4.4. The Council uses its powers for the benefit of citizens but the Corporate Assessment identified that it might not always maximize this benefit often settling for the minimum or statutory requirement.	Implement learning and development strategy and individual performance management and development programme to support cultural change.	CX / Head of City Learning	Oct 09
<b>5. Developing the capacity and capability of members and officers to be effective.</b>			
5.1 Making sure that members and officers have the	(a) Provide induction programmes tailored to individual needs and		

<p>skills, knowledge, experience and resources they need to perform well in their roles.</p>	<p>opportunities for members and officers to update their knowledge on a 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.</p>
<p>5.2 Developing the capability of people with governance responsibilities and evaluating their performance, as individuals and as a group.</p>	<p>(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.</p>
<p>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.</p>	<p>(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.</p>



<b>WHERE ARE WE NOW?</b>	<b>ACTION PLANNED</b>	<b>RESPONSIBILITY</b>	<b>TIMESCALE</b>
<p>5.1 Induction programmes are provided for both elected members and officers. Member Development Programme adopted. Officer induction being further reviewed in light of new organisational arrangements and as part of the organisational development and improvement programme on individual performance management and development.</p>	<p>Implement Member Development Programme</p> <p>Organisational development and improvement programme on individual performance management.</p>	<p>DADS</p> <p>DC</p>	<p>Ongoing</p> <p>Oct 09</p>
<p>5.2 The Council has an appraisal approach for officers which needs reviewing refreshing and aligning to the achievement of One Leicester. This is being done via the programme referenced above.</p>	<p>Organisational development and improvement programme on individual performance management.</p>	<p>DC</p>	<p>Oct 09</p>
<p>5.3 The Council has introduced Ward Community Meetings but its career structures were criticised in the Corporate Assessment. This is being done via the programme referenced above.</p>	<p>1. Continue to develop Ward Community Meetings</p> <p>2. Reconsider career development in the light of 'One Leicester' and the new structure. Organisational development and improvement programme on individual performance management.</p>	<p>CX</p> <p>DC</p>	<p>?</p> <p>Oct 09</p>

<b>6. Engaging with local people and other stakeholders to ensure robust public accountability</b>	
<p>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>	<p>(a) Make clear to themselves, all staff and the community to whom they are accountable and for what.  (b) Consider those institutional stakeholders to whom the Authority is accountable and assess the effectiveness of the relationships and any changes required.  (c ) Produce an annual report on the activity of the scrutiny function.</p>
<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>	<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.  (b) Hold meetings in public unless there are good reasons for confidentiality.  (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.  (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.  (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.  (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.		
<b>WHERE ARE WE NOW?</b>	<b>ACTION PLANNED</b>	<b>RESPONSIBILITY</b>	<b>TIMESCALE</b>
6.1 See 4.1	Consider inclusion of Scrutiny section in State of the City Report	CX	July 09
6.2 The Council conducts appropriate meetings in public and has a consultation toolkit to maintain good practice. However, the Corporate Assessment identified that the Council was not always as consistent in its approach or effective in feeding back the outcomes of engagement exercises as it could be. A revised corporate database is in place and a mapping of activity undertaken	Undertaken action plan identified as a result of the mapping exercise		July 09
6.3 The Corporate Assessment identified improvements required in workforce planning and engagement and a revised approach has been adopted.	1. Implement the revised Workforce Strategy	Head of Human Resources	Ongoing

## LOCAL GOVERNMENT OMBUDSMAN COMPLAINTS

<b>COMPLAINTS RECEIVED</b>			
	<b>06/07</b>	<b>07/08</b>	<b>08/9</b>
<b>Complaints received</b>	<b>147</b>	<b>130</b>	<b>136</b>
<b>Complaints closed</b>	<b>119</b>	<b>109</b>	<b>117</b>
<b>Complaints closed – less premature</b>	<b>69</b>	<b>70</b>	<b>73</b>
<b>Complaints open at year end 31 March 2008</b>	<b>28</b>	<b>21</b>	<b>19</b>

