Governance and Audit Committee Meeting

Grand Jury Room, Town Hall, High Street, Colchester, CO1 1PJ
Tuesday, 29 October 2019 at 18:00

The Governance and Audit Committee considers and approves the Council's Statement of Accounts and reviews the Council's annual audit letter. The Committee also deals with the Council's governance, risk management and audit arrangements. To make recommendations to the Council on functions such as Elections and bye laws, and determine Community Governance Reviews.

Information for Members of the Public

Access to information and meetings

You have the right to attend all meetings of the Council, its Committees and Cabinet. You also have the right to see the agenda (the list of items to be discussed at a meeting), which is usually published five working days before the meeting, and minutes once they are published. Dates of the meetings are available here: https://colchester.cmis.uk.com/colchester/MeetingCalendar.aspx.

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Governance and Audit Committee - Terms of Reference (but not limited to)

Accounts and Audit

To consider and approve the Council's Statement of Accounts and the Council's financial accounts, and review the Council's external auditor's annual audit letter.

Governance

To consider the findings of the annual review of governance including the effectiveness of the system of internal audit and approve the signing of the Annual Governance Statement.

To have an overview of the Council's control arrangements including risk management and in particular with regard to the annual audit plan and work programme, and to approve the policies contained in the Council's Ethical Governance Framework.

Other regulatory matters

To make recommendations to Council on functions such as elections, the name and status of areas and individuals, and byelaws.

To determine and approve Community Governance Reviews.

Standards in relation to Member Conduct

To consider reports from the Monitoring Officer on the effectiveness of the Members' Code of Conduct, and to advise the Council on the adoption or revision of the Code.

To receive referrals from the Monitoring Officer into allegations of misconduct and to create a Hearings Sub-Committee to hear and determine complaints about Members and Co-opted Members referred to it by the Monitoring Officer.

To conduct hearings on behalf of the Parish and Town Councils and to make recommendation to Parish and Town Councils on improving standards or actions following a finding of a failure by a Parish or Town Councillor.

To inform Council and the Chief Executive of relevant issues arising from the determination of Code of Conduct complaints.

To grant dispensations, and to hear and determine appeals against refusal to grant dispensations by the Monitoring Officer.

To make recommendations to Council regarding the appointment of Independent Persons.

General

To review of the Constitution including governance issues around formal meetings, processes and member training and to make recommendations to Council.

COLCHESTER BOROUGH COUNCIL
Governance and Audit Committee
Tuesday, 29 October 2019 at 18:00

The Governance and Audit Committee Members are:

Councillor Chris Pearson	Chairman
Councillor Sam McCarthy	Deputy Chairman
Councillor Nick Barlow	
Councillor Paul Dundas	
Councillor Mark Goacher	
Councillor Dennis Willetts	
Councillor Barbara Wood	

The Governance and Audit Committee Substitute Members are:
All members of the Council who are not Cabinet members or members of this Panel.

AGENDA
THE LIST OF ITEMS TO BE DISCUSSED AT THE MEETING
(Part A - open to the public)

Please note that Agenda items 1 to 6 are normally dealt with briefly.

1 **Welcome and Announcements**

The Chairman will welcome members of the public and Councillors and remind everyone to use microphones at all times when they are speaking. The Chairman will also explain action in the event of an emergency, mobile phones switched to silent, audio-recording of the meeting. Councillors who are members of the committee will introduce themselves.

2 **Substitutions**

Councillors will be asked to say if they are attending on behalf of a Committee member who is absent.

3 **Urgent Items**

The Chairman will announce if there is any item not on the published agenda which will be considered because it is urgent and will explain the reason for the urgency.

4 **Declarations of Interest**

Councillors will be asked to say if there are any items on the agenda about which they have a disclosable pecuniary interest which would prevent them from participating in any discussion of the item or

participating in any vote upon the item, or any other pecuniary interest or non-pecuniary interest.

5 **Have Your Say!**

The Chairman will invite members of the public to indicate if they wish to speak or present a petition on any item included on the agenda or any other matter relating to the terms of reference of the meeting. Please indicate your wish to speak at this point if your name has not been noted by Council staff.

6 **Minutes of Previous Meeting**

The Councillors will be invited to confirm that the minutes are a correct record of the meeting held on 3 September 2019.

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7 **Local Government & Social Care Ombudsman – Annual Review Letter 2018/2019** 15 - 24

The Local Government & Social Care Ombudsman produces an Annual Review Letter on the number of complaints it has received regarding each local authority. This report provides details of Colchester Borough Council's Annual Review Letter for 2018/2019.

8 **Equality and Safeguarding - Annual Update Report** 25 - 38

This report sets out the Council's duties and updates for Equality & Safeguarding and illustrates the steps the Council has taken to meet these mandatory requirements and specific duties.

9 **Health and Safety Policy and Report 2019/20** 39 - 82

The Health and Safety Policy is included in the Council's Policy Framework and is an integral part of the risk management process. As such it is appropriate to provide an annual report to the Governance and Audit Committee, to assist with the Committee's responsibility for reviewing the effectiveness of risk management.

10 **Annual Audit Letter 2018/19** 83 - 94

The Annual Audit Letter summarises the conclusions and any significant issues arising from BDO's audit procedures for the year ended 31 March 2019. The Accounts and Audit Regulations require the Council to consider the Annual Audit Letter.

11 **Work Programme 2019/20** 95 - 98

This report sets out the current Work Programme 2019-2020 for the Governance and Audit Committee. This provides details of the reports that are scheduled for each meeting during the municipal year.

12 **Exclusion of the Public (not Scrutiny or Executive)**

In accordance with Section 100A(4) of the Local Government Act 1972 to exclude the public, including the press, from the meeting so that any items containing exempt information (for example confidential personal, financial or legal advice), in Part B of this agenda (printed on yellow paper) can be decided. (Exempt information is defined in Section 100I and Schedule 12A of the Local Government Act 1972).

Part B
(not open to the public including the press)

GOVERNANCE AND AUDIT COMMITTEE
3 September 2019

Present:-	Councillor Nick Barlow, Councillor Paul Dundas, Councillor Mark Goacher, Councillor Sam McCarthy, Councillor Chris Pearson, Councillor Dennis Willetts, Councillor Barbara Wood
Also Present: -	Councillor Dave Harris, Councillor David King

166. Minutes of Previous Meetings

RESOLVED that the minutes of the meetings held on 25 June 2019 and 30 July 2019 be approved as correct records.

167. **Colchester Borough Homes (CBH) Annual Report and Governance Statement**

Glenn Houchell, CBH Board Member and Chair of CBH Finance and Audit Committee, and Matt Armstrong, CBH Director of Business Improvement, introduced the Company's Annual Report and the Annual Governance Statement, as agreed by the CBH Board. They further covered developments in governance of the Company which have occurred following the end of the 2018-19 financial year. These included the appointment of a new Chair, Dirk Paterson, to succeed the retiring Chair. Glenn Houchell was also coming to the end of his term on the Company's Board and would be succeeded by Karen Smout, with Julie Parker moving from Vice Chair to Chair of the Finance and Audit Committee. Julie Parker's experience was detailed, including as a non-executive director of the East Suffolk and North Essex NHS Foundation Trust and as a member of the Joint Audit Committee of the Police and Crime Commissioner and Essex Police.

The Committee were informed of CBH's work to increase its commercial operations and to implement and embed an overhauled risk management process. Work also continued to maintain the Company's accreditations, such as Investors in People (Gold) and the BSI 18001 health and safety accreditation. The importance of maintaining this 'gold standard' of health and safety accreditation was stressed.

The Committee requested information on the approach and actions of CBH regarding fire safety and risk following the Grenfell Tower fire. The Chair of the Finance and Audit Committee gave assurance that the Board, holding liability for health and safety issues, provided close and ongoing oversight in this area. Fire safety risk assessments had been proactively carried out by the Company across the Council's stock of residential blocks. The Council owned no blocks higher than three storeys, and no properties which were clad with materials of the type found at Grenfell. Potential future legislation regarding fire safety is being monitored and safety plans are in place.

A Committee member requested further clarification as to where liability lay, regarding fire

safety and health and safety issues in general, given that the Council owned the stock managed by CBH. A supplementary question was also asked as to whether the governance arrangements at CBH and the Council closely linked to cover all eventualities. The Committee was told that liability depended upon the specific issue. The CBH Board retained liability for the Company's effective compliance with health and safety regulations, under company law. There was potential liability for the Council, however, should CBH, as a management company, raise serious health and safety concerns with the Council (as landlord) regarding its stock, but have requests for mitigatory action turned down, leading to a serious incident. It was explained that the Management Agreement between the Council and CBH laid out the interlocking governance arrangements between the two. Whilst liability for health and safety could not be delegated, it was possible to delegate work to address and mitigate health and safety risks.

The Committee sought clarification as to where liabilities would specifically lie within the Council, should an incident occur for which the Council was liable and what responsibilities lay with Portfolio Holders, the Cabinet and Full Council as a whole. Dan Gascoyne committed to confirm and provide details on this to Committee members.

A Committee member requested clarity as to whether CBH or the Council had responsibility for ensuring the removal of household waste from CBH-managed Council-owned blocks of flats. The answer given was that CBH managed the properties and tenant behaviours, whilst the Council had responsibility for collecting waste from the communal waste collection areas. CBH could and did assist in providing advice to residents regarding waste collection, and to raise problems for residents with the Council.

Assurance was given by the Director of Business Improvement that the actions listed within the Annual Governance Statement were already being carried out and that confidence was held that they would be completed within the timescales set out. The new Risk Management process was already in place and around half the actions within the Board Effectiveness Review action plan had been completed. The Business Continuity Plan has not yet been tested but had been called into use on a number of occasions to mitigate the effects of ICT systems failure, and a test has now been scheduled. Procurement training has been carried out.

The Committee thanked the CBH Chair of Finance and Audit Committee and the Director of Business Improvement for attending and noted that the Committee's experience in examining the governance arrangements of the different wholly-owned companies of the Council gave them a good background to see that CBH's governance performance had been strong during 2018-19.

RESOLVED that: -

(a) The Committee had considered and commented on the Governance Assurance Statement of Colchester Borough Homes.

(b) The Committee accepted the assurance provided by Colchester Borough Homes regarding its governance arrangements throughout 2018/19.

168. Polling Districts and Polling Places Review

The review was presented by Jason Granger, Customer Solutions Manager, and James Bennett, Senior Electoral Services Officer. The Customer Solutions manager introduced the

principles and requirement for the review, and explained his role, and that of the Electoral Services Team.

Councillor Dave Harris attended and with the consent of the Chairman addressed the Committee to thank officers for their work and comment on the proposals resulting from the review. The need to ensure that all voters had access to polling stations and that access was as easy as possible was stressed, along with a request that, so far as was possible, the placing of polling stations outside the district they served should be avoided, if at all possible.

Councillor Harris supported the proposed change of polling station for polling district BF (Shrub End), as the proposed site would be safer for residents voting, regarding its position in relation to the road. The Councillor raised an element of concern that the proposed polling station for BE (Rainsborowe Road), proposed to be at the Shrub End Community & Sports Centre) was to the North of the area it would serve, and would entail a long journey for some residents wishing to vote. He suggested that the current BE polling district be split in two, and an additional polling station be located, for the new additional polling district, at the old local community gym. This would be for use by the residents of the streets to the South of Abbey Field and would make voting easier, especially for those with limited mobility. It was confirmed that it would be relatively simple to create a new polling district, but that any additional districts proposed would need to be approved by the Governance and Audit Committee.

The proposed change to the arrangements for polling district AB (Willows and Monkwick) was raised. Councillor Harris raised issues which had come to his attention regarding difficulties reported to him regarding residents voting in the 2019 European Parliamentary Elections at the interim polling station, sited at Abbots Community Hall. These included complaints that the station was difficult to reach by some voters with limited mobility. Alternative options were given, such as the Ormiston Centre, who would be willing to have a portacabin temporarily sited on their site, and Monkwick Junior School's recently-built new block, which is separated from the main school buildings, mitigating safeguarding concerns regarding its possible use as a polling station. The proposed use of Thomas Lord Audley School was questioned, with concerns cited regarding the difficulty of access to the Gym, via a step, for those with limited mobility. A third alternative site proposed by the Councillor was the St Margaret's Church, Stansted Road.

The Chair confirmed that the Committee and officers had discussed the importance of polling stations meeting the needs of all residents and to avoid, wherever possible, the siting of stations outside the boundaries of the polling districts that they served. It was also confirmed that the Abbots Community Hall would only be available as a polling station up to the day before the next scheduled local elections, in May 2020. The Customer Solutions Manager informed the Committee that the comments and discussions previously made and held by the Committee regarding the importance of siting, when possible, polling stations within their polling districts had been considered and agreed with. The Council was committed to obtaining use of either Thomas Lord Audley or the Ormiston Centre. Officers had now been able to commence talks with the Paxman Academy regarding its potential use as polling station for district BF (Shrub End) and efforts are being made to further a constructive relationship with the Academy. Likewise, efforts were being made to look at the potential for using the former Garrison Gym.

A Committee member highlighted the busy nature of the polling station sited at Stanway Village Hall, and the expectation that future residential developments in the area would

make it busier still. The view was given that use of the Hall for district GL (West Stanway) was manageable in the short term, but that a long-term alternative would ease the pressure on the site. The Senior Electoral Services Officer explained that St Albright's Church had been considered as an alternative but had not yet been approached, and that alternatives suggested to Stanway Village Hall would be explored for the long term.

The Committee enquired as to what plans were in place, should a general election polling day be set for a day other than a Thursday. The Committee was informed that plans had been put in place and communications with venues would be necessary to ensure that they are informed of the ramifications stemming from a polling day being set for a day of the week other than Thursday. Polling stations would be confirmed as soon as possible, following any confirmation of a general election polling day date.

The Committee considered the need to minimise average journey distances to polling stations and it was considered that flexibility in siting polling stations was necessary, especially in rural wards where distances of journeys were often greater. Officers informed the Committee that the Council's online CMAPS software could be used to help measure journey distances between any part of a polling district and its polling station. A member of the Committee requested whether it was possible for links to CMAPS to be included within future reports of this type, to allow members easy access to the function.

RESOLVED that the CUSTOMER SOLUTIONS MANAGER ensure that the Governance and Audit Committee receive a future update and opportunity to review the arrangements for polling stations, to occur prior to the arrangements being confirmed for polling station placements for the 2020 Colchester Borough Council elections.

RECOMMENDED to FULL COUNCIL that it approves and adopts Appendix A – Proposed schedule of Polling Districts and Polling Places, with the proviso that the Governance and Audit Committee will further review polling station arrangements before the 2020 Colchester Borough Council elections.

169. Financial Monitoring Report – April to June 2019

The report covering the first quarter of 2019-20 was presented by Paul Cook, Section 151 Officer and Council Interim Head of Finance, and Councillor King, Portfolio Holder for Business and Resources. It was stressed that it was difficult to make predictions at this early stage of the financial year, but that a £343k General Fund overspend by year end was expected. Conversely, an underspend for the Housing Revenue Account (HRA) had been noted as £346k, and that it was expected that this would be on-budget at year end. The main contributory factors to the current position were explained, including the use of reserves to meet the redundancy costs incurred within the Neighbourhood Teams, and the costs relating to work on the River Colne lease and derelict boat removal. The main points within the appendices were covered and explained.

In response to questions on Licensing and Food Safety (Appendix C), the Head of Finance agreed to find information relating to costs relating to vet fees and circulate this to the Committee's members.

Questions were raised regarding the references to vacancy factor targets within Appendix C, and whether the annual budget setting approach should change to incorporate targets for vacancy factor savings within it, effectively budgeting for what could be afforded, as opposed to budgeting for what was deemed necessary. Detail was requested as to whether

vacancy factor targets were set for each department individually. The Head of Finance explained that it was not unusual for vacancy targets to be set, but that it had been deemed unreasonable to set these for each individual service area, leading to a general vacancy factor target set across the Council as a whole, which aims to predict the likely underspend on staffing, caused by temporary vacancies of roles which are being recruited to. The Head of Finance offered to include details on the vacancy factors, their total size, and targets within the next scheduled Financial Monitoring Report due to be considered by the Committee.

