

# Governance and Audit Committee Meeting

**Grand Jury Room, Town Hall, High Street,  
Colchester, CO1 1PJ**

**Tuesday, 30 October 2018 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**

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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.

Consider and review the activities and financial performance of Colchester Commercial (Holdings) Limited and its subsidiary companies, those Council services generating income of approximately £250,000 and above, and any other partly or wholly owned company of the Council.

To receive, review and recommend Colchester Commercial (Holdings) Limited's business plans (including its subsidiary companies) annually.

To monitor, challenge and make recommendations to Cabinet regarding Colchester Commercial (Holdings) Limited and its subsidiary companies and other Council services with significant income streams.

To make recommendations to Cabinet on how it should exercise the functions flowing from its ownership of shares in Colchester Commercial (Holdings) Limited and its subsidiary companies.

To recommend the constitution and appointment of the Board of Directors of Colchester Commercial (Holdings) Limited to Cabinet.

**COLCHESTER BOROUGH COUNCIL**  
**Governance and Audit Committee**  
**Tuesday, 30 October 2018 at 18:00**

**Member:**

Councillor Adam Fox  
Councillor Helen Chuah  
Councillor Robert Davidson  
Councillor Theresa Higgins  
Councillor Fiona Maclean  
Councillor Lorcan Whitehead  
Councillor Dennis Willetts

Chairman  
Deputy Chairman

**Substitutes:**

All members of the Council who are not Cabinet members or members of this Panel.

**AGENDA - Part A**  
(open to the public including the press)

**Members of the public may wish to note that Agenda items 1 to 5 are normally brief.**

**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 Minutes of Previous Meeting**

The Councillors will be invited to confirm that the minutes are a correct record of the meeting held on 4 September 2018.

**Governance and Audit Minute 04-09-18**

9 - 14

**6 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.

**7 Local Government & Social Care Ombudsman – Annual Review Letter 2017/2018 and Corporate Complaints Policy** 15 - 28

The Committee have been asked to note the contents of the Local Government & Social Care Ombudsman's Annual Review Letter for 2017/2018 and to endorse the Council's revised corporate complaints policy.

**8 Equality and Safeguarding - Annual Update Report** 29 - 40

The Committee have been 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 in paragraph 7 of the report.

**9 Mid-Year Internal Audit Assurance Report 2018/19** 41 - 46

The Committee have been asked to review and comment on the Internal audit activity for the period 1 April – 30 September 2018 and the performance of internal audit by reference to national best practice benchmarks.

**10 Annual Health and Safety Review 2018/19** 47 - 86

To approve the Health and Safety Policy for 2018/19 and recommend to full Council for inclusion in the policy framework and too also review and comment on the Council's progress and performance in managing Health & Safety during the period October 2017 to September 2018.

**11 Work Programme 2018-19** 87 - 90

The Committee is asked to note the contents Committee's Work Programme for 2018-19.

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**

### **4 SEPTEMBER 2018**

*Present:-* Councillor Fox (Chair), Councillor Chuah, Councillor Davidson, Councillor Higgins, Councillor F. Maclean, Councillor Whitehead and Councillor Willetts

#### **118. Minutes**

*RESOLVED* as a correct record the minutes of the meeting held on 10 July 2018.

#### **119. Have Your Say!**

##### **Alan Short**

Alan Short, Campaign Co-coordinator for the Central Colchester Labour Party, attended the Governance and Audit Committee meeting to have his say regarding the development of the cultural quarter. Alan Short raised concerns that proceeding with the development would put the Council at risk of judicial review and other legal challenges.

Mr Short explained that he had a copy of the land registry, from August 2018, which showed that the Cultural area still has a covenant on the land. Mr Short stated that selling the land to a private developer outside the UK for accommodation not occupied by residents of Colchester, would be contrary to the Covenant. Mr Short informed the Committee that some residents were concerned that the land would be sold with the covenant still in place and without the removal of this the Council could be at risk of a judicial review. Mr Short also queried the consultation for the site and why the Council had had 21 meetings with the developer. Mr Short questioned whether the decision to sell the land would be a sound business decision and whether it would be better if the land was retained by the Council, given that the value of the land is likely to increase. Mr Short suggested that a cost benefit analysis over ten years be conducted to assess what the best option would be.