	<b>06/07</b>	<b>07/08</b>	<b>08/09</b>
Chief Executive	0	0	0
R&C	34(23%)	18(14%)	29
C&YPS	13(9%)	18(14%)	17
Housing	0	0	0
Adults and Housing	96(67%)	88(67%)	88
Resources	2(1%)	6(5%)	2
<i>TOTAL</i>	<b>147</b>	<b>130</b>	<b>136</b>

<b>LOCAL GOVERNMENT OMBUDSMAN COMPLAINTS</b>			
<b>BREAKDOWN OF OUTCOMES</b>			
	<b>06/07</b>	<b>07/08</b>	<b>08/09</b>
No Maladministration	21(18%)	30(28%)	35(30%)
Local Settlement	9(7%)	14(13%)	10(8%)
Outside Jurisdiction	15(13%)	10(9%)	8(7%)
Ombudsman's Discretion*	12(10%)	15(14%)	20(17%)
Premature	61(51%)	39(35%)	44(38%)
Discontinued/Withdrawn	0	1(1%)	0
Maladministration found	1(1%)	0	0
<b>Total</b>	<b>119</b>	<b>109</b>	<b>117</b>

\*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.

<b>LOCAL GOVERNMENT OMBUDSMAN COMPLAINT OUTCOMES BY DEPARTMENT 2008/2009</b>								
	<b>NM</b>	<b>LS</b>	<b>OJ</b>	<b>OD</b>	<b>MI</b>	<b>P</b>	<b>W</b>	<b>TOTAL</b>
Chief Executive's Office	0	0	0	0	0	0	0	0
C&YPS	7	0	2	4	0	2	0	15
Regeneration & Culture	13	1	1	4	0	8	0	27
Adults and Housing	15	9	5	11	0	34	0	74
Resources	0	0	0	1	0	0	0	1

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  
£4717.10 detailed below:

<b>Department</b>	<b>Ref No</b>	<b>Subject</b>	<b>Compensation</b>
A&H	08/048437	Damage caused and a delay in completing repairs	£50.00
A&H	08/002036	Delay in dealing with Council tax query	£150.00
A&H	08/010504	Delay in completing repairs	£250.00
A&H	07/03114	Delay in responding to information request	£125.00
A&H	07/13478	Error in the calculation of business rates	£250.00
A&H	06/10364	Council's failure to respond to letters regarding Housing Benefit, rent arrears and outstanding legal costs	£200.00
A&H	08/005739	Delay in completing repairs	£250.00
A&H	06/13146	Failure to make a proper diagnosis of structural problems with tenants property	£1862.10
			<b>Total: £3362.10</b>
R&C	07/00747	Removal of a vehicle that was not displaying a valid tax disc	£1455.00
			<b>Total: £1455.00</b>
			<b>Total: £4817.10</b>

Action taken:

The Housing repairs section is currently introducing a new way of carrying out repairs called Mobile Working whereby a majority of jobs will no longer be given an appointment survey for materials and then have a follow up appointment to carry out the work; instead the repair will be carried out in the first visit even if that involves collecting special materials.

In respect of other matters complained about and dealt with as a Local Settlement, management has taken action to ensure a more consistent approach.

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

Authority	06/7		07/08		08/09	
	Findings of Maladministration	Total No. of complaints	Findings of Maladministration	Total No. of complaints	Findings of Maladministration	Total No. of complaints
Leicester	0	69	0	94	Figures not released by the LGO until July 2009	Figures not released by the LGO until July 2009
Birmingham	2	231	0	386		
Blackburn with Darwen	0	32	0	41		
Bolton	0	46	0	54		
Bradford	0	74	1	80		
Bristol	1	90	3	116		
Coventry	0	36	1	59		
Derby	0	40	0	37		
Dudley	0	63	6	71		
Kingston-upon-Hull	0	33	0	63		
Nottingham	1	55	1	74		
Plymouth	1	60	1	54		
Portsmouth	0	27	0	37		
Southampton	0	38	0	41		
Wolverhampton	0	40	1	40		

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