A Committee member sought greater detail regarding government grants, and whether these were added up and included within the Council's overall budget position. It was confirmed that any grants confirmed by the time that the budget is prepared would be included within the budget. It was not uncommon for certain grants, such as those from the Department of Work and Pensions, to be granted with limited notice periods. The Portfolio Holder for Business and Resources gave an overview of the difficult funding situation faced by the Council and other local authorities. Clarity was a priority regarding openness on revenue sources and government funding. The Council has been successful over recent years in obtaining government grant funding, especially for use in infrastructure works.

The shortfall in market and street trading was scrutinised and detail was requested as to what actions were being taken to increase fee income and market activity. The Portfolio Holder for Business and Resources briefed the Committee on the situation and attempts made to improve market income and the positive effect to the Town's vibrancy. Rolling conversations were being held with traders to seek their views, and options had been examined, such as giving a wider choice of stall locations, use of traders' own stalls (if they were deemed safe), special offers, changed rates and consultation on additional market days. Dan Gascoyne, Chief Operating Officer, committed to circulate a copy of the recent decision made by the Portfolio Holder to approve the use of these options.

The Committee asked whether redundancy costs and the £175k overspend on salary within Neighbourhood Services had been specific to this financial period, whether the overspend would be ongoing and if this was due to overstaffing. The Portfolio Holder for Business and Resources explained that this had been a result of the unanticipated cost of temporary cover being provided for vacant roles.

The £2,000 Garden Communities spend listed in Appendix A was questioned. It was explained that this was a residual legal cost which will be transferred to the appropriate reserve account in the near future.

RESOLVED that the Committee had considered the financial performance of General Fund Services and the Housing Revenue Account (HRA) for the first three months of 2019/20 and noted the forecast budget overspend of £343k on the General Fund.

170. Update on approved capital programme 2019/20

The 151 Officer and Interim Head of Finance presented the report and explained the new, condensed format for this report which covered the first quarter of the current financial year. A summary was provided within the report to show the re-profiling of the capital programme. Some project spending had been deferred until 2020-21. This had led to a revision of the definition of the 'Amber' RAG status within the Scheme Status found at Appendix A. Amber-ratings were also now used for project elements where reprofiling had been carried out, not just applied to items which were at risk of falling behind or missing

targets. The items graded Amber or Red in Appendix A were then detailed.

Disabled Facilities Grants (DFGs): A new manager and increased team size had been brought in to better utilise the government funding allocated, improve IT support and work to better-address non-DFG work within the team. More detail could be given within the next capital programme update. A member of the Committee welcomed this and noted that there had been previous years when the entire funding for DFG work had been used before year end, which had caused problems, and sounded concern that the Council was not now spending the full grant in a year. The Interim Head of Finance gave assurance that the Council was working closely with the County Council to ensure they carried out assessments promptly, that carry forwards of grant money were possible, but that the Council did aim to fully use grant money within the year for which it was granted. More surveyors were engaged, and extra administrative/IT support was now available. The Portfolio Holder for Business and Resources gave assurance that the Council was committed to set a project plan which would ensure no resourcing issues were encountered.

Shrub End Depot: The position has now improved, and a phased approach would now be used to deal with issues, at a projected cost of £700k-£800k. Progress had hastened on this project. It was confirmed that a previous project and proposed capital financing relating to the Depot, and potential transfer of services to a different site, was not now part of the process currently going forward. There would not now be a move of services away from the site and the existing facilities would be improved instead.

Lending to new Council Housing Company and to CAEL (Colchester Amphora Energy Ltd): It was explained that, owing to technical delays, these would be more realistic to profile in 2020/21, and an explanation was given as to why they had been listed this way, with the spending definitely to occur, but with an element of uncertainty as to in which financial year this would happen.

Colchester Northern Gateway (North) – Sports Hub: This had been rated as Amber due to the phasing, and to the spend listed for 2019/20.

Town Centre: It was expected that the full allocation of £500k for 2019/20 will not be spent in the year, and that there will be a carry over into 2020/21.

New Build on Garage Sites: This had been slightly delayed in the profiling. It was thought that some of the allocation would be used on the Mill Road development.

RESOLVED that the Committee had reviewed progress on the 2019/20 capital programme.

171. Work Programme 2019-20

RESOLVED that the Work Programme 2019-20 be approved.

172. Treasury Management Strategy (TMS) – Annual Review 2018/19

The Interim Head of Finance presented the report and laid out the different stages of reporting on Treasury Management during the course of each financial year. This report constituted the third part of the annual process, where the Committee was asked to review performance for the previous financial year, 2018/19. The report had been prepared and laid out to show the standard indicators recommended by CIPFA.

It was highlighted that, in comparison to other local authorities with retained housing stock, the Council had a reasonable level of borrowing. Underspend on the capital programme had resulted in a reduction in new borrowing and the Council had not gone close to the maximum borrowing limit. It was explained that no decisions had been taken to exceed borrowing limits for any of the maturity bands, but that the progress of time had taken certain borrowing from one band into another, leading to a slight exceeding of the limit for borrowing of a two to five-year maturity (15.6% recorded compared to 15% limit).

It was confirmed that all investments were made according to Council policy, and that the rate of return had slightly improved upon the previous financial year.

The Committee discussed the duplication of this report coming to both this Committee and to the Scrutiny Panel, with the view that this Committee concentrated on the process and adherence to rules in treasury management, with the Scrutiny Panel concerned more with monitoring actual performance and figures. The Chair confirmed that he had suggested that he meet with the Chair of the Scrutiny Panel, and officers, to discuss and decide how treasury management is monitored by the respective bodies in the future. The Portfolio Holder for Business and Resources welcomed this and informed members that the Cabinet were examining ways to more-effectively inform them of treasury management and financial matters so that all members can discuss these and compare the Council's performance to that of other local authorities. The increased level of detail in this report was an example of this.

RESOLVED that the Committee had: -

(a) Considered the TMS Annual Review 2018/19;

(b) Noted that the Council operated in accord and are within the boundaries of the TMS prudential indicators set for 2018/19 and;

(c) Noted the satisfactory performance of Link Asset Services.

	Governance and Audit Committee		**Item 7**
	29 October 2019		
Report of	**Monitoring Officer**	**Author**	**Andrew Weavers** ☏ **282213**
Title	**Local Government & Social Care Ombudsman – Annual Review Letter 2018/2019**		
Wards affected	Not applicable		

1. Executive Summary

1.1 The Local Government & Social Care Ombudsman produces an Annual Review Letter on the number of complaints it has received regarding each local authority. This report provides details of Colchester Borough Council's Annual Review Letter for 2018/2019.

2. Recommended Decision

2.1 To note the contents of the Local Government & Social Care Ombudsman's Annual Review Letter for 2018/2019.

3. Supporting Information

3.1 The Local Government & Social Care Ombudsman issues an Annual Review Letter to each local authority. The Annual Review Letter for Colchester for the year ending 31 March 2019 is attached to this report at Appendix 1.

3.2 It is worth noting that anyone can choose to make a complaint to the Local Government & Social Care Ombudsman. Accordingly, the number of complaints is not an indicator of performance or level of customer service. In most instances there was no case to answer. The Local Government & Social Care Ombudsman will normally insist that the Council has the opportunity to resolve the complaint locally through its own complaints procedure before commencing its own investigation.

3.3 The Annual Letter has been previously reported to Cabinet at its meeting on 4 September 2019 when it was noted.

4. Key Headlines

4.1 No public interest reports or service improvement recommendations were issued.

4.2 In 2018/2019 the Council received 210,185 direct customer contacts in the customer services area. However, this figure does not include ad hoc customer contacts across the organisation. The Local Government & Social Care Ombudsman in the same period received 20 complaints and enquiries in relation to how the Council had dealt with its customers. This is a slight decrease from the previous year's figure of 21.

4.3 The following table provides a comparison of complaints and enquires received.

Year	Benefits and Tax	Corporate and other services	Environment Services	Highways and Transport	Housing	Planning and Development	Other	Total
2015/16	3	2	3	2	6	8	0	25
2016/17	2	0	2	0	5	7	0	16
2017/18	1	1	5	2	8	3	1	21
2018/19	0	1	4	0	5	10	0	20

4.4 The following table provides a comparison of decisions made.

					Detailed Investigations			
Year	Incomplete or Invalid	Advice Given	Referred back for Local Resolution	Closed after Initial Enquiries	Not Upheld	Upheld	Uphold Rate	Total
2015/16	2	3	12	4	1	1	50%	23
2016/17	0	1	4	5	2	1	33%	13
2017/18	1	2	8	5	4	1	20%	21
2018/19	2	1	4	10	3	3	50%	23

As can be seen from the table above, 6 detailed investigations were undertaken. Of which:

- 3 not upheld,
- 3 upheld.
  (The Local Government & Social Care Ombudsman decided that the Council had been at fault in how it acted, and the fault may or may not have caused injustice to the complainant, or where the Council accepted that it needed to remedy the complaint before the Local Government & Social Care Ombudsman made a finding on fault. If the Local Government & Social Care Ombudsman decided there was fault and it caused an injustice to the complainant, usually it will have recommended the Council take some action to address it).

The uphold rate of 50% is slightly higher than the average of 43% in similar Authorities.

4.5 Two of the upheld cases related to Planning and Development:

(a) One was in relation to a complaint regarding the way the Council had determined a planning application in relation to development on an open space with reference to the (then) emerging local plan. The Local Government & Social Care Ombudsman upheld the complaint because there was some fault in the Council's degree of weighting given to the (then) emerging local plan in its decision. However, the Local Government & Social Care Ombudsman ended the investigation as the complainant had not suffered significant personal injustice.

(b) The other related to how the Council dealt with a planning application to extend the complainants' neighbours property. The Local Government & Social Care Ombudsman found fault due to officers providing conflicting information to the complainant regarding aspects of the application process. Additionally, the complainant had made a formal complaint through the Council's complaint process. The Local Government & Social Care Ombudsman found fault by the Council in the manner in which it had handled the complaint. The Council agreed to apologise to the complainant and pay a time and trouble payment of £100.

The third upheld case related to Housing and was in relation to an application for housing. The Local Government & Social Care Ombudsman found that Colchester Borough Homes had been at fault in the way they had handled the initial stages of the complainant's housing application. Colchester Borough Homes agreed to provide an apology to complainants.

In all three instances processes have been reviewed and amended as appropriate.

4.6 For the first time this year the Annual Review Letter contains a table which indicates the Council's performance in implementing agreed recommendations. The table indicates that the Council had a compliance rate of 100% with one recommendation implemented within the agreed timescale and the other outside. This will be closely monitored going forward to ensure that recommendations are implemented within the timescales.

5. Financial Considerations

5.1 No direct implications other than those mentioned in this report.

6. Strategic Plan References

6.1 The lessons learnt from complaints to the Local Government & Social Care Ombudsman link in with our Strategic Plan aims to be efficient, accessible, customer focused and always looking to improve. Having an effective complaints process helps us to achieve the Strategic Plan's theme of 'Wellbeing', making Colchester an even better place to live and supporting those who need help most.

7. Equality, Diversity and Human Rights Implications

7.1 No direct implications.

8. Publicity Considerations

8.1 Details of the Annual Review Letter are published on the Local Government & Social Care Ombudsman's website and will also be published on the Council's website.

9. Consultation, Community Safety, Health and Safety and Risk Management Implications

9.1 No direct implications.

10. Appendix

10.1 Appendix A: Local Government & Social Care Ombudsman Annual Review letter 2019.

Local Government & Social Care OMBUDSMAN

24 July 2019

By email

Adrian Pritchard
Chief Executive
Colchester Borough Council

Dear Mr Pritchard

Annual Review letter 2019

I write to you with our annual summary of statistics on the complaints made to the Local Government and Social Care Ombudsman about your authority for the year ending 31 March 2019. The enclosed tables present the number of complaints and enquiries received about your authority, the decisions we made, and your authority's compliance with recommendations during the period. I hope this information will prove helpful in assessing your authority's performance in handling complaints.

Complaint statistics

As ever, I would stress that the number of complaints, taken alone, is not necessarily a reliable indicator of an authority's performance. The volume of complaints should be considered alongside the uphold rate (how often we found fault when we investigated a complaint), and alongside statistics that indicate your authority's willingness to accept fault and put things right when they go wrong. We also provide a figure for the number of cases where your authority provided a satisfactory remedy before the complaint reached us, and new statistics about your authority's compliance with recommendations we have made; both of which offer a more comprehensive and insightful view of your authority's approach to complaint handling.

The new statistics on compliance are the result of a series of changes we have made to how we make and monitor our recommendations to remedy the fault we find. Our recommendations are specific and often include a time-frame for completion, allowing us to follow up with authorities and seek evidence that recommendations have been implemented. These changes mean we can provide these new statistics about your authority's compliance with our recommendations.

I want to emphasise the statistics in this letter reflect the data we hold and may not necessarily align with the data your authority holds. For example, our numbers include

enquiries from people we signpost back to your authority, some of whom may never contact you.

In line with usual practice, we are publishing our annual data for all authorities on our website, alongside our annual review of local government complaints. For the first time, this includes data on authorities' compliance with our recommendations. This collated data further aids the scrutiny of local services and we encourage you to share learning from the report, which highlights key cases we have investigated during the year.

New interactive data map

In recent years we have been taking steps to move away from a simplistic focus on complaint volumes and instead focus on the lessons learned and the wider improvements we can achieve through our recommendations to improve services for the many. Our ambition is outlined in our corporate strategy 2018-21 and commits us to publishing the outcomes of our investigations and the occasions our recommendations result in improvements for local services.

The result of this work is the launch of an interactive map of council performance on our website later this month. Your Council's Performance shows annual performance data for all councils in England, with links to our published decision statements, public interest reports, annual letters and information about service improvements that have been agreed by each council. It also highlights those instances where your authority offered a suitable remedy to resolve a complaint before the matter came to us, and your authority's compliance with the recommendations we have made to remedy complaints.

The intention of this new tool is to place a focus on your authority's compliance with investigations. It is a useful snapshot of the service improvement recommendations your authority has agreed to. It also highlights the wider outcomes of our investigations to the public, advocacy and advice organisations, and others who have a role in holding local councils to account.

I hope you, and colleagues, find the map a useful addition to the data we publish. We are the first UK public sector ombudsman scheme to provide compliance data in such a way and believe the launch of this innovative work will lead to improved scrutiny of councils as well as providing increased recognition to the improvements councils have agreed to make following our interventions.

Complaint handling training

We have a well-established and successful training programme supporting local authorities and independent care providers to help improve local complaint handling. In 2018-19 we delivered 71 courses, training more than 900 people, including our first 'open courses' in Effective Complaint Handling for local authorities. Due to their popularity we are running six more open courses for local authorities in 2019-20, in York, Manchester, Coventry and London. To find out more visit www.lgo.org.uk/training.

Finally, I am conscious of the resource pressures that many authorities are working within, and which are often the context for the problems that we investigate. In response to that situation we have published a significant piece of research this year looking at some of the

common issues we are finding as a result of change and budget constraints. Called, Under Pressure, this report provides a contribution to the debate about how local government can navigate the unprecedented changes affecting the sector. I commend this to you, along with our revised guidance on Good Administrative Practice. I hope that together these are a timely reminder of the value of getting the basics right at a time of great change.

Yours sincerely,

Michael King
Local Government and Social Care Ombudsman
Chair, Commission for Local Administration in England

Local Authority Report: Colchester Borough Council
For the Period Ending: 31/03/2019

For further information on how to interpret our statistics, please visit our website

Complaints and enquiries received

Adult Care Services	Benefits and Tax	Corporate and Other Services	Education and Children's Services	Environment Services	Highways and Transport	Housing	Planning and Development	Other	Total
0	0	1	0	4	0	5	10	0	20

Decisions made

				Detailed Investigations			
Incomplete or Invalid	Advice Given	Referred back for Local Resolution	Closed After Initial Enquiries	Not Upheld	Upheld	Uphold Rate (%)	Total
2	1	4	10	3	3	50	23

Note: The uphold rate shows how often we found evidence of fault. It is expressed as a percentage of the total number of detailed investigations we completed.

Satisfactory remedy provided by authority

Upheld cases where the authority had provided a satisfactory remedy before the complaint reached the Ombudsman	% of upheld cases
0	0

Note: These are the cases in which we decided that, while the authority did get things wrong, it offered a satisfactory way to resolve it before the complaint came to us.