The Committee thanked Mr Short for attending and his comments and advised him that his comments should be raised at a future Cabinet meeting as the development would be an executive function of the Council. Mr Short was also informed that if a planning application were to proceed a further consultation would be conducted. A member of the Committee suggested that Mr Short e-mail a copy of the land registry documents to Committee members.

#### **120. Colchester Borough Homes – Annual Report and Governance Statement**

Councillor Nigel Chapman and Brian Richardson, Interim Finance Director of CBH, attended the meeting to present the Colchester Borough Homes (CBH) Annual Report and Governance Statement. The report requests that the Committee consider and comment on the Governance Assurance Statement of Colchester Borough Homes, and accepts the

assurance provided by CBH regarding its governance arrangements throughout 2017/18.

Cllr Chapman informed the Committee of apologies from Glenn Houchell the Chairman of the Finance and Audit Committee who was unable to attend the meeting.

Councillor Chapman addressed the Committee and informed them that he felt the annual report demonstrated the excellent business management processes that were now in place at CBH. Councillor Chapman also provided information about the structure of the Finance and Audit Committee.

In response to questions from the Committee, Mr Richardson explained that they had 10 internal audit projects including all key financial audits, which were amalgamated into one audit, during the year. Key financial audits are conducted each year, however other audits are on a rotation basis. The 5 year internal audit coverage plan is reviewed annually, and is a flexible document so that if circumstances change it is possible for an item to be audited when required. Colchester Borough Homes has approximately 70-80 days of internal audit per year and there is an external audit of the accounts at the end of the year, which ensures that financial figures are robust.

Following a query from a member of the Committee, Mr Richardson informed the Committee that the scheme of Governance at CBH was sound and meets all the standards that you would find in other Arms Lengths Management Organisations.

The Committee expressed their thanks to the Colchester Borough Homes Board and staff for their hard work.

*RESOLVED that;*

- a) that the Governance and Audit Committee considered and commented on the Governance Assurance Statement of Colchester Borough Homes.
- b) The Committee accepts the assurance provided by Colchester Borough Homes regarding its governance arrangements throughout 2017/18.

## **121. Year End Review of Risk Management**

Councillor King, Portfolio Holder for Resources and Hayley McGrath, Corporate Governance Manager, introduced the Year End Review of Risk Management. The report requests that the Committee consider and comment on the Council's progress and performance in managing risk during the period from April 2017 to March 2018, the current strategic risk register, the proposed risk management strategy for 2018/19 and endorse the submission of this report to Cabinet.

Councillor King and Hayley McGrath provided a summary of the report to the Committee. Councillor King informed the Committee that in previous employment he was involved in risk and that the Council has a robust risk management system in place with the management team at the senior level alive to risk and the changing nature of the living document. Councillor King stated that he wanted to hear what the Committee's view of Risk Management was in the Council.

Hayley McGrath highlighted a key element of work this year was assessing risk in the new commercial companies. Ensuring that there is a robust insurance framework and how the companies manage their commercial risk going forward. Health and Safety work has also

been undertaken with Colchester Borough Homes and lone workers. Hayley McGrath confirmed that there are no significant changes to the strategy and that it has been endorsed by the external auditors. Hayley McGrath also provided a summary of the Strategic Risk register including an increase in the level of risk for the North Essex Garden Communities project.

In response to a question about risk 3e, relating to challenging behaviour from customers towards Officers and whether this includes comments through social media, Hayley McGrath welcomed the suggestion and acknowledged the increasing usage of social media. Whilst there was no specific risk associated to social media, Hayley McGrath confirmed that this would be raised going forward. Pam Donnelly, Strategic Director, who has responsibility for this area, welcomed the suggestion and the need to take comments from social media into account and be aware of the impact of such comments on officers.

A member of the Committee also raised concerns that certain risks, like the potential impact of future reductions in government funding, were certainties and therefore managed rather than potential risks. In addition, a further comment was raised suggesting that the risk associated to the European Union referendum was too high, as it was unlikely to cause issues with the day to day running of the Council and may just cause a small financial risk that could be monitored. Councillor King acknowledged that there is a limit to what the Council can do with certain risks, but it is necessary to monitor them to ensure that the Council can react to any variations in its budget caused by the risks identified. With regard to the risk associated to the European Union referendum, Councillor King stated that the Council needed to have a view of the potential impact on services and funding depending on the circumstances and economic context of future arrangements.