Compliance with Ombudsman recommendations

Complaints where compliance with the recommended remedy was recorded during the year*	Complaints where the authority complied with our recommendations on-time	Complaints where the authority complied with our recommendations late	Complaints where the authority has not complied with our recommendations	
2	1	1	0	Number
	100%		-	Compliance rate**

Notes:
* This is the number of complaints where we have recorded a response (or failure to respond) to our recommendation for a remedy during the reporting year. This includes complaints that may have been decided in the preceding year but where the data for compliance falls within the current reporting year.
** The compliance rate is based on the number of complaints where the authority has provided evidence of their compliance with our recommendations to remedy a fault. This includes instances where an authority has accepted and implemented our recommendation but provided late evidence of that.

Colchester	Governance and Audit Committee	Item 8

29 October 2019

Report of	**Assistant Director of Communities**	**Author**	**Joanne Besant** (Equality) **& Sonia Carr** (Safeguarding) ☏ **01206 506943 / 01206 282978**
Title	**Equality and Safeguarding - Annual Update Report**		
Wards affected	**All**		

The Committee is asked to review this annual report on Equality and Safeguarding

1 Executive Summary

1.1 The report sets out the Council's duties and updates for Equality & Safeguarding and illustrates the steps the Council has taken to meet these mandatory requirements and specific duties.

2. Recommended Decision

2.1 Committee is asked to review the progress made in meeting the Council's legal duties and objectives in regard to both Equality and Diversity, and Safeguarding, and to endorse the approach set out at paragraph 7 below.

3. Reason for Recommended Decision

By reviewing the approach in these key areas, the Committee will assist the Council in meeting its legal duties.

3.1 The following appendices have been included at the end of this report to assist the Committee in its task:

- Appendix A - Key improvements and initiatives
- Appendix B - Service adjustments for customers

4. Continuation of a Combined Approach

4.1 This annual report continues a combined reporting approach to scrutiny in the areas of Equality and Diversity, and Safeguarding, bringing the following advantages:

- The two areas of work are mutually supportive and reinforcing.
- They both involve the principle of proportionality and having "due regard".
- Each area helps to support, and prevent harm occurring to, vulnerable groups.

- An approach that reviews these two areas together can help to deliver maximum benefit for customers, the most effective management of risk and the most efficient use of resources.

5. National and Local Developments

Equality and Diversity

5.1 In June 2019, new guidance was issued to local authorities on the administration and enforcement of the Blue Badge scheme. This is the biggest change to the scheme in nearly 50 years and will mean that people with less visible disabilities, such as dementia and anxiety disorders will now be eligible. Review of Blue Badge fraud as scheme is extended to those with 'hidden disabilities' - GOV.UK

A new national task force has also been launched in order to increase enforcement and help local authorities tackle fraudulent use of badges.

Safeguarding

5.2 In April 2018, the Homelessness Reduction Act came into effect, requiring councils to provide services to all those at risk of becoming homeless, in addition to those with a priority need. In August 2018, the Government announced a Rough Sleeping Strategy – a wide ranging document which lays out the Government's plans to help people who are sleeping rough now and to put in place the structures to end rough sleeping for good. In December 2018, a Delivery Plan was published, setting out progress and next steps. Rough Sleeping Strategy - Delivery Plan Dec 2018

5.3 Revised statutory guidance on inter-agency working to safeguard and promote the welfare of children was published on 1 August 2018. This reflects the new status of local child safeguarding boards as being non-statutory. This guidance was updated in February 2019 to reflect how top-tier local authorities with responsibility for children's social care (not district/borough authorities) should notify the Child Safeguarding Panel.

5.4 There have also been changes over the relevant period in terms of national governance. On 8 September 2019, Thérèse Coffey MP was appointed Secretary of State for the DWP (including administration of state benefits and providing support to families and children, disabled people). Elizabeth Truss MP was appointed Minister for Women and Equalities on 10 September 2019. Other changes include Gavin Williamson MP appointed Secretary of State for Education (including children's social care) on 24 July 2019, Matt Hancock MP appointed Secretary of State for Health and Social Care (including social care policy) on 9 July 2018 and Priti Patel MP appointed Secretary of State for the Home Department (including security and terrorism) on 24 July 2019.

5.5 At Essex County Council, Councillor David Finch as Leader of the Council has responsibility for Equality and Diversity. Councillor Louise McKinlay is Cabinet Member for Children and Families; Councillor Susan Barker is Cabinet Member for Customer, Communities, Culture and Corporate and Councillor John Spence is Cabinet Member for Health and Adult Social Care (which includes Disabilities).

5.6 Phil Picton continues to be the independent Chair of both the Essex Safeguarding Children Board (ESCB) and the Essex Safeguarding Adults Board (ESAB).

6. Meeting the Duties

Overall Arrangements at Colchester Borough Council

6.1 Equality and Safeguarding are each integrated into the day-to-day operations of the Council. However, arrangements are also in place to ensure strategic focus and co-ordination. The Assistant Director for Communities provides the strategic lead, with support from the lead Officers for Equality & Diversity, and Safeguarding.

6.2 The relevant Cabinet Portfolio Holder is Councillor Mike Lilley (Communities, Wellbeing and Public Safety).

6.3 In the area of Equality and Diversity, the Diversity Steering Group (DSG) provides an active forum for 'advancing equality' for both customers and staff. Its members are service 'representatives' who play a key role in reviewing progress and disseminating best practice.

In a similar way, Designated Safeguarding Officers, who have an enhanced level of training to provide expertise and assistance to officers, attend quarterly workshops led by the Safeguarding Coordinator, to review legislative changes, safeguarding referrals, training requirements for all staff and improve processes.

6.4 Partnership working is key to meeting the Council's safeguarding duties. The Safer Colchester Partnership (SCP) is led by a Responsible Authorities Strategic Group (RASG) which consists of Chief Officers representing local statutory partners and non-statutory partners and organisations. It aims to achieve sustainable solutions following the identification of local needs and priorities. It does this by delivering initiatives and engaging with local communities on a number of issues including 'hidden harms' (i.e. domestic violence, hate crime, modern slavery, child exploitation and cuckooing/mate crime).

6.5 Colchester Borough Council also engages positively with the relevant 'Stay Safe' group which comes under the ESCB's governance. This group helps to put into practice effective partnership working to keep children safe from harm including abuse. The Council also attends local 'MACE 2' (Missing and Child Exploitation) meetings which facilitate joint approaches and key information sharing to help protect children from exploitation.
In addition, from 2019, the Council attends the new Organised Crime Group Disruption Panel, organised by Essex Police, in which disruption strategies and action planning for those individuals at risk of exploitation are discussed.

6.6 The Council works closely with both the Essex Safeguarding Adults Board and the Essex Safeguarding Children Board. Support from, and representation on, both the ESCB and ESAB for District Councils is by way of Board Membership. Colchester Borough Council Executive Director Pam Donnelly sits on the ESAB and feeds back to the Chief Executives Group. The Council is also represented at both the City, District and Borough Leads and Adult Safeguarding Leads meetings.

Equality and Diversity

6.7 The Equality Act 2010 imposed a Public Sector Equality Duty (PSED) upon local authorities including borough/district councils. Under its 'general duty', the Council must 'integrate consideration of the advancement of equality' into its 'day-to-day business, and across all functions'. Councillors and staff must have 'due regard' to the need to:

- eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act
- advance equality of opportunity between people who share a 'protected characteristic' and those who do not
- foster good relations between people who share a 'protected characteristic' and those who do not

6.8 The ‘protected characteristics’ are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, and sexual orientation. The duty also covers marriage and civil partnership, but not for all aspects of the duty.

6.9 Equality and Diversity training forms part of the induction for new CBC staff and Councillors. A new online training package was designed and implemented in April 2019 and now forms part of the induction training module for new CBC staff and Councillors.

6.10 The Equality and Human Rights Commission’s Technical Guidance to the PSED remains the best guide to the practical operation of the PSED. In addition, the Council takes due account of the Government’s Review of the PSED which endorsed the so-called “Brown Principles”. These confirmed that the ‘due regard’ duty must be fulfilled before and at the time that a particular policy is being considered; it must be exercised in substance, with rigour and with an open mind; and that it is non delegable.

6.11 The PSED ‘specific duties’ require us to publish information to demonstrate that we are meeting both the ‘general duty’, and one or more published equality objectives. During the period 2018-19 we have continued to meet both requirements. Information published on the Council website includes:

- Equality Impact Assessments
- The Council's Strategic Plan 2018-21 and its Year End Performance Report (including its Strategic Plan Action Plan).
- The Council’s website pages on Equality and Diversity
- The Council’s Equality Information section contains all required information
- Work undertaken by the Council’s Research and Engagement team about service users, customers and the borough’s population.

6.12 The Council remains committed to the use of the Equality Impact Assessment process. Despite not being a legal requirement, these remain a vital framework through which the Council can continue to identify, evaluate, and mitigate against negative impacts upon the ‘protected characteristics’. It allows us to make the right judgements based on sound information and data, in an open and transparent way.

6.13 Equality Impact Assessment (EqIA) training was delivered to CBC staff on 12 July and 25 September, by Essex County Council’s Senior Equalities Advisor.

6.14 The Council works with a host of agencies and organisations in order to meet its duties and advance equality more generally. Many of these are included in Appendix A.

Safeguarding

6.15 Under Section 11 of the Children Act 2004, local authorities “must make arrangements for ensuring (that)…their functions are discharged having regard to the need to safeguard and promote the welfare of children.” The Act required district councils to supply information to enable the Local Safeguarding Children Board to perform its function to co-ordinate activity. From 1 October 2019, a revised SET Safeguarding & Child Protection Procedures - October 19 was published, integrated into the Council’s Safeguarding Policy.
Primarily the key changes made to the procedures are to reflect the new multi-agency safeguarding arrangements that came into force nationally from 29 September 2019 and replaced Local Safeguarding Children Boards (LSCBs). Across Southend, Essex and Thurrock the ‘Local Multi-Agency Safeguarding Partnerships/Boards’ will co-ordinate these new arrangements on behalf of their named Statutory Partners and will be referred to throughout the SET Child Protection and Safeguarding Procedures. The new Multi-Agency

Safeguarding Arrangements (MASA) MASA Plan 2019-20 in Essex will continue to sit under the Essex Safeguarding Childrens Board to comply with the requirements set out in the statutory guidance Working Together 2018.

6.16 Under Section 42 of the Care Act 2014, the local authority must make enquiries to co-ordinate action to support an adult who: (a) has needs for care and support (whether or not the authority is meeting any of those needs), (b) is experiencing, or is at risk of, abuse or neglect, and (c) as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it. Although Essex County Council is the *investigating authority,* the Act requires district councils to supply information to enable the local Safeguarding Adults Board to perform its function to co-ordinate activity. There are also agreed SET Safeguarding Adults Guidelines, which were updated in April 2019, for adult safeguarding, integrated into the Council's Safeguarding Policy.

6.17 The Council raises safeguarding concerns with Essex County Council via its Request for Support Portal (in regard to a child) and the SETSAF form (in regard to an adult). Records of referrals made, and any feedback received, are retained in a secure area of the Council network and are reviewed at quarterly Designated Officer Workshop meetings.

In **2018** (1 January – 31 December), the number of referrals made to Essex County Council was 28; 26 of these were vulnerable adult referrals made to Adult Social Care and 2 were vulnerable children referrals made to the Children and Families Hub.
For **2019** (1 January – 30 September) the number of referrals stands at 28; 22 vulnerable adults and 7 children *(3 of which were of same family).*

6.18 Completing Safeguarding Level 1 training is a mandatory requirement for all CBC staff and members, and this is monitored via the HR Team. Between the period July 2017 (when a new system was implemented) to end of September 2019, approximately 327 CBC staff have completed this training. In addition:

- Safeguarding Level 3 (enhanced) training was delivered to Designated Safeguarding Officers (DSOs) in March 2019.
- Level 2 (specialist/advanced) training was delivered to frontline staff and DSOs over the period January 2018 – September 2019. This training included suicide prevention, substance misuse, gangs awareness, cuckooing and mate crime awareness, hate crime awareness and identifying hidden harms (Observers Scheme which includes domestic abuse, modern slavery, child exploitation, county lines and sexual violence).
- Impact of Sexual Violence Awareness and Hate Crime Awareness will also be offered to Members via the Member Development Sessions in September 2019 and October 2019.

CBC Licensing and Community Safety Teams have also jointly delivered a programme of Safeguarding Training to Taxi Drivers and Impact of Sexual Violence awareness to Door Staff during 2019.

6.19 The Council, as chair of the local Community Safety Partnership, has responsibilities under Section 9 of the Domestic Violence, Crime and Victims Act 2004. During the period, (April 2019) the Safer Colchester Partnership published 2 Domestic Homicide Reviews DHRs and has provided relevant information following 'scoping enquiries' on Partnership Learning Reviews, Serious Case Reviews and Domestic Homicide Reviews.

6.20 The local Safeguarding Boards audit the approach and performance of partners including Colchester Borough Council in regard to: (a) senior management leadership; (b) lines of accountability; (c) embedding policy; (d) 'early help' and agency work; (e) info sharing; (f)

learning and improvement; (g) service development; and (h) recruitment, vetting and allegations.

6.21 In May 2019, ESAB announced it would be sending out a staff survey in the Autumn, to replace the Section 11 safeguarding audit. This survey was circulated to all CBC staff on 10th September, with a deadline for completion 4 October. A Safeguarding leads survey was also completed. ESAB are due to deliver a full report in February 2020.

6.22 In May 2018, the Council completed a remote audit on its child safeguarding responsibilities. Although 75% of criteria were met, specific areas where improvement can be made were identified which form the basis of an internal action plan which is subject to regular monitoring. These ESCB audits are self-assessments and currently carried out every two years (2019).

6.23 Modern slavery encompasses sexual exploitation, labour exploitation, forced criminal exploitation and domestic servitude. To meet its legal duties under Section 43 of the Modern Slavery Act 2015 the Council published on its website its fourth Modern Slavery Transparency Statement in September 2019.

6.24 Sec 26 of the Counter Terrorism and Security Act 2015 placed a new duty upon local authorities to have "due regard to the need to prevent people from being drawn into terrorism." To assist implementation of the duty in section 26 of the Counter-Terrorism and Security Act 2015, a Home Office Prevent eLearning training package is now available. This is introductory training and provides a foundation on which to develop further knowledge around the risks of radicalisation and the roles involved in supporting those at risk. Plans are underway to enable all frontline staff, DSOs and Members to access this training package.

7. Going Forward

7.1 The Council will continue to raise awareness for staff (and highlight its procedures) on key issues including Prevent, modern slavery, CSE (Child Sexual Exploitation), domestic abuse, criminal exploitation (including cuckooing) and hate crime. To do this effectively, the Council will increase its commitment to online training, alongside delivering schemes such as Observers (upskilling CBC and CBH frontline staff to identify and confidently report hidden harms), Spot it Stop It (working with Police and ESCB to deliver CSE awareness to local businesses to prevent children and young people becoming victims of exploitation).

7.2 As Community Safety takes on the operational lead on safeguarding, the Council is in a good position to continue to deepen partnership working with agencies and voluntary organisations, including through the Safer Colchester Partnership, in order to deliver for residents.

8. Strategic Plan References

8.1 The Council's Strategic Plan 2018-21 is a key mechanism through which the Council monitors how it is meeting its equality and safeguarding responsibilities. In particular, it contains the Council's current 'equality objective';

'Making Colchester an even better place to live and supporting those who need most help'.

It is an integral part of the Council's Strategic Plan under its *Wellbeing* theme. Those priorities which particularly help support the Council's Equality Objective are:

- Work with Essex Police and partners in the Safer Colchester Partnership to make Colchester an even safer place

- Targeted support to the most disadvantaged residents and communities

9. Consultation

9.1 The Council's strategic approach in these areas is underpinned by its Strategic Plan for which extensive consultation took place. CBC's People and Performance team led a review of the Strategic Plan Action Plan in February this year, to ensure the organisation is on plan to deliver the key priorities.

10. Publicity Considerations

10.1 The Council's approach to Equality and Safeguarding has the potential to affect everyone who lives, works or visits the borough. It can play a key role in the daily lives of individuals and communities by helping to safeguard vulnerable groups from harm, as well as tackling prejudice and advancing equality of opportunity.

10.2 The Equality Information section on the Council's website continues to provide updated information as required by legislation and guidance, along with related content of use or interest to customers, staff and councillors. The Council's website also includes a section dedicated to Safeguarding children and 'adults with needs for care and support' which contains key information for residents along with links for further information.

11. Financial Implications

11.1 It is important to understand that our obligation to have "due regard" to the three aims of the 'general duty' does not mean that decisions which have a disproportionate impact upon one or more 'protected characteristics' cannot be taken. The Council must nevertheless always seek to remove or reduce negative impacts.

11.2 The Council's approach must continue to be proportionate, with key decisions being given due priority. Equality Impact Assessments must remain an integral part of the decision-making process when addressing changes to policies and practices.

12. Equality, Diversity and Human Rights Implications

12.1 This report is an annual update about Equality, Diversity and Safeguarding, which helps the Council to ensure it meets its duty and protect vulnerable groups.

13. Community Safety and Health and Safety Implications

13.1 The Council's approach to Equality and Safeguarding involves working closely with partners and communities. The Safer Colchester Partnership plays a vital role in helping the Council to meet its legal duties around safeguarding.

13.2 By meeting its Public Sector Equality Duty, the Council will help to ensure that employees do not suffer discrimination, harassment or victimisation. This will in turn create a safer working environment, and one which is consistent with the Council's Health and Safety policies.

14. Risk Management Implications

14.1 As an employer and provider of public services, the Council could face legal challenges from individuals or groups who have been unlawfully discriminated against, however unintended. Legal cases brought on grounds of discrimination do not have upper financial limits like those brought through employment tribunals. The Council must meet its responsibilities to ensure it does not discriminate, and this will also help to avoid the potential for significant financial claims.

14.2 The Council could suffer significant reputational damage should its staff or councillors fail to comply with their Safeguarding responsibilities. This paper details the Council's strategic and operational approach in this area.

15. Appendices

15.1 Appendix A: Key improvements and initiatives 2018-19

15.2 Appendix B: Service Adjustments for Customers

Key improvements and initiatives 2018-19

- The Council distributed over £200,000 of Voluntary Welfare Funding to 'not for profit' organisations to help the Council meet its equality and safeguarding objectives. In 2018-19, the following organisations received funding: Action for Family Carers; Age Concern Colchester; Christians Against Poverty: Debt Advice; Colchester Citizens Advice; Community 360; Colchester Gateway, Colchester and Tendring Women's Refuge; Copford Pits Wood Trust; Signals; Youth Enquiry Service.

- The Community Safety Team has led on several projects including a *Virtual Crew* in order to deliver key community safety messages to nearly 1,000 Year 6 pupils across Colchester. Involving online games and quizzes, the initiative helped to educate and safeguard children around internet safety, gangs and knife crime, antisocial behaviour, drugs and alcohol and hate crime.

- The Community Safety Team also delivered Phase 1 of the Observers Scheme pilot; a scheme to upskill a number of existing frontline staff to become 'champions' in identifying the signs of hidden harms whilst out and about in the community and provide a safe mechanism to report those concerns. To date, 27 frontline staff from both CBC and CBH have become 'champions' and will disseminate the knowledge to respective teams. Phase 2 of the scheme will consist of an eLearning package available to all staff and Councillors.

- The Community Safety Team, working jointly with CBH and Police, have delivered Hate Crime Awareness sessions to 50 members of staff during July 2019. Further sessions will be delivered to staff during Hate Crime Awareness Week in October and again in November. A session will also be available for all Members via Member Development Session in October.

- The Community Enabling Team has worked in partnership with Dementia Friends and the Alzheimer's Society in order to raise awareness and understanding across the Council and community. The team arranged for external Dementia Friend Champions to deliver training sessions to an additional 118 CBC staff and 16 Councillors during May and June this year.

- Colchester Borough Council remains a key member of the Dementia Action Alliance and provides representation at regular meetings. The Council is heavily involved in the project to make Colchester a Dementia Friendly town, which is led by Community360.

- Having earned the status of a National Portfolio Organisation, Colchester and Ipswich Museums Service has gained access to an annual £200,000 boost to funding up to 2022. This has helped it to deliver its aims around increasing equality and diversity in its representation within the three museums, as well as promoting inclusion in the workforce and for visitors. Its Visitor Services Team were winners at the first ever National Visitor Experience Awards, facing competition from the Houses of Parliament and National Museums Liverpool.

- Colchester Museums has engaged closely with Colchester's LGBTQ+ community which has played a key role in the Council's consultation on an exhibition at Hollytrees Museum: We are Colchester. Several objects included in this exhibition relate specifically to gender identity. Colchester Museums had a stall at the Colchester Has Pride event on 18 August 2018, which was also marked by the Pride Flag flying at Colchester Castle and the Town Hall. Colchester Museums and Ipswich Museums (also managed by Colchester Borough

Council) offered ‘relaxed opening’ sessions for people with autism and Ipswich Museums held handling sessions, which were focused on increasing access for Blind and Partially Sighted customers.

- Staff in the CBC Customer Support Team received training sessions from Open Road, on substance misuse which were extremely well received.

- 2018 saw the introduction of a Council-wide Suicide Protocol (on responding to threats or ideas of suicide or self-harm) which included detailed guidance and procedures as well as contact details of dedicated organisations and relevant agencies. The protocol reflects special arrangements agreed between the Council and Essex Partnership University Trust’s (EPUT’s) Access and Assessment Team and is due for review November 2019. In addition, two Designated Safeguarding Officers attended a 2-day Suicide Prevention Course in order to better understand and react to those customers demonstrating suicidal ideation; the info was disseminated to other DSO’s and has led to the agreement that a basic suicide awareness session is required for customer facing roles.

- The criteria for tender in relation to enforcement agents used by the Council’s Payments and Debt Recovery service has included support for vulnerable debtors. These contracts stipulate specialist help and advice to ensure that the right support is offered.

- 2018-19 has been a successful year for the Council in terms of funding acquired for a variety of services. There have been successful bids to the Clinical Commissioning Group (CCG), Essex County Council, Active Essex and Sport England, to explore ways for communities to become more active. Programmes developed within the Colchester pilot will promote increased levels of activity amongst communities, in particular those living in circumstances of deprivation.

- The Licensing and Community Safety Teams, alongside ‘Stop the Traffik’ have delivered safeguarding training to over 700 existing licensed taxi drivers across the Borough during 2019. Safeguarding training for new licensed drivers will be mandatory going forward.

- The Environmental Protection Team continues to subscribe to an air quality forecast service by text which is especially helpful to the elderly, pregnant women, children and babies and those with respiratory issues.
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- The Council has, through Defra grant funding, commenced a project aimed at improving air quality within the Borough. The objectives of the project are to raise awareness of air quality, instil a sense of personal responsibility within the community, then encourage the wide-spread adoption of switching-off engines at junctions, level crossings and when parked up, and encourage walking and cycling for short journeys particularly through the Borough’s Air Quality Management Areas. Poor air quality has several health effects but is believed to be particularly harmful to pregnant women, children and babies and those with respiratory issues.

- The Team continues to work in partnership with the Essex Countywide Travellers Unit to help ensure equal and fair treatment for people within Roma Gypsy and Irish Traveller communities.

- The Council recognises that there are strong links between improving Public Health and meeting its objectives around Equality and Diversity, and Safeguarding. In order to promote supportive conversations with residents and customers about behaviour change, thereby increasing opportunities to promote health and reduce health inequalities.

- Since November 2018, Colchester Leisure World has provided women only swimming sessions on the first Wednesday of every month. In total, 257 women have attended the sessions since they began, seeing an average of 23 women per week enjoying this activity.

- During 2018-19, Language Line Solutions Ltd continued to provide telephone interpreting and translation services to Council staff, with most enquiries coming from Customer Service. Language Line help with core language services, telephone translation and provide alternative format translation such as braille, easy read and large print.

- The Council adopted a guaranteed interview scheme for armed forces veterans during 2018-19, providing reservists or veterans with better access and support to employment. The Council has introduced a work placement scheme to veterans trying to get into sustained employment and for those service personnel being medically discharged from service.

- In August 2019 the Council was awarded a Defence Employer recognition scheme Gold Award, one of only 11 awarded in East Anglia, showing the Councils commitment to support the armed forces community in Colchester.

Service Adjustments for Customers

WEBSITE

- Colchester Borough Council's website is BrowseAloud enabled which means that you can have information on the site read aloud to you for free on a Smartphone, Tablet, PC or Mac.
- BrowseAloud is a suite of products that provides website reading support, highlighting each word as it is spoken in a high quality, human-sounding voice.

BRAILLE

The Council will always consider requests for letters or documents to be produced in Braille.

ELECTIONS

The Council's Elections Team provides the following adjustments at all elections:

- Tactile Template Devices
- Large versions of the printed ballot paper
- A magnifying glass

RUBBISH AND RECYCLING

The recycling calendar is available as a PDF and audio version, both of which are downloadable from the website

LEISURE WORLD

Guide Dogs are welcome at Leisure world on Cowdray Avenue. Officers will be happy to walk sight impaired customers to where they need to go for their activity. Leisure World also offers:

- Phoenix Disability Swimming Club - Various sports hall-based activities for people with a range of disabilities including sensory.
- Endeavour is an activity session on Friday afternoons that offers *adults* with disabilities access to a range of sports.
- Private Hire Ladies and men only Leisure Pool (e.g. Jewish religious groups)
- Sport for Confidence
- LEAP GP Referrals
- Dementia Friendly Activities
- Aqua Bump (aquatic classes for Pregnant Mums)
- Water Mobility Classes

Colchester+Ipswich Museums	**COLCHESTER & IPSWICH MUSEUMS** The museum website has information on accessing facilities in the Visit Section. (Select 'Making a Visit' and scroll down to the section on 'Facilities and Accessibility'.) • Colchester's Natural History Museum has a number of tactile displays. The redevelopment of the Castle included a variety of adjustments for Blind or visually impaired visitors. • Colchester Castle offers tactile mapping and audio description options. Audio descriptive guides are free to borrow from reception. There are 'audio wands' available to aid touring the museum. 'RNIB' style maps are provided for visitor orientation. All hands-on interactives have 'raised text' and level 1 Braille instructions. • Hollytrees Museum in Ipswich offers items for handling and there are several audio interpretation points around the museum. • Castle Park includes a sensory garden which includes features specifically designed for the visually impaired. It can be found next to the Wetzlar 'formal' Garden which is near Hollytrees. Customers can ask a Park Warden to help locate it. The Sensory Garden "…has been designed so that the flowers and plants provide colour and smell stimulation. This has been complimented by adding mosaics to the floor and sides of the raised beds to stimulate touch."
PARKING PARTNERSHIP	**PARKING PARTNERSHIP** NEPP offices will be happy to complete a permit application or type a challenge (to a parking notice) on a customer's behalf.
WE ARE MACMILLAN. CANCER SUPPORT	**MACMILLAN WELFARE RIGHTS** The team will be happy to order Macmillan information leaflets in a larger font as required.
	DISABLED FACILITY GRANTS Colchester Borough Council provides *Disabled Facilities Grants* in order to help sustain independent living. In addition, we administer *Disabled Facilities Assistance Loans* to assist households with works that do not fall within the scope of the mandatory Grant.

Colchester	**Governance and Audit Committee**	**Item 9**
	29 October 2019	

Report of	**Assistant Director of Policy and Corporate**	**Author**	**Carl Free** ☏ **506579**
Title	**Health and Safety Policy and Report 2019/20**		
Wards affected	N/A		

1. Executive Summary

1.1 Colchester Borough Council has general duties under the Health and Safety at Work etc. Act 1974 and specific duties under the Management of Health and Safety at Work Regulations 1999, to ensure that employees, and others who may be affected, can work safely without risk to their safety or health.

1.2 Overall responsibility for Health and Safety rests with Cabinet but is overseen by the Chief Operating Officer and managed by the Corporate Health and Safety Officer and Designated Officers within services, who form the Health and Safety Committee.

2. Recommended Decision

2.1 To note the January to October 2019 annual report and agree the changes to the Health and Safety Policy which are required for 2019/20.

3. Reason for Recommended Decision

3.1 The Health and Safety Policy is included in the Council's Policy Framework and is an integral part of the risk management process. As such it is appropriate to provide an annual report to the Governance and Audit Committee, to assist with the Committee's responsibility for reviewing the effectiveness of risk management.

4. Background Information

Health and Safety Policy

4.1 The Health and Safety policy sets out the Council's commitment to managing health and safety risks, organisation structure and the individual responsibilities, at all levels of the organisation. The only changes to the policy in 2019 are minor (moving responsibilities from Strategic Director to Chief Operating Officer now responsible for health and safety and removing Commercial department (now CCHL/Amphora) from the Organisation Structure).

4.2 The policy is supported by a set of arrangements that detail what the Council will do in practice to achieve the aims set out in the health and safety policy and to successfully manage health and safety.

5. Summary of Policy outcomes during January - October 2019

5.1 Audits of services and arrangements have been continued by the Corporate Health & Safety Officer during 2019. At the time of writing, audits and reviews are in progress for Ill Health (focusing on Musculoskeletal Disorders and Stress), Driving at Work and

Security (to prevent work-related violence towards staff). As these are broad and complex subjects, longer term action plans have been produced, however if serious risk or breaches are identified these are actioned without delay, and where possible ‘easy win’ immediate actions.

5.2 The Skyguard MySOS personal monitoring device remains in place as the corporate approach to supporting lone workers, with 50 devices and approximately 90 CBC lone workers. Skyguard devices are received well by lone workers and a review will be completed in 2020 to ensure the system remains suitable and is being used appropriately, and that lone worker requirements are met in all services.

5.3 The internal audit of health and safety at Colchester Borough Council provided an opinion of “Substantial Assurance” in 2018 and is on a biennial cycle so therefore is to next be completed in 2020.

5.4 Fire Risk Assessments for all corporate buildings (primarily used as CBC staff workplaces) were re-inspected in 2019 and no findings or recommendations were identified at a high-risk rating.

5.5 Near miss reporting continues to be encouraged as this helps management resolve concerns or issues before they become an incident and/or injury. The near miss report card has been successful in obtaining reports at Shrub End.

5.6 Corporate Health and Safety training continues to be well attended with approximately 240 staff trained this year so far and the courses delivered include:

- IOSH Managing Safely
- Managing Safely
- Manual Handling
- Conflict Management
- Emergency First Aid at Work
- Safe Use of Ladders and Stepladders Training
- Health and Safety Induction

5.7 At least six days’ worth of Practical Manual Handling training has been organised for the Neighbourhood Services Waste & Recycling collection teams. This was identified as a need for refresher training as part of the ill health review and higher manual handling risks involved in bag collection instead of wheeled bins. Train the trainer will also be arranged to ensure new staff can be trained without delay and regular refreshers and toolbox talks delivered.

5.8 There has been a positive downward trend in incidents involving serious injuries to staff or members of public taken to hospital for treatment, which are notifiable to the Health and Safety Executive often referred as “RIDDOR reports”. These have reduced so far this year to 2, from 4 in 2018 and 7 in 2017.

5.9 People & Performance and Corporate Health and Safety, with the Live Well / Work Well (Wellbeing) Group, are working together on Stress Management and Mental Health, anticipated to be included as priorities in the corporate vision and wellbeing strategy, and delivering mental health awareness training for staff. A stress indicator survey will also be sent to all staff to help us identify the sources of work-related stress within the organisation, so resources can be focused to help eliminate or reduce the main factors of stress, reduce sickness absence and improve staff wellbeing.

6. Equality, Diversity and Human Rights implications

6.1 Equality Impact Assessment (EIA) link

7. Standard References

7.1 There are no particular references to publicity considerations or financial; community safety; health and safety or risk management implications.

7. Strategic Plan References

7.1 The failure to adequately identify and manage health and safety issues will affect the ability of the Council to achieve its strategic objectives.

8. Consultation

8.1 Details of consultation are included in the Document Information section of the policy.

9. Publicity Considerations

9.1 None

10. Financial implications

10.1 None

11. Health, Wellbeing and Community Safety Implications

11.1 None

12. Health and Safety Implications

12.1 The failure to adequately identify and manage health and safety issues may have an effect on the ability of the Council to deliver effective services.

13. Risk Management Implications

13.1 The failure to adequately identify and manage health and safety issues may have an effect on the ability of the Council to deliver effective services.