In response to a question about the significance of the risk tolerance line, Hayley McGrath stated that for those risks identified as above the tolerance line these will be given more resource than those below due to the level of risk associated.

Hayley McGrath also confirmed that the document is reviewed every quarter, with discussions held at performance management board. The risks are also considered every three months by Assistant Directors and robust conversations are had about those risks which need to be considered. Councillor King confirmed that he had reviewed and held discussions about the document twice in the last few months.

A member of the Committee highlighted that there had been delays in processing planning applications and in street naming services. The Committee member acknowledged that staff in the departments had apologised for delays received but questioned why these areas were not reflected in the risk register. Councillor King apologised for any shortfall in the services received. Hayley McGrath stated that there are two different types of risk register, the strategic risk register which looks at risk as a whole and operational risks which are relevant to each service area and wouldn't be included within this report. Both of these particular risks are more likely to be included in operational risks, but wider implications on service delivery are covered under risk 2a.

In response to a further query about whether there is an opportunity for staff to raise issues that could be included in the risk register Hayley McGrath confirmed that officers have e-mailed her in the past flagging up areas for consideration. Any submissions received are then passed on to senior management to review. Hayley McGrath also confirmed that there is a Managers Network which allows for discussion and identification of areas of risk as well as an option to use the whistleblowing policy if necessary.

*RESOLVED* that:

- a) The Committee considered and commented on the Council's progress and performance in managing risk during the period from April 2017 to March 2018.
- b) The Committee considered and commented on the current strategic risk register
- c) The Committee considered and comments on the proposed risk management strategy for 2018/19
- d) The Committee endorse the submission of this report to Cabinet.

## **122. Annual Statement of Accounts - 2017/18**

Sean Plummer, Strategic Finance Manager, introduced the Annual Statement of Accounts 2017/18 report. The report requests that the Committee note the publication of the audited Statement of Accounts for 2017/18.

Sean Plummer stated that the purpose of the report is to inform the Committee that the audited statement of accounts has been published on the Council website formally closing the audit process for 2017/18.

*RESOLVED* that the publication of the audited Statement of Accounts 2017/18 be noted.

## **123. Annual Audit Letter**

Sean Plummer, Strategic Finance Manager, introduced the Annual Audit Letter Report. The report requests that the Committee consider and notes the contents of the 2017/18 Annual Audit Letter.

Sean Plummer, provided the Committee with a brief outline of the report highlighting the key areas of work. Sean Plummer also explained that much of the information included within the report had been previously submitted to a Governance and Audit Committee meeting.

*RESOLVED* that the Committee considered and commented on the contents of the 2017/18 Annual Audit Letter.

## **124. Financial Monitoring Report – April to June 2018**

Darren Brown, Finance Manager, introduced the Financial Monitoring Report for the period between April and June 2018. The report requests that the Committee consider the financial performance of General Fund Services and the Housing Revenue Account for the first three months of 2018/19, and to note the forecast budget overspend of £150k on the general fund.

Darren Brown provided Committee members with a summary of the report and highlighted that there is a net underspend on services of £356k due to less expenditure of £100k and more income of £256k compared to profiled budgets.

Darren Brown stated that the underspend is in a number of different areas and is due to the profiling of the budgets and when the spend is likely to occur. Darren Brown also highlighted that there is less than expected income from Sport and Leisure. With regard to the net overspend, this is a result of additional spend on employee costs, premises costs, supplies and services costs and the additional costs for introducing recycling in flats.

Darren Brown also informed the Committee that the forecasts are robust and that through a monthly review it is notable that the budget has been improving since quarter one. With regard to the Housing Revenue Account, this has an underspend of £450,000, which is due to the profiling of budgets.

A member of the Committee requested further details on the position of the Housing Revenue Account, with regard to the premises costs and repairs and maintenance overspend. Darren Brown confirmed that this position was due to underspends in a number of different budget areas and a small overspend just within the repairs and maintenance area.

*RESOLVED* that the Committee considered the financial performance of General Fund Services and the Housing Revenue Account for the first three months of 2018/19, and to note the forecast budget overspend of £150k on the General Fund.