14. Appendices

14.1 Appendix A: Health and Safety Policy 2019-20

14.2 Appendix B: Health and Safety Arrangements

Colchester

Health and Safety Policy 2019/20

October 2019

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1. INTRODUCTION

This policy sets out our commitment to the health, safety and wellbeing of those working for Colchester Borough Council and anyone else who interacts with the services that we provide.

As an employer, we are aware of our general duties under the Health and Safety at Work etc. Act 1974 and our specific duties under the Management of Health and Safety at Work Regulations 1999. Where additional legislation relates to the activities that we are carrying out we will also ensure that our duties are fulfilled and our employees and others who may be affected can work safely without risk to their safety or health.

We will monitor and review this policy and associated documentation as necessary, at least every three years, unless any significant changes occur in the meantime.

"Colchester Borough Council is committed to the health, safety and wellbeing of its employees, customers and anyone who interacts with our services. We strive to create an environment in which our employees feel that their health, safety and wellbeing is integral to the organisation. We encourage everyone to be part of this positive culture so that we can continue to improve our standards throughout the organisation."

2. STATEMENT

Colchester Borough Council is fully committed to complying with its statutory duties under the Health and Safety at Work etc. Act 1974 and associated legislation. The Council values the health, safety and wellbeing of its employees and will take all reasonably practicable measures to ensure a safe and healthy working environment for all employees, contractors, the public and others that may be affected by its activities.

The Council recognises that good health, safety and wellbeing is integral to our organisational and business performance and our service delivery decisions will always consider the impact on health, safety and wellbeing. This will help to deliver the Council's philosophy of a positive safety culture.

The Council will maintain an appropriate health and safety management system and organisation structure to support its statutory duties. We will:

- Assess risks and put adequate control measures in place
- Consult with employees on matters affecting their health and safety
- Provide and maintain a safe place of work with safe plant, equipment and personal protective equipment
- Ensure safe use, handling and storage of substances
- Provide information, instruction, training and supervision for employees to ensure that they are competent to carry out their tasks
- Prevent incidents, injuries and cases of work-related ill-health
- Maintain safe and healthy working conditions

All employees are required to follow this health and safety policy at all times and adhere to their own statutory requirements. We encourage any comments over health and safety in the workplace and will actively seek to rectify any areas of concern.

All contractors and others employed by Colchester Borough Council to perform work or provide service are required to maintain health and safety standards in accordance with this policy.

The effectiveness of this policy will be monitored and reviewed as necessary, at least every three years or when circumstances otherwise dictate.

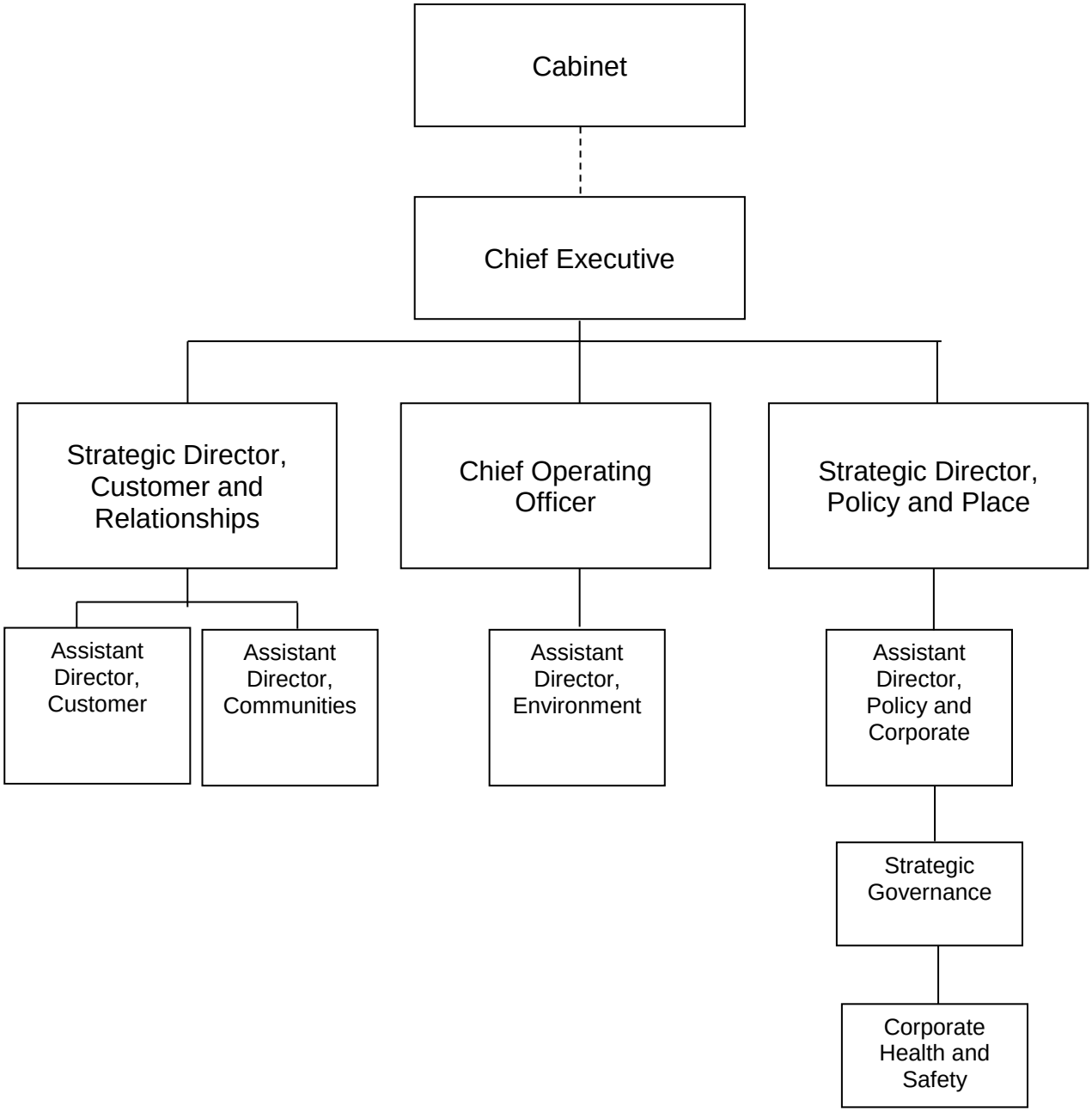
Councillor Mark Cory
Leader of the Council

Adrian Pritchard
Chief Executive

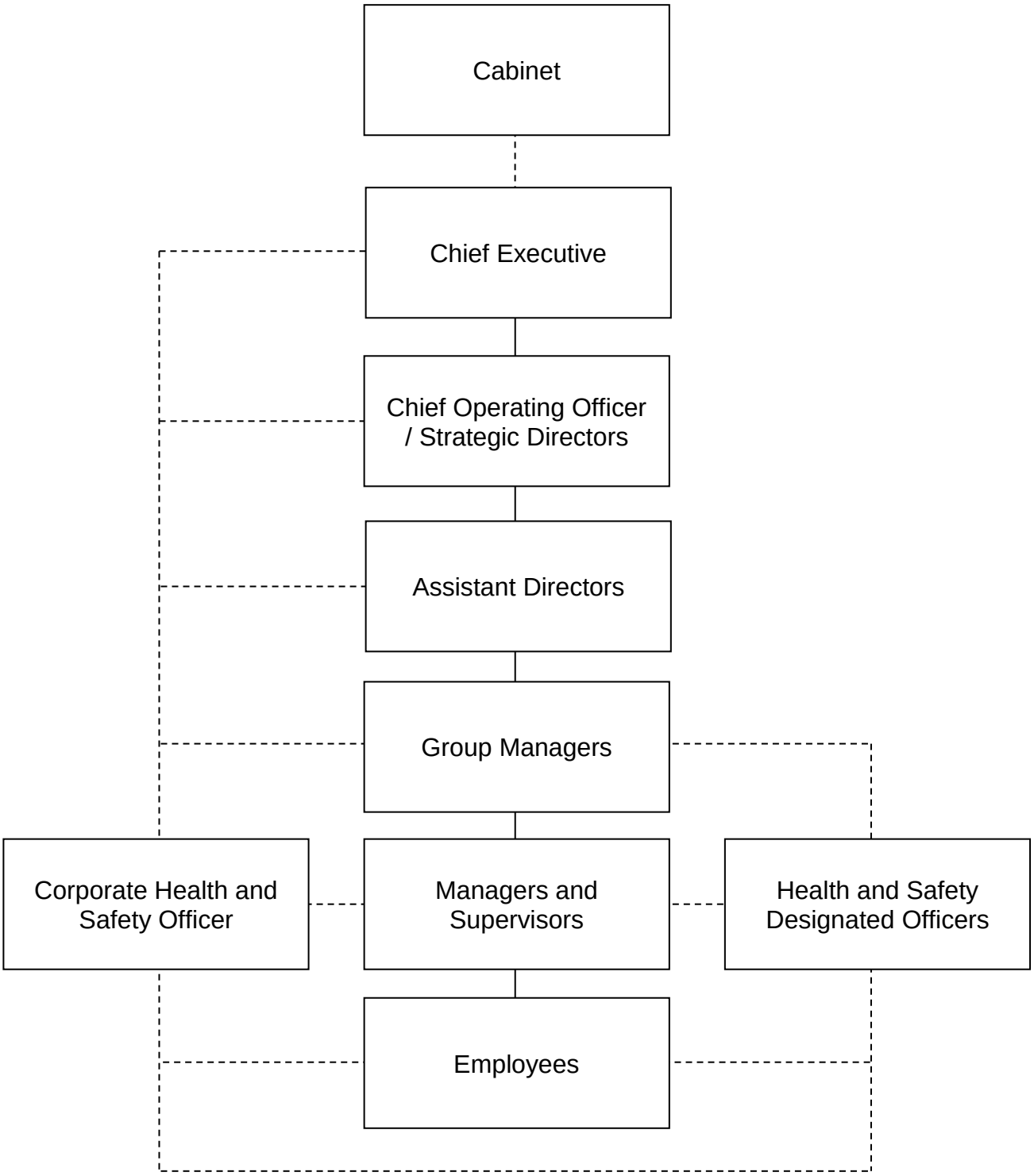
13 June 2018

3. ORGANISATION

3.1 Organisation Structure



3.2 Organisation Health and Safety Responsibilities



4. RESPONSIBILITIES

4.0 Leader of the Council and Cabinet

The Leader of the Council has the responsibility for the management and monitoring of health and safety provision across the whole of the Council's undertakings. Cabinet are jointly and severally the primary duty holders for health and safety across the Council's undertakings.

1. Ensure that adequate financial and other resources are provided, so that the health and safety policy can achieve its aims.

2. Give due regard to requests from the Chief Executive for financial and other resources to meet statutory duties and other obligations regarding health and safety management.

3. Ensure that the Chief Executive has in place an effective health and safety policy and management system, which will ensure that all health and safety hazards and risks within the Council are adequately controlled.

4. Require the Chief Executive to be able to confirm, during the reporting period; health and safety performance, any major incidents or failure in the health and safety management system, accident history and key improvements to health and safety that have been implemented.

4.1 Chief Executive

1. Overall responsibility for health and safety throughout the Council.
2. Support other duty holders to fulfil their health and safety responsibilities.
3. Preparation of an effective health and safety policy statement, organisation for carrying out that policy, measures for ensuring that it is implemented and communicated to all employees.
4. Ensure that this health and safety policy is reviewed, at least every three years or when circumstances otherwise dictate.
5. Ensure that health and safety is given an appropriately high priority and is not compromised, so putting employees or other persons at risk to their health and safety.
6. Ensure that the Executive Directors are aware of the health and safety policy and understand their responsibilities for effective health and safety management.
7. Ensure that the Executive Directors implement the policy through effective local arrangements and suitable monitoring arrangements.
8. Ensure that adequate financial and other resources are available to meet statutory duties and requirements of this health and safety policy.
9. Ensure that the Council has appointed a competent Corporate Health and Safety Officer for the purpose of advising on meeting its statutory duties and for advising and monitoring on health and safety.
10. Fulfil the responsibilities of the Executive Directors if services are under their direct management.
11. Set a personal example at all times with respect to health and safety.

4.2 Chief Operating Officer (with Responsibility for Health and Safety)

1. Support other duty holders to fulfil their health and safety responsibilities.
2. Accountable to the Chief Executive for health and safety within all Services.
3. Ensure that their Assistant Directors are aware of the health and safety policy and understand their responsibilities for effective health and safety management.
4. Provide leadership on health and safety and support and promote continuous improvement programmes.
5. Lead the provision and function of the health and safety committee.
6. Monitor health and safety performance at Executive Management Team through quarterly updates, an annual review and ensuring health and safety is an agenda item.
7. Ensure that there is sufficient financial or other resource for effective health and safety management and identify any short falls in resources that may negatively impact health and safety.
8. Provide support to the Corporate Health and Safety Officer and Health and Safety Designated Officers.
9. Ensure that if any serious health and safety occurrence or failure in health and safety occurs, the relevant person/s are held accountable for any deficiency in fulfilling their responsibilities under the health and safety policy and will be required to demonstrate to the Executive Management Team, remedial actions have been implemented to prevent a similar reoccurrence.
10. Set a personal example at all times with respect to health and safety.

4.3 Strategic Directors

1. Support other duty holders to fulfil their health and safety responsibilities.
2. Accountable to the Chief Executive for health and safety within their Services.
3. Ensure that their Assistant Directors are aware of the health and safety policy and understand their responsibilities for effective health and safety management.
4. Support and promote health and safety continuous improvement programmes.
5. Support the provision and function of the health and safety committee.
6. Monitor health and safety performance at Executive Management Team through quarterly updates, an annual review and ensuring health and safety is an agenda item.
7. Ensure that there is sufficient financial or other resource for effective health and safety management and identify any short falls in resources that may impact health and safety.
8. Ensure that if any serious health and safety occurrence or failure in health and safety occurs, the relevant person/s are held accountable for any deficiency in fulfilling their responsibilities under the health and safety policy and will be required to demonstrate to the Executive Management Team, remedial actions have been implemented to prevent a similar reoccurrence.
9. Set a personal example at all times with respect to health and safety.

4.4 Assistant Directors

1. Support other duty holders to fulfil their health and safety responsibilities.
2. Accountable to the Chief Operating Officer or Strategic Director for health and safety within their Services.
3. Ensure that their Group Managers are aware of the health and safety policy and understand their responsibilities for effective health and safety management.
4. Support the development, modification and delivery of a health and safety management system and ensure local process compliance.
5. Support and promote health and safety continuous improvement programmes.
6. Monitor and review health and safety processes and performance in their Services, and include appropriate health and safety actions within relevant strategies and business plans.
7. Ensure that there is sufficient financial or other resource for effective health and safety management and identify any short falls in resources that may impact health and safety.
8. Identify health and safety training needs for their Service and ensure this follows the health and safety training matrix and is in line with the Council and legislative requirements.
9. Ensure that their Group Managers have suitable and sufficient risk assessments in place to eliminate or control and reduce risks to acceptable levels including those required under relevant statutory provisions and ensure these are supported by method statements where required.
10. Ensure that for any premises under their direct control and management, adequate arrangements are in place for fire safety management and supported by a suitable and sufficient fire risk assessment completed by a competent person.
11. Ensure there is a process to employ competent contractors with the correct skills, knowledge, attitude, training and experience.
12. Ensure that all materials, plant, vehicles, equipment and personal protective equipment procured for use comply with legislation, commercial and any other specific standards which ensure that it is safe and without risk to health when used correctly.
13. Support the carrying out of regular health and safety audits and inspections and ensure the outcomes of these are completed within the agreed timescales.
14. Ensure that if any serious health and safety occurrence or failure in health and safety occurs, the relevant person/s are held accountable for any deficiency in fulfilling their responsibilities under the health and safety policy and will be required to demonstrate to the Executive Management Team, remedial actions have been implemented to prevent a similar reoccurrence.
15. Set a personal example at all times with respect to health and safety.

4.5 Group Managers

1. Support other duty holders to fulfil their health and safety responsibilities.
2. Accountable to the Assistant Directors for health and safety within their Services.
3. Ensure that their Managers and Supervisors are aware of the health and safety policy and understand their responsibilities for effective health and safety management.
4. Ensure compliance with the local health and safety management system by assigning levels of responsibility to relevant competent persons as required.
5. Support and promote health and safety continuous improvement programmes.
6. Monitor and review health and safety processes and performance in their areas of remit and ensure regular health and safety audits and inspections are carried out and outcomes of these are completed within the agreed timescales.
7. Ensure suitable and sufficient risk assessments are in place to eliminate or control and reduce risks to acceptable levels including those required under relevant statutory provisions and ensure these are supported by method statements where required.
8. Ensure that all accidents, incidents and near misses that are work-related or happen on council premises are reported using the online incident report form as soon as possible and no more than 5 days after the accident or incident and an appropriate investigation takes place promptly with remedial actions implemented to prevent a similar occurrence.
9. Ensure that all employees within their group have appropriate information, instruction and training that follows the health and safety training matrix and is in line with the Council and legislative requirements.
10. Ensure that competent contractors with the correct skills, knowledge, attitude, training and experience are employed.
11. Set a personal example at all times with respect to health and safety.

The following may also apply, depending on their specific responsibilities:

12. Ensure that for any premises under their direct control and management, adequate arrangements are in place for fire safety management and supported by a suitable and sufficient fire risk assessment completed by a competent person.
13. Ensure that workplace welfare, housekeeping and general safety requirements are effectively managed.

14. Ensure that all materials, plant, vehicles, equipment and personal protective equipment procured for use comply with legislation, commercial and any other specific standards which ensure that it is safe and without risk to health when used correctly.

15. Ensure that all plant, vehicles and equipment is adequately maintained and subjected to statutory examinations where appropriate and relevant records are kept.

16. Ensure that all employees within their group are provided with the correct level of personal protective equipment as identified by risk assessments and that it is maintained or replaced when necessary.

17. Ensure that arrangements are implemented in respect to the requirements of the Construction (Design and Management) Regulations 2015.

18. Ensure health and safety is considered during tender of new contracts and contractors employed are competent with suitable health and safety arrangements in place. Monitor and review contractors' health and safety processes and performance.

4.6 Managers and Supervisors

1. Support other duty holders to fulfil their health and safety responsibilities.
2. Accountable to their Group Manager for health and safety within their Services.
3. Read, understand and implement the requirements of the health and safety policy and health and safety management system.
4. Support and promote health and safety continuous improvement programmes and regularly communicate with employees on health and safety issues.
5. Monitor and review health and safety processes and performance in their areas, teams and premises and ensure regular health and safety audits and inspections are carried out and outcomes of these are completed within the agreed timescales.
6. Ensure that the requirements of risk assessments and method statements are implemented, in place during work and communicated to all employees within their team.
7. Ensure that all employees within their group have appropriate information, instruction and training that follows the health and safety training matrix and is in line with Council and legislative requirements.
8. Not to put any person at an unacceptable risk during the course of work and stop work where any new hazards are identified until the risk has been assessed and controlled and if required reduced to an acceptable level.
9. Ensure that all plant, vehicles and equipment are adequately maintained so it is safe for use and any defective plant, vehicles and equipment is withdraw from use immediately.
10. Ensure that all employees within their team have the correct level of personal protective equipment as identified by risk assessments and that it is maintained or replaced when necessary.
11. Receive, review and remedy any concerns in respect to health and safety. When concerns cannot be resolved at a local level, they shall be referred to the Group Manager and if still unresolved to the Corporate Health and Safety Officer.

4.7 Corporate Health and Safety Officer

1. Support other duty holders to fulfil their health and safety responsibilities.
2. Review, develop and communicate the health and safety policy and management system in conjunction with other responsible duty holders.
3. Provide competent advice in relation to all health and safety matters and ensure duty holders are kept up-to-date on all relevant health and safety issues.
4. Ensure own competence is maintained through continual professional development.
5. Identify key health and safety training needs and advise on methods of implementation and delivery.
6. Provide a pro-active resource for the development and delivery of health and safety inspections and audits on an agreed programme basis.
7. Provide a reactive resource for the reporting, recording and investigating of accidents and incidents and provide statistical information to the health and safety committee.
8. Provide corporate safety initiatives and ensure there is a continual improvement programme for effective health and safety management and advise on the implementation of programmes.
9. Attend health and safety committee meetings and other relevant health and safety groups and provide guidance and advice where required.
10. Review the performance of health and safety within the Council as a whole, in conjunction with the Executive Management Team.
11. Provide a report to the Executive Management Team on a regular basis which details health and safety performance and update the Executive Director with health and safety responsibilities on all significant health and safety matters.
12. Ensure there is a continual improvement programme for effective health and safety management.
13. Provide a useful and relevant information service, with documents to assist others with their duties and ensure information is updated on a regular basis.
14. Communicate with and provide support, direction and guidance to Health and Safety Designated Officers and ensure they provide support on health and safety matters to duty holders within their area of remit in accordance with their responsibilities.
15. Support duty holders with enforcement agency requests for information, visits and inspections and if required, be the primary point of communication with relevant enforcement agencies.
16. Set a personal example at all times with respect to health and safety.

4.8 Designated Officers for Health and Safety

1. Support other duty holders within their areas of remit to fulfil their health and safety responsibilities.
2. Read, understand and implement requirements of the health and safety policy and health and safety management system.
3. Be the initial point of contact for health and safety guidance to colleagues and managers in their service area and refer to the Corporate Health and Safety Officer for advice and guidance as appropriate.
4. Support and promote health and safety continuous improvement programmes and regularly communicate with employees on health and safety issues, encouraging suggestions for improvement from colleagues and encourage them to report any health and safety concerns.
5. Attend all health and safety committee meetings or ensure that a suitable deputy attends if unavailable and prepare a report as required.
6. Support other duty holders ensuring that all employees within their responsibility have appropriate information, instruction and training that follows the health and safety training matrix and is in line with legislation.
7. Carry out health and safety review and monitoring as agreed with the Corporate Health and Safety Officer and ensure regular health and safety audits and inspections are carried out and outcomes of these are completed within the agreed timescales.
8. Set a personal example at all times and act as an ambassador with respect to health and safety.

Managers, at all levels, are responsible for the health and safety of their team - this cannot be delegated. However the Designated Officers can support and assist Managers with meeting their obligations.

4.9 Employees

1. Support other duty holders to fulfil their health and safety responsibilities.
2. Read, understand and comply with the requirements of the health and safety policy and health and safety management system.
3. Take reasonable care of the health and safety of themselves and others who may be affected by their acts and or omissions.
4. Work safely at all times, in accordance with the information, instruction, training, risk assessments and method statements provided.
5. Use the correct plant, vehicles, equipment and materials for tasks and keep them in good condition and never use anything for which it is not intended or they are not trained or competent to use.
6. Comply with all safety control measures appropriately, including any personal protective equipment issued and never intentionally or recklessly interfere with or misuse anything provided in the interest of health and safety.
7. Attend and participate in all training provided in the interest of health and safety.
8. Report immediately to their Manager or Supervisor any accidents, incidents, verbal abuse, near misses, occupational diseases and health and safety concerns, including defects to personal protective equipment, plant, vehicle, equipment and material, and any hazards or risks believed to be inadequately controlled.
9. Set a personal example at all times with respect to health and safety.

5. DOCUMENT INFORMATION

Title:	Health and Safety Policy
Status:	Final
Version:	9 - October 2019
Consultation:	SMT, Health and Safety Committee, and Unison
Approved By:	SMT and Governance and Audit Committee
Approval Date:	October 2019
EQIA:	Yes - link
Review Frequency:	Annually or if change occurs (and a comprehensive review every three years)
Next Comprehensive Review:	October 2020

5.1 Document Control

Date	Version	Description	Sections Affected	Approved by
September 2015	1	Initial draft	All	
April 2016	2	Updated draft. Moved arrangements to separate document.	All except 1 and 2	
June 2016	3	Updated following SMT meeting.	4.0 and 4.9	SMT
July 2016	4	Final draft version - Signatures added	2	Leader of Council and Chief Executive
August 2016	5	Minor amendments following Unison consultation. Final version.	2, 4.1, 4.3, 4.4, 4.5,	Unison and Executive Director
October 2016	6	Review and endorse the revised Health and Safety policy for 2016/17.	All	Governance and Audit Committee
October 2017	7	Annual review. Organisation structure and job titles updated. Minor amendments to improve comprehension.	All	Corporate Health and Safety Officer
June 2018	8	Updated statement with new leader's signature to approve commitment. Updated structure to include Commercial.	2, 3.1	Corporate Health and Safety Officer, and Leader of Council and Chief Executive
October 2018	8.1	Approved Policy for 2018/19	None	Governance and Audit Committee

October 2019	9	Approved Policy for 2019/20	3.1, 4.2	Governance and Audit Committee

Health and Safety Arrangements

These health and safety arrangements detail what the Council will do in practice to achieve the aims set out in the health and safety policy and how we will eliminate or reduce the risks of hazards.

This document will assist managers fulfil their responsibilities set out in the health and safety policy by identifying key elements and providing guidance for practical management of health and safety.

Statutory requirements, Council requirements and industry best practice are identified within the arrangements; however these may not be exhaustive and only provide a generic guide to health and safety. Every service, location and activity is different so must be adapted to the relevant circumstances and additional risks and controls must be considered.

Further information on most health and safety topics can be found on the Council intranet:
Staff Handbook – Health and Safety Overview (Policy, Arrangements and Management System)
Staff Toolkit – Health and Safety (Information, Guidance, Forms, etc.)

Carl Free, the Corporate Health and Safety Officer can be contacted for further health and safety advice on: 01206 506579 or carl.free@colchester.gov.uk

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1 Audit & Review

1.1 Audit

An audit is a structured and objective process of collecting information in order to assess whether the system for safety management is working effectively.

Audits of services or arrangements are completed quarterly where possible by the Corporate Health and Safety Officer. In addition, quarterly inspections of all council corporate workplaces are completed by Designated Officers or responsible persons. An action plan is then produced and handed to the relevant managers. Reports on audits and inspections are presented at the health and safety committee and within the annual and half yearly health and safety report presented at SMT.

1.2 Review

Reviews are necessary to ensure that policies and procedures are kept up to date. We review these whenever any of the following circumstances occur:

- Changes in legislation
- Changes to work processes
- On the introduction of new equipment
- Where there are changes to personnel
- After an incident

If none of the above occur, then all policies and procedures are reviewed and updated on an annual basis.

3 Employee Consultation

Colchester Borough Council recognises its duties under The Health and Safety (Consultation with Employees) Regulations 1996 and the Safety Representatives and Safety Committees Regulations 1977.

It is the policy of Colchester Borough Council to consult with all employees over health and safety matters. We will provide all new employees with a copy of this Health and Safety Policy during their induction and publish it on the staff intranet known as 'COLIN'.

There is a health and safety committee within the Council which sits on a quarterly basis and is attended by staff and union representatives. Information is then disseminated to staff through the Designated Officers for Health and Safety. In addition, committee minutes are published online.

If we intend to make any changes to processes, procedures or equipment that may affect the health and safety of employees and contractors, we will consult with them before doing so.

We operate an open door policy with regards to reporting any concerns or suggestions for improvement and actively encourage this within the Council. Where an employee has made a comment regarding the health and safety of the company, the Health and Safety Officer will investigate and action accordingly.

4 Employee Welfare

4.1 Facilities

The Workplace (Health, Safety and Welfare) Regulations 1992 require that suitable welfare facilities are in place for employees. We provide and maintain the following for our staff:

- Toilets with hand washing facilities that have running hot/warm water
- Canteen areas with rest facilities and a means of preparing food
- Storage facilities for belongings where practicable.
- A supply of wholesome drinking water

Local arrangements are detailed during initial inductions to the Council.

4.2 Drug and Alcohol Policy

We are committed to providing a safe and healthy working environment for our staff and others. If staff are prescribed medication that may affect their ability to work safely, they should report this to their Manager. The Council's Drug and Alcohol Policy is under review. Additional information is provided in the Disciplinary Rules and Procedures.

4.3 Smoking

We prohibit smoking in all workplaces including company vehicles. More information is contained in the Smoking Policy. Local arrangements are explained by managers as part of the corporate health and safety induction.

4.4 Occupational Stress

We recognise that workplace stress is a health and safety issue and acknowledge the importance of identifying and reducing workplace stress. We will monitor the workload and working hours of employees to ensure that they do not become overloaded.

We encourage all employees to discuss any issues that are concerning them. The Council has a Stress Policy and all employees are encouraged to report any concerns of stress.

There is information for Managers on COLIN which can help them to identify signs of occupational stress so that they can act accordingly.

The Council runs an Employee Assistance Programme through Workplace Options who offer personal support and advice on wellbeing, family matters, relationships, debt management, workplace issues, consumer rights etc. All employees are encouraged to use this service which is free of charge.

4.5 Violence, Discrimination and Harassment

Workplace violence is defined as verbal and physical abuse, including threatening behaviour and assault. This can occur amongst staff or between staff and customers. The Council has a Bullying and Harassment Policy.

The Council condemns all forms of discrimination and harassment and will not tolerate such acts. Disciplinary action will be taken should this occur within the workplace and all concerns should be reported immediately to Managers or Supervisors.

Due to the work carried out, we recognise that employees may at times encounter members of the public who act aggressively towards them. Whilst we take precautions and train our staff to diffuse these situations, unfortunately, they can occur. If a potentially violent incident occurs we ask employees to complete our electronic incident report form so that we can monitor and investigate such incidents accordingly. Once investigated, the manager will then ensure that a suitable resolution is implemented in order to support the member of staff concerned.

We also operate a Cautionary Contact Register (CCR) which contains the details of all members of the public who have behaved in a threatening manner towards Council employees. If employees encounter an individual who behaves in such a manner, they are advised to complete a Cautionary Contact Incident Report Form. This form is then reviewed by the CCR panel to decide whether details of the individual concerned should be entered onto the CCR following a process as described in the CCR Policy.

4.6 Lone Working

Lone working is discouraged wherever possible, but due to the services we carry out, we recognise that this is not always avoidable. As we have many employees who work alone, we operate a lone worker personal monitoring alarm system called 'Skyguard'.

Services with employees who lone work must complete a risk assessment to identify the hazards and risks to lone workers and remove or reduce the risks to a suitable level through appropriate control measures.

Employees are encouraged to be aware, trust their instincts, not ignore warnings, be alert, confident and keep fit, to aid self-protection.

Any physical assault or verbal abuse (above an individual's threshold) to employees must be reported using the online incident reporting form and an investigation carried out by the manager.

As part of the reporting process, the perpetrator can be nominated by the investigating manager for inclusion on the Cautionary Contact Register (CCR).

Further information and guidance is available on the Intranet.

4.7 Personal Protective Equipment

Where a risk assessment has identified that PPE is necessary as the last resort to further control an identified hazard, this will be provided free of charge to all employees.

PPE supplied must comply with the new PPE Regulation 2016/425, and it should have: the relevant EU Type Examination Certification, a Declaration of Conformity, the user instructions supplied in the correct language, CE marked, or a 'BSI Kitemark' which demonstrates that it was tested to and meets a 'published standard'.

Managers must ensure that suitable PPE is provided to all staff members who require it, and that the person knows how to use and store this correctly as well as the procedure for reporting defects.

Once defects are reported, the Manager must ensure that PPE is repaired or replaced before the employee requires it again.

Employees are reminded to use all PPE as instructed and not to interfere with any provisions that have been made with respect to health and safety.

4.8 Workplace Temperature and Extreme Weather

During working hours, the temperature in all workplaces inside buildings shall be reasonable, which depends on work activity and the environmental conditions, however should be at least 16°C, or 13°C if much of the work involves rigorous physical effort.

There is no maximum temperature in the workplace, however the thermal environment should satisfy the majority of people in the workplace and provide thermal comfort (generally between 13°C and 30°C with acceptable temperatures for more strenuous work activities concentrated towards the bottom end of the range, and more sedentary activities towards the higher end).

If thermal discomfort is a risk, and employees are complaining and/or reporting illnesses that may be caused by the thermal environment, managers will review and implement appropriate controls to manage the risks.