### **125. Capital Expenditure Monitor 2018/19 – April 2018 to June 2018**

Sean Plummer, Finance Manager, introduced the Capital Expenditure Monitor 2018/19 for the period of April 2018 to June 2018. The report requires that the Committee review the progress of the schemes included in the capital programme, the associated spend for the first three months of the financial year and the budget forwards for 2018/19. The report requests the Committee note the requirement for the Council to prepare and publish a Capital Strategy to be in place for 1 April 2019.

Sean Plummer informed the Committee that eight percent of the budget had been spent in the first quarter of the Capital scheme. Sean Plummer explained that this was a usual occurrence due the majority of spending happening at the end of the financial year. Sean Plummer also highlighted that there are a number of large items within the capital programme that may move into the next financial year.

Sean Plummer informed the Committee that the report sets out the overall programme, as well as comments on the larger schemes. There are currently no large over or under spends for large projects and any items flagged as amber are included. Sean Plummer highlighted that projects can be categorised as amber due to a number of different factors including cost, delivery of the programme and uncertainty.

Sean Plummer also highlighted that there is a new requirement for all local authorities to produce a Capital Strategy from 1 April 2019. This is due to the changing nature of Local Authorities Capital expenditure and will be as part of the budget reports and providing information about the capital programmes.

A member of the Committee questioned, in relation to the Capital Strategy, whether the Council had any investments in property outside of the Borough Council area. In response Sean Plummer confirmed that Colchester Borough Council does not have any investments outside of the Borough area. Sean Plummer confirmed that whilst some Councils have decided to invest in properties outside of their area, Colchester Borough Council have invested in capital schemes in the Borough. Sean Plummer confirmed that Capital Strategy would need to be clear providing information about where the investments by the Council has been made, the rationale for the decisions and the change in focus to a more commercial approach.

A member of the Committee questioned the project regarding surface water flooding at Distillery Lane and whether there are still plans as part of a Colne Estuary Strategy to assist with this issue. Sean Plummer informed the Committee that further information on this could be provided after the meeting, following a discussion with the Officer involved.

A further question was asked regarding other local authorities had invested within the Colchester Borough Council area. In response Sean Plummer stated that the Capital Strategy would only contain information about Colchester Borough Council investments rather than other authorities.

**RESOLVED**

- a) that the Committee reviewed the progress of the schemes included in the capital programme, the associated spent for the first three months of the financial year and the budget forecasts for 2018/19 and future years.
- b) That the requirement for the Council to prepare and publish a Capital Strategy in place for 1 April 2019 be noted.

**126. Work programme**

Jonathan Baker, Democratic Services Officer, introduced the Work programme report, which requests that the Committee note the work programme for the ensuing municipal year.

Jonathan Baker informed the Committee that there would be an additional meeting of the Governance and Audit Committee taking place on 13 November. This meeting was arranged due to the number of items of business scheduled for October.

**RESOLVED** that the Work Programme 2018-19 be noted.

30 October 2018

<b>Report of</b>	<b>Monitoring Officer</b>	<b>Author</b>	<b>Andrew Weavers</b>
<b>Title</b>	<b>Local Government &amp; Social Care Ombudsman – Annual Review Letter 2017/2018 and Corporate Complaints Policy</b>		
<b>Wards affected</b>	Not applicable		

## 1. Executive Summary

- 1.1 The Local Government & Social Care Ombudsman produces an annual report 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 2017/2018.
- 1.2 The report also requests the Committee to endorse the Council's revised corporate complaints policy

## 2. Recommended Decision

- 2.1 To note the contents of the Local Government & Social Care Ombudsman's Annual Review Letter for 2017/2018.
- 2.2 To endorse the Council's revised corporate complaints policy.

## 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 2018 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 contents of the Annual Review Letter was reported to Cabinet on 5 September when they noted the report.

## 4. Key Headlines

- 4.1 There were no findings of maladministration against the Council and no formal reports were issued.
- 4.2 In 2017/2018 the Council received 266,882 direct customer contacts by telephone, email and in person 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 21 complaints and enquires in relation to how

the Council had dealt with its customers. This is an increase from the previous year's figure of 16.

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

4.4 The following table provides a comparison of decisions made.

Year	Incomplete or Invalid	Advice Given	Referred back for Local Resolution	Closed after Initial Enquiries	Detailed Investigations			Total
					Not Upheld	Upheld	Uphold Rate	
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

As can be seen from the table above, 5 detailed investigations were undertaken. Of which:

- 4 not upheld,
- 1 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).*

4.5 The upheld case was in relation to a complaint regarding the processing of a rehousing request by Colchester Borough Homes. The Local Government & Social Care Ombudsman upheld the complaint because there was some fault in Colchester Borough Homes' record keeping in this case. However the Local Government & Social Care Ombudsman determined that this did not affect the outcome of the applicant's review and appeal so did not cause any injustice.

## 5. Corporate Complaints Policy

5.1 The Council's corporate complaints policy has been reviewed against good practice and a revised version is attached at Appendix 2 which has been approved by the Senior Management Team.

## 6. Financial Considerations

6.1 No direct implications other than mentioned in this report.



## **7. Strategic Plan References**

- 7.1 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 themes of a vibrant, prosperous, thriving and welcoming Borough.

## **8. Equality, Diversity and Human Rights Implications**

- 8.1 No direct implications.

## **9. Publicity Considerations**

- 9.1 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.

## **10. Consultation, Community Safety, Health and Safety and Risk Management Implications**

- 10.1 No direct implications.



# Local Government & Social Care OMBUDSMAN

18 July 2018

*By email*

Adrian Pritchard  
Chief Executive  
Colchester Borough Council

Dear Adrian Pritchard,

## **Annual Review letter 2018**

I write to you with our annual summary of statistics on the complaints made to the Local Government and Social Care Ombudsman (LGSCO) about your authority for the year ended 31 March 2018. The enclosed tables present the number of complaints and enquiries received about your authority and the decisions we made during the period. I hope this information will prove helpful in assessing your authority's performance in handling complaints.

### **Complaint statistics**

In providing these statistics, I would stress that the volume of complaints does not, in itself, indicate the quality of the council's performance. High volumes of complaints can be a sign of an open, learning organisation, as well as sometimes being an early warning of wider problems. Low complaint volumes can be a worrying sign that an organisation is not alive to user feedback, rather than always being an indicator that all is well. So, I would encourage you to use these figures as the start of a conversation, rather than an absolute measure of corporate health. One of the most significant statistics attached is the number of upheld complaints. This shows how frequently we find fault with the council when we investigate. Equally importantly, we also give a figure for the number of cases where we decided your authority had offered a satisfactory remedy during the local complaints process. Both figures provide important insights.

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 the 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 an annual review of local government complaints. The aim of this is to be transparent and provide information that aids the scrutiny of local services.

### **Future development of annual review letters**

Last year, we highlighted our plans to move away from a simplistic focus on complaint volumes and instead turn focus onto the lessons that can be learned and the wider improvements we can achieve through our recommendations to improve services for the many. We have produced a new corporate strategy for 2018-21 which commits us to more comprehensively publish information about the outcomes of our investigations and the occasions our recommendations result in improvements to local services.

We will be providing this broader range of data for the first time in next year's letters, as well as creating an interactive map of local authority performance on our website. We believe this will lead to improved transparency of our work, as well as providing increased recognition to the improvements councils have agreed to make following our interventions. We will therefore be seeking views from councils on the future format of our annual letters early next year.

### **Supporting local scrutiny**

One of the purposes of our annual letters to councils is to help ensure learning from complaints informs scrutiny at the local level. Sharing the learning from our investigations and supporting the democratic scrutiny of public services continues to be one of our key priorities. We have created a dedicated section of our website which contains a host of information to help scrutiny committees and councillors to hold their authority to account – complaints data, decision statements, public interest reports, focus reports and scrutiny questions. This can be found at [www.lgo.org.uk/scrutiny](http://www.lgo.org.uk/scrutiny) I would be grateful if you could encourage your elected members and scrutiny committees to make use of these resources.