Upon heatwave alert from Public Health England (temperatures of 30°C during the day and 15°C at night) additional controls must be considered by managers;

- Reschedule work so staff can stay out of the sun 11am to 3pm (ensuring an 11 hour break between working days)
- Provide more frequent rest breaks and introduce shading to rest and working areas or cooler facilities inside
- Provide specialised personal protective equipment designed for use in heat and/or encourage the removal of personal protective equipment when safe to do so or resting to help encourage heat loss
- Remind staff about recognising the early symptoms of heat stress and how to reduce the risk
- Identify staff who are more susceptible to heat stress (due to an illness, condition, pregnancy, or medication)
- Monitor the health of staff at risk and measure heat stress

Outdoor workers could be at risk of too much sunlight which is harmful to skin, it can cause skin damage including sunburn, blistering and skin ageing and in the long term can lead to an increased risk of skin cancer. Sunscreen and guidance will be provided to staff at risk.

Risk Assessments will include controls for the risk and effects of extreme weather to outdoor workers. The Corporate Health and Safety Officer (in liaison with the Resilience Officer and First Call Officer) will further advise managers in situations of widespread or long term extreme weather.

5 Risk Control

5.1 Risk Assessment

Risk assessments are completed for all reasonably foreseeable risks that may cause harm to staff and anyone else who may be affected by their services and activities.

Managers should record these on the risk assessment template and can use the generic/model risk assessments on the intranet as appropriate, which are then made specific for their particular situation, hazards and risks.

Appropriate control measures are put in place to reduce risks as far as reasonably practicable, using the generally accepted hierarchy of control: Eliminate, Reduce, Isolate, Control, Personal Protective Equipment or Discipline (information, instruction, training and supervision).

Managers complete a Control of Substances Hazardous to Health (COSHH) assessment for all hazardous substances found in the workplace, using the COSHH assessment template available on the intranet.

Fire Risk Assessments are completed for Council corporate/operational workplaces (where staff are located or primarily used for Council business).

Risks assessments must be up to date, and are reviewed regularly, or if there is new equipment, substances and procedures that could lead to new hazards. Managers also review risk assessments if there have been any significant changes, there are improvements still to be made, if workers have reported concerns or accidents and near misses have occurred.

Relevant risk assessments are communicated to staff during their induction, and when any significant changes have been made.

5.2 Hot Work Permits

A 'Hot Work Permit' is required for any temporary hot work operation involving open flame or producing heat and/or sparks. This includes but is not limited to welding (gas or electric arc), cutting (gas or electric arc), brazing and grinding. The requirement for a permit applies equally to staff and to contractors.

Permits are only granted by an authorised person (Corporate Health and Safety Officer, Health and Safety Designated Officer or Facilities Responsible Person) after they are satisfied the appropriate arrangements are in place to minimise the risk of fire where the work is to be carried out and cancelled once there is no longer a risk of fire.

The necessary precautions are described on our generic/model permit which is available on the intranet.

5.3 Method Statements

Where a risk assessment shows that risks can be reduced further if a set way of working is in place, a method statement will be written by the relevant Manager or Health and Safety Designated Officer.

This document sets out a step by step approach to the task and must be followed in order to ensure that a task is carried out in a safe manner.

Examples method statements are available on COLIN as a guide for Managers needing to complete these for the tasks that workers carry out.

6 Induction and Training

6.1 Inductions

All new employees complete an Induction Checklist with their manager on their first day, which includes important health and safety information such as:

- Corporate Health and Safety Information
- Risk Assessments and Method Statements
- Personal Protective Equipment
- Emergency Arrangements
- First Aid and Welfare Facilities
- Training
- Accident, incident and near miss Reporting
- Reporting Health and Safety concerns and obtaining advice

6.2 Training

Appropriate health and safety training is provided to staff free of charge. Appropriate training may be helping staff to learn how to do something, telling them what they should or should not do, or simply giving them information or instructions, and is not just about formal 'classroom' course. However, for higher risks appropriate training may be extensive, technical courses with formal assessment and qualification.

Risk Assessments must identify any further training needs associated with specific risks and legal requirements for jobs or tasks.

Refresher training is provided as necessary. Managers must consider if further staff training, and the need to highlight any new health and safety implications if new equipment, technology or changes to ways of working are introduced.

A health and safety training matrix is in place which details mandatory health and safety training for all employees (which includes the 'Corporate Health and Safety Induction' course) and recommended training for specific services/employees.

Mandatory training is provided by the Corporate Health and Safety Officer and recommended training is provided or supported as decided by the Corporate Health and Safety Officer. Managers are responsible for providing appropriate and recommended training within their services, and ensuring staff are appropriately trained.

Further information and guidance is available on the intranet.

6.3 Supervision

All new employees are supervised when they first join the Council. Ongoing supervision is then carried out by Managers and Supervisors as appropriate, taking into account the individual and those who work away from direct management/supervision.

Supervision can help monitor the effectiveness of training and whether staff have the necessary capacity and competence for the job.

Contractors have their own legal health and safety responsibilities, but will also be supervised appropriately, proportionate to the task and their familiarity with the location, its procedures, hazards and risks.

6.3 Young Person (under 18)

A Young Person Risk Assessment is completed by Managers for any new young people (under 18), consideration is also given to those who are inexperienced or first language is not English.

7 Accident / Incident Reporting and Investigation

Once an accident / incident has been reported we will:

- Take prompt emergency action (contact emergency services, first aid, etc.)
- Make the area safe (in some cases this may need to be done first)
- Preserve the scene for investigation

An online Incident Report Form (IRF) will be completed for every accident/incident, near miss, verbal abuse (including threats), physical assault or dangerous occurrence that occurs. This applies to incidents involving employees, volunteers, work experience etc. carrying out Council work and members of the public, contractors, etc. on Council property or land.

We actively encourage all staff to report near misses in the workplace using the IRF or 'near miss report card', so we can investigate and identify potential failings or improvements helping prevent future incidents and injuries.

Incidents will be submitted on the IRF as soon as possible and no more than five days after the incident. If the injury is specified (serious / major) or fatal, then the Corporate Health and Safety Officer will be informed without delay.

Managers will complete a health and safety investigation as soon as possible for all incidents. The investigation effort (time and cost) should be relative to the incident severity. Investigation findings and an action plan where necessary to help prevent reoccurrence will be recorded on the IRF.

The Corporate Health and Safety Officer will notify the Health and Safety Executive (HSE) of reportable incidents under Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations (RIDDOR). The HSE will be notified without delay and within 10 days of the incident, or within 15 days for an incident resulting in over 7 day incapacitation. Incidents resulting in 3 to 7 incapacitation are recorded for information only.

The appropriate Manager/s, Group Manager and Senior Management Team (SMT) will receive a summary of the incident, investigation findings and actions, and copy of the completed IRF and F2508.

The Corporate Health and Safety Officer will monitor reported incidents to identify trends and concerns, and report to SMT on a regular basis.

8 Emergency Arrangements

8.1 Fire Safety

The Chief Executive recognises his duties as overall Responsible Person for Colchester Borough Council under the Regulatory Reform (Fire Safety) Order 2005.

A fire risk assessment has been carried out for all Council 'Corporate' premises. These are held at each site within the Fire Log Book. We carry out a review of these whenever any significant changes are made to building layouts or processes carried out in them.

All fire protection measures are inspected and serviced in line with regulatory requirements. This is managed at each premises by the Health and Safety Designated Officer or respective Manager for the site.

Our emergency arrangements are made known to our employees during induction and are displayed at conspicuous places throughout each place of work. This information is also communicated to all contractors and visitors to our buildings.

We have designated incident controllers and fire marshalls for each of our sites. These people are trained to carry out this role and we carry out fire drills on a regular basis to ensure that the arrangements remain effective.

8.2 First Aid

Colchester Borough Council recognises its duties under the First Aid Regulations 1981 to supply adequate and appropriate first aid equipment, facilities and people to assist in an emergency. Each place of work has dedicated first aiders. Their details are included in the inductions carried out for all new starters. Should this person change, updated information will be communicated as appropriate.

The Health and Safety Designated Officers or nominated persons for each site are responsible for ensuring there is suitable and sufficient first aid supplies monitoring and re-stocking first aid supplies. Employees are encouraged to inform them if stocks need replenishing.

9 Workplace Safety

We will ensure that all our workplaces (corporate buildings) are safe for our staff and anyone else who may visit our premises or use our services, with safe means of access and egress, and ensure that adequate welfare facilities are provided for people at work.

Colchester Borough Homes (CBH) are responsible for the planned and responsive maintenance and asset management of 'Corporate' buildings, and will act as the 'responsible person' for Legionella and Asbestos management.

We will report matters to CBH management, concerning repairs to or structural defects of these workplaces which may impact health and safety.

Managers named as the 'responsible person' will monitor to ensure suitable health and safety management and statutory inspections are completed within their workplaces.

9.1 Electrical Equipment

The Electricity at Work Regulations 1989 requires that all portable electrical equipment is checked at regular intervals. We encourage all staff to check electrical equipment before use and to take out of service and report any defective equipment.

We will ensure that all portable electrical equipment is maintained along the following guidelines, as suggested by the Health and Safety Executive:

Equipment	User Check	Formal Visual Inspection	Combined Inspection and Testing
Battery operated items less than 40 volts	No	No	No
Low voltage items such as telephone equipment	No	No	No
Display screens Desk top computers	No	Yes: 2 – 4 years	No if double insulated, otherwise up to 5 years
Photocopiers Fax machines (not hand held & rarely moved)	No	Yes: 2 – 4 years	No if double insulated, otherwise up to 5 years
Class II Double insulted equipment: Fans Table Lamps (not hand held & moved occasionally)	No	Yes: 2 – 4 years	No
Class II Double insulted equipment: Floor Cleaners Hand held & mobile	Yes	Yes: 6 months – 1 year	No
Class I earthed equipment: Kettles Kitchen equipment Irons	Yes	Yes: 6 months – 1 year	Yes, 1 – 2 years
Cables, leads & plugs connected to the above equipment Mains voltage extension leads	Yes	Yes: 6 months – 4 years dependant on the type of	Yes, 1 – 5 years depending on the type

Battery charging equipment		equipment it is connected to	of equipment it is connected to

9.2 Workstations and Display Screen Equipment

All staff classed as DSE users (those who regularly use DSE as a significant part of their normal work - daily, for continuous periods of an hour or more) must complete the DSE Workstation Assessment Form during their induction, with the assistance of their manager to ensure that their desk / workstation is set up correctly. All DSE users should then adopt the same principles when hot desking, taking a few moments to ensure their workstation is correctly set up or adjusting as required.

DSE users are encouraged to take regular breaks from looking at their screen and/or sitting, such as 10 minutes every hour, or micro breaks more regularly.

DSE users who substantially change their workstation (or the way it is used), or suffer from pains or discomfort believed to be caused or made worse by working with display screen equipment, must inform their manager and complete a new DSE Workstation Assessment. This helps ensure their workstation is set up correctly and should highlight the areas of concern.

DSE users suffering from pains or discomfort with a correctly set-up workstation or those with pre-existing medical conditions that may be affected by DSE use, must inform their manager, who should seek assistance from the Corporate Health & Safety Officer and/or Occupational Health. The Corporate Health & Safety Officer may visit the user at their workstation to assess and suggest reasonable adjustments if necessary (such as a monitor stand, taking regular breaks or a specialist chair).

Copies of completed DSE assessments must be kept by the manager for three years for possible future reference.

DSE users are entitled, on request, to receive an eye and eyesight examination. Colchester Borough Council will contribute the full costs of the eye and eyesight examination and up to £45 towards glasses prescribed solely for DSE use.

Further information and guidance is available on the intranet.

9.3 Work Equipment

In line with the requirements of the Provision and Use of Work Equipment Regulations 1998, all equipment used in the workplace will be selected for its suitability for the tasks required and will be used and maintained in accordance with the manufacturer’s instructions.

Risk Assessments are completed for equipment used in the workplace by managers.

Users are required to carry out a visual check before using any equipment. Where they have concerns over the safety of the equipment, they are to report this immediately to their Manager or Supervisor and take the equipment out of circulation until it have been assessed.

Where any work equipment is hired, we will ensure that this is accompanied by the relevant inspection records to show that it is safe to use.

9.4 Noise and Vibration

We recognise that some equipment used by employees creates noise and vibration which needs to be controlled. Employees are given instruction on the correct use of machinery to reduce noise emissions and are provided with the information gained from risk assessments.

Where the risk assessments identify that PPE is required to further reduce risk, we provide employees with the necessary items and will monitor the use. We encourage employees to raise any concerns they may have about using this type of equipment and will investigate this accordingly.

9.5 Work at Height

Council employees may have to work at height in their activities. They are required to work in accordance with our risk assessments and to use all access equipment in accordance with the training that they have been given.

All access equipment owned by the Council is inspected as required to ensure it is fit for purpose. Anyone using a ladder is required to visually check it for any damage before use. If damage is found they are to take this out of use, label it accordingly and report this to their Manager or Supervisor.

9.6 Manual Handling

Hazardous manual handling operations must be avoided so far as is reasonably practicable, by redesigning the task to avoid moving the load or by automating or mechanising the process.

If hazardous manual handling operations cannot be avoided, managers must complete a suitable and sufficient risk assessment of the risk of injury, ensuring the task, individual, load and working environment is considered.

The risk of injury must be reduced so far as is reasonably practicable. Where possible, manual handling aids / mechanical assistance must be provided, for example, a sack trolley or hoist. Where this is not reasonably practicable then changes to the task, the load and the working environment are explored.

Staff must: follow training and systems of work in place for their safety, use equipment provided for their safety properly, cooperate on health and safety matters, inform their manager if they identify hazardous handling activities, and take care to make sure their activities do not put others at risk.

Further information and guidance is available on the intranet.

9.7 Housekeeping

We encourage all employees to maintain a clean working area and to keep all walkways free from belongings and other items. Bins are provided for all rubbish and employees are encouraged to regularly clear their work areas.

We endeavour to keep all external routes clear and to dispose of rubbish in the appropriate manner.

10 Company Vehicles

The Council publishes a Vehicle User's Handbook which incorporates the Driving for Work Policy. In addition, it provides guidance for those employees who operate a Council owned vehicle.

The Council has a Fleet Working Group which meets on a regular basis to discuss the way in which vehicles are operated throughout the Council.

We ensure that all our vehicles are insured, taxed and have a valid MOT where applicable.

It is standard policy for all drivers to have a break of 45 minutes when driving for any 4.5 hour period.

All new staff should provide their driving licence and the Council will ask to see this on an annual basis. Staff are required to present their driving licence should anything change within this interval. Any employees who drive company vehicles should report any situations which may have an effect on their ability to drive, such as the use of medication that causes drowsiness.

11 Hazardous Substances

We recognise our duties under relevant legislation and have the following procedures in place to satisfy the requirements:

11.1 Asbestos

The majority of asbestos within Council owned buildings was removed as part of an initiative in 2004.

Where this has been left in situ, it has undergone an asbestos management survey from which an asbestos register has been developed. A management survey assesses the condition of any remaining asbestos for normal occupation of the building. Any contractors who arrive to carry out work in our buildings are required to read the register which is held at reception for individual premises and sign to confirm that they understand where asbestos is located. Before any work is carried out that affects the fabric of a building, a refurbishment and demolition survey is carried out which identifies the exact location so that it can be dealt with appropriately.

11.2 Substances Hazardous to Health

The Control of Substances Hazardous to Health 2002 requires employers to make assessments of the risk to the health and safety of employees when using hazardous substances.

COSHH assessments are carried out for all hazardous substances used in the workplace. COSHH assessment templates are available on COLIN for Managers to use and amend to the specific requirements for their members of staff.

11.3 Biological Hazards

Due to the work carried out by some of our employees, it is likely that at some point they may come into contact with biological hazards. The principal identified hazards being bird droppings, discarded needles, rats and animal faeces. These matters are taken into consideration when risk assessments are carried out by the relevant managers and appropriate personal protective equipment is issued where required.

11.4 Legionella

Legionella is managed in all corporate buildings by Colchester Borough Homes. All buildings have been subject to a water hygiene risk assessment and have a scheme for control in place.

Governance and Audit Committee

Item 10

29 October 2019

Report of	**Assistant Director – Policy and Corporate**	**Author**	**Paul Cook** ☏ **282774**
Title	**Annual Audit Letter 2018/19**		
Wards affected	Not applicable		

1. Executive Summary

1.1 The Annual Audit Letter summarises the conclusions and any significant issues arising from BDO's audit procedures for the year ended 31 March 2019. The areas of work and their main conclusions are summarised in the following table:

Area of Work	Conclusion
Financial statements	Unqualified – the financial statements give a true and fair view of the financial position of the Council as at 31 March 2019 and of its expenditure and income for the year then ended.
Management override of controls	No issues were identified by our audit of journals and accounting estimates for management override of controls or management bias.
Revenue and expenditure recognition	No non-trivial issues identified.
Consistency of Governance Statement	The Annual Governance Statement was consistent with the Auditors' understanding of the Council.
Public interest report	No matters to report in the public interest.
Written recommendations to the Council, which should be copied to the Secretary of State	No matters to report.
Other actions taken in relation to our responsibilities under the Local Audit and Accountability Act 2014	No matters to report.
Reporting to the National Audit Office (NAO) on our review of the Council's Whole of Government Accounts return (WGA)	No matters to report.

2. Recommended Decision

2.1 To consider and note the contents of the 2018/19 Annual Audit Letter.

3. Reason for Recommended Decision

3.1 The Accounts and Audit Regulations require the Council to consider the Annual Audit Letter.

4. Alternative Options

4.1 Not applicable.

5. Background information

5.1 The 2018/19 Annual Audit Letter is attached to this report as an appendix.

5.2 The Audit Results Report was presented to the Committee on 30 July 2019.

5.3 The Auditors' certificate that they completed the audit in accordance with the requirements of the Local Audit and Accountability Act 2014 and the National Audit Office's 2015 Code of Audit Practice was issued on 31 July 2019. This is in line with the earlier audit completion deadline of 31 July as prescribed by statute.

5.4 In January 2020 the Auditor will also issue a report to the Committee summarising the grant certification work they have undertaken.

6. Strategic Plan References

6.1 The objectives and priorities of the Strategic Plan informed all stages of the budget process for 2018/19.

7. Publicity Considerations

7.1 The Annual Audit Letter has been publicised on the Council's website, and a hard copy of the document is available at Council offices in line with statutory requirements.

8. Financial Implications

8.1 The 2018/19 audit fees are detailed in the Annual Audit Letter. There was no variation to the planned fee.

9. Other Standard References

9.1 Having considered equality, diversity and human rights, health and safety, community safety and risk management implications, there are none that are significant to the matters in this report.

10. Appendices

10.1 Appendix A: Annual Audit Letter for the year ended 31 March 2019

Background Papers

None

COLCHESTER BOROUGH COUNCIL

Annual Audit Letter

Year ended 31 March 2019

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EXECUTIVE SUMMARY

Purpose of the Annual Audit Letter

This Annual Audit Letter summarises the key issues arising from the work that we have carried out in respect of the year ended 31 March 2019.

It is addressed to the Council but is also intended to communicate the key findings we have identified to key external stakeholders and members of the public.

Responsibilities of auditors and the Council

It is the responsibility of the Council to ensure that proper arrangements are in place for the conduct of its business and that public money is safeguarded and properly accounted for.

Our responsibility is to plan and carry out an audit that meets the requirements of the National Audit Office's (NAO's) Code of Audit Practice (the Code). Under the Code, we are required to report:

- Our opinion on the Council's financial statements; and
- Whether the Council has made proper arrangements for securing economy, efficiency and effectiveness in its use of resources.

Audit conclusions

Audit area	Conclusion
Financial statements	Unmodified opinion issued on 31 July 2019
Use of resources	Unmodified conclusion issued on 31 July 2019
Certificate of completion of the audit	Issued on 31 July 2019

We recognise the value of your co-operation and support and would like to take this opportunity to express our appreciation for the assistance and co-operation provided during the audit.

BDO LLP

30 August 2019

FINANCIAL STATEMENTS

Audit opinion on the financial statements

We issued an unmodified audit opinion on the financial statements. This means that we consider that the financial statements:

- Give a true and fair view of the financial position and its income and expenditure for the year; and
- Have been properly prepared in accordance with the CIPFA/LASAAC Code of Practice on Local Authority Accounting 2018/19.

Final materiality

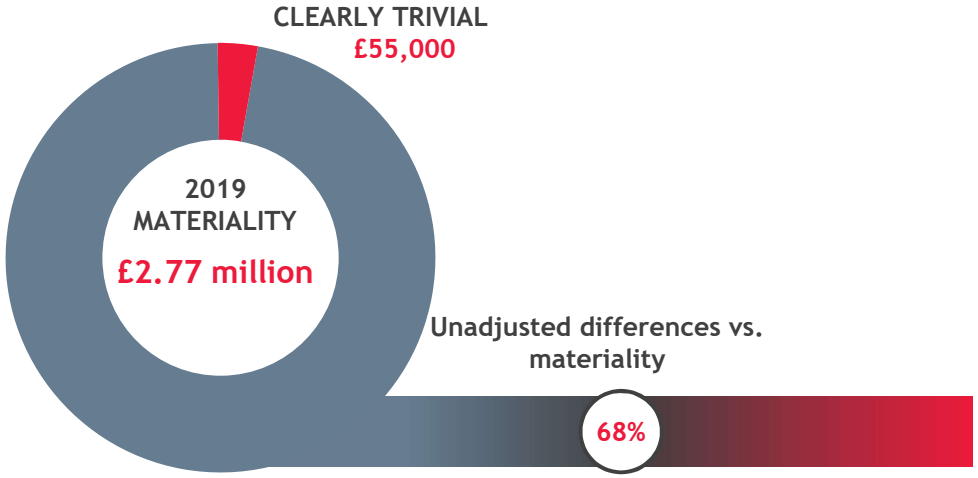
Materiality was calculated at £2.77 million based on a benchmark of 1.75% of gross expenditure.

Material misstatements

We did not identify any material misstatements.

Unadjusted audit differences

We identified one audit adjustment that, if posted, would decrease the net surplus on provision of services for the year by £1.9 million.



FINANCIAL STATEMENTS

We set out below the risks that had the greatest effect on our audit strategy, the allocation of resources in the audit, and the direction of the efforts of the audit team.

Risk description	How the risk was addressed by our audit	Results
Management override of controls	We carried out the following planned audit procedures: • Tested the appropriateness of a sample of journal entries recorded in the general ledger and other adjustments made in the preparation of the financial statements. • Reviewed accounting estimates for biases and evaluated whether the circumstances producing the bias, if any, represented a risk of material misstatement due to fraud. • Obtained an understanding of the business rationale for significant transactions that were outside the normal course of business for the Council or that otherwise appeared to be unusual, if any. • Reviewed unadjusted audit differences for indications of bias or deliberate misstatement.	No issues were identified by our audit of journals and accounting estimates for management override of controls or management bias. We did not identify any transactions outside the normal course of business for the Council.
Revenue and expenditure recognition	We tested an increased sample of grants subject to performance conditions to confirm that conditions of the grant had been met before the income is recognised in the CIES.	No non-trivial issues identified.

FINANCIAL STATEMENTS

Risk description	How the risk was addressed by our audit	Results
Non- current Asset Valuations	We carried out the following planned audit procedures: • Reviewed the instructions provided to the valuer and the valuer's skills and expertise in order to determine if we could rely on the management expert. • Confirmed that the basis of valuation for assets valued in year was appropriate based on their use. • Reviewed the reasonableness of assumptions used in the valuation of non-current assets, the accuracy and completeness of the source data used by the valuer and the Council's critical assessment of the external valuer's conclusions. • Confirmed that the assets not specifically valued in the year had been assessed to ensure that their reported values remained materially correct.	We reviewed the instructions to the valuer and the valuers skills and expertise and determined that we were able to rely on them. Land and buildings were valued using an appropriate basis of valuation (such as existing use, depreciated replacement cost or market value) depending on the use of the asset. We reviewed the assumptions used by the valuer and were content that these were reasonable. We were content with the accuracy and completeness of the source data used by the valuer. We reviewed the assets not specifically valued in the year and were content that the values remained materially correct.

FINANCIAL STATEMENTS

Risk description	How the risk was addressed by our audit	Results
Pension Liability Assumptions.	We carried out the following planned audit procedures: • Reviewed the consulting actuary report over the competency and experience of the actuary and reasonableness of assumptions used. • Reviewed the competence of the management expert (actuary). • Agreed the disclosures to the information provided by the pension fund actuary. • Reviewed the reasonableness of the assumptions used in the calculation against other local government actuaries and other observable data. • Obtained assurance from the auditor of the pension fund over the controls for providing accurate membership data to the actuary. • Checked whether any significant changes in membership data have been communicated to the actuary.	All disclosures in the financial statements agreed to the actuarial report obtained from Barnett Waddingham. The assumptions on which the Council based its disclosure are consistent with those used by the actuary, which are in line with the expectations set out in PwC's consulting actuary report. We reported a non-material unadjusted error of £1.9m. This adjustment was not the result of an audit finding but due to a recent judgement in the supreme court (Lord Chancellor v McCloud) that the Council considers creates an obligation on LGPS schemes that existed at the balance sheet date and requires recognition by the applicable accounting framework. The Council sought actuarial advice on the impact on its liability and we are satisfied with the assumptions used by the actuary.

USE OF RESOURCES

Audit conclusion on use of resources

We issued an unmodified conclusion on the Council's arrangements for securing economy, efficiency and effectiveness in its use of resources. This means that we consider that, in all significant respects, the Council had proper arrangements to ensure it took properly informed decisions and deployed resources to achieve planned and sustainable outcomes for taxpayers and local people.

We set out below the risk that had the greatest effect on our audit strategy.

Risk description	How the risk was addressed by our audit	Results
The Council will need to deliver significant savings to maintain financial sustainability in the medium term and there is a risk that these savings may not be delivered.	We: • Reviewed the assumptions used in the Medium Term Financial Strategy, particularly around the likely levels of income from commercial activities. • Reviewed the Council's capital/revenue planning for future capital projects and investments. • Monitored the delivery of the budgeted savings in 2018/19 and the plans to deliver identified savings for 2019/20. • Sampled a number of saving schemes/ plans. • Held interviews with key officers.	The Council has appropriate arrangements in place to ensure that it can sustainably deploy resources in the medium term. We reviewed the MTFF and the assumptions used for revenue planning and are content that these are reasonable. The Council made a surplus compared to budget of £263k in 2018/19. The Council is budgeting a break even position for 2019/20, but requires the achievement of £1.5m of savings to achieve this. The Council has a fully costed plan for the achievement of the £1.5m of savings and has achieved the savings planned for 2018/19. We sampled some savings schemes and could see the detailed evidence/ support behind these, which demonstrated that these had been fully costed out and supported the 19/20 savings plan. Work is underway to identify the savings required to close the gap in the medium term, there are regular progress and monitoring discussions at informal budget (cabinet meetings) and discussions at away days. The Council has £7.9m of unallocated general fund balances so has sufficient resources to cover the gap in the medium term. We reviewed the capital monitoring and could see that plans are on track to deliver the capital projects very close to budget.

REPORTS ISSUED AND FEES

Fees summary

	2018/19 Final £	2018/19 Planned £	2017/18 Final £
Audit fee – PSAA scale fee	48,188	48,188	64,047
Non-audit assurance services:			
Fees for reporting on government grants:			
• Housing benefits subsidy claim	*	13,640	13,640
• Pooling of housing capital receipts return	**	4,750	4,750
Total fees	TBC	66,578	82,437

**Work is ongoing and so we are unable to conclude on the final fee until the work is complete.*

***Work has not commenced and so we are unable to conclude on the final fee until work is complete.*

Communication

Reports	Date	To whom
Audit plan	7 March 2019	Governance & Audit Committee
Audit completion report	30 July 2019	Governance & Audit Committee

FOR MORE INFORMATION:

Lisa Clampin
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The matters raised in our report prepared in connection with the audit are those we believe should be brought to your attention. They do not purport to be a complete record of all matters arising. This report is prepared solely for the use of the organisation and may not be quoted nor copied without our prior written consent. No responsibility to any third party is accepted.

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Colchester	**Governance and Audit Committee** **29 October 2019**		**Item** **11**
Report of	**Assistant Director of Policy and Corporate**	**Author**	**Owen Howell** ☎ **282518**
Title	**Work Programme 2019-20**		
Wards affected	Not applicable		

1. Executive Summary

1.1 This report sets out the current Work Programme 2019-2020 for the Governance and Audit Committee. This provides details of the reports that are scheduled for each meeting during the municipal year.

2. Recommended Decision

2.1 The Committee is asked to note the contents of the Committee's Work Programme for 2019-20.

3. Alternative Options

3.1 This function forms part of the Committee's Terms of Reference and, as such, no alternative options are presented.

4. Background Information

4.1 The Governance and Audit Committee deals with the approval of the Council's Statement of Accounts, audit, other miscellaneous regulatory matters and standards.

4.2 The Committee's work programme will evolve as the Municipal Year progresses and items of business are commenced and concluded. At each meeting the opportunity is taken for the work programme to be reviewed and, if necessary, amended according to current circumstances.

5. Standard References

5.1 There are no particular references to publicity or consultation considerations; or financial; equality, diversity and human rights; community safety; health and safety or risk management implications.

6. Strategic Plan References

6.1 Governance is integral to the delivery of the Strategic Plan's priorities and direction for the Borough as set out under the four themes of growth, responsibility, opportunity and wellbeing.

6.2 The Council recognises that effective local government relies on establishing and maintaining the public's confidence, and that setting high standards of self-governance provides a clear and demonstrable lead. Effective governance underpins the implementation and application of all aspects of the Council's work.

WORK PROGRAMME 2019-20

Governance and Audit Commit
Meeting date / Agenda items -
Governance and Audit Committee - **25 June 2019** **Reports to be received by 14 June 2019**
Governance and Audit Committee briefing – **18 June 2019 6.30pm**
1. Draft Annual Statement of Accounts 2018/19 2. Year End Internal Audit Assurance Report 2018/19 3. Review of the Governance Framework and Draft Annual Governance Statement 4. Committee on Standards in Public Life Consultation on Local Government Ethical Standards Response 5. Polling District and Polling Place Review 6. CCHL – Annual report
Governance and Audit Committee - **30 July 2019** **Reports to be received by 19 July 2019**
Governance and Audit Committee briefing – **23 July 2019 6pm followed by Statement of Accounts training session**
1. Audited Statement of Accounts 2018/19 and Annual Audit letter 2. 2018/19 Year End Review of Risk Management
Governance and Audit Committee - **3 September 2019** **Reports to be received by 23 August 2019**
Governance and Audit Committee briefing – **27 August 2019 6pm**
1. Colchester Borough Homes Annual Report and Governance Statement 2. Financial Monitoring Report – April to June 2019 3. Capital Expenditure Monitor 2019/20 4. Treasury Management 18/19 Report 5. Polling District and Polling Place Review

Governance and Audit Committee - **29 October 2019** **<u>Reports to be received by 16 October 2019</u>**
Governance and Audit Committee briefing – **21 October 2019 6pm**
1. Local Government and Social Care Ombudsman Annual Review 2018/19 2. Health and Safety Policy and Annual Report 3. Equality and Safeguarding Annual Update 4. Annual Audit Letter 2018/19
Governance and Audit Committee – **26 November 2019** **<u>Reports to be received by 15 November</u>**
Governance and Audit Committee Briefing –**19 November 2019 6pm**
- 1. Review of the Council's Ethical Governance Policies 2. Annual Review of the Members' Code of Conduct and the Council's Localism Act "Arrangements" 3. Review of Local Code of Corporate Governance 4. Review of Member/Officer Protocol 5. Gifts and Hospitality – Review of Guidance for Councillors and Policy for Employees 6. Treasury Management – Half Yearly Update 7. Annual Review of Business Continuity
Governance and Audit Committee - **21 January 2020** **<u>Reports to be received by 10 January 2020</u>**
Governance and Audit Committee briefing – **14 January 2020 6pm**
1. Certification of Claims and Returns – Annual Report 2018/19 2. Interim Review of the Annual Governance Statement Action Plan 3. Risk Management Progress Report 4. Mid-Year Internal Audit Assurance Report 2019/20 5. CCHL Half-Year Performance Report 6. Annual Review of the Council's Companies' Business Plans
Governance and Audit Committee - **10 March 2020** **<u>Reports to be received by 28 February 2020</u>**
Governance and Audit Committee briefing – **3 March 2020 6pm**
1. External Audit Plan for year ending 31 March 2020 2. Financial Monitoring Report 3. Capital Expenditure Monitor 2019/20 4. Internal Audit Plan 2020/21