### **Learning from complaints to improve services**

We share the issues we see in our investigations to help councils learn from the issues others have experienced and avoid making the same mistakes. We do this through the reports and other resources we publish. Over the last year, we have seen examples of councils adopting a positive attitude towards complaints and working constructively with us to remedy injustices and take on board the learning from our cases. In one great example, a county council has seized the opportunity to entirely redesign how its occupational therapists work with all of its districts, to improve partnership working and increase transparency for the public. This originated from a single complaint. This is the sort of culture we all benefit from – one that takes the learning from complaints and uses it to improve services.

### **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 2017-18 we delivered 58 courses, training more than 800 people. We also set up a network of council link officers to promote and share best practice in complaint handling, and hosted a series of seminars for that group. To find out more visit [www.lgo.org.uk/training](http://www.lgo.org.uk/training).

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:** 31/03/2018

For further information on how to interpret our statistics, please visit our website:  
<http://www.lgo.org.uk/information-centre/reports/annual-review-reports/interpreting-local-authority-statistics>

## 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	1	1	0	5	2	8	3	1	21

## Decisions made

				Detailed Investigations			
Incomplete or Invalid	Advice Given	Referred back for Local Resolution	Closed After Initial Enquiries	Not Upheld	Upheld	Uphold Rate	Total
1	2	8	5	4	1	20%	21

### Notes

Our uphold rate is calculated in relation to the total number of detailed investigations.  
 The number of remedied complaints may not equal the number of upheld complaints. This is because, while we may uphold a complaint because we find fault, we may not always find grounds to say that fault caused injustice that ought to be remedied.

### Complaints Remedied

by LGO	Satisfactorily by Authority before LGO Involvement
0	0



# COMPLAINTS POLICY

September 2018

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## 1 INTRODUCTION

Colchester Borough Council strives to deliver the best possible value and service to its residents and to deliver that service right first time. We understand the importance of feedback and are committed to ensuring we use it to maintain, enhance or improve our services and culture.

## 2 CUSTOMER SERVICE STANDARDS

Ensuring we help Customers in every way possible to access our services is very important to us. Part of this is making sure all our Customers receive a consistent and appropriate level of service in all our interactions with the Council, no matter who they are.

To do so, we have a set of Customer Service Standards that outlines the minimum expectations for our staff:

- Be welcoming, fair, responsive and courteous
- Actively listen to our Customers and use feedback to meet your needs and improve our services and products
- Have professional, well-informed staff, who take pride in what they do
- Let you know what we can provide and what you should expect
- Get it right for our Customers and do the best we can
- Make sure everyone has easy, equal access to our services
- Communicate in plain language and avoid jargon
- Respect your right to privacy and confidentiality

## 3 HOW TO COMPLAIN

If you feel we have done something wrong or badly or have failed to do something, the first thing you should do is contact the relevant service or officer you have been dealing with. You should ask them to put things right for you or explain what went wrong.

If you remain dissatisfied with their response, you can submit an official complaint using the process outlined in this document.

### 3.1 What is a complaint

- Dissatisfaction with our policies
- Failure by the Council or its employees to respond to a reported problem
- Failure to provide adequate standards of service
- Delay or failure to provide a service
- Dissatisfaction with an employee's behaviour or attitude

### 3.2 What is not considered a complaint

- Routine or day to day issues that can be easily resolved
- Reporting a problem or requesting a service first time
- A request for information or explanation of policies or procedures
- Cases where other rights of appeal exist such as refusal of planning permission

### 3.3 Who can make a complaint?

We accept complaints from residents, local businesses, visitors to the borough, suppliers of services or any group or individual that uses or is affected by our services. We also accept complaints made on behalf of someone else, for example councillors, Members of Parliament (MPs) or representatives (for example a friend, relative or carer)

## 4 HOW WE HANDLE COMPLAINTS

We have a 2-stage process for handling complaints. This gives complainants the opportunity to have their complaint reviewed by more senior levels of management if they are not satisfied with our response.

### 4.1 Stage 1

So that we can fully investigate, you should submit your complaint via our [online form](#) with as much information as you can, including dates, times, any officer name(s), etc. Your complaint will be acknowledged within 5 days and will be forwarded to an officer or manager that deals with the service the complaint is about. The matter will be investigated by someone other than who has already been involved and we will aim to provide you with the outcome of this investigation within 4 weeks of receiving your complaint. If longer is needed to complete our investigation, we will notify you of this and a date that we will respond to you by. Where appropriate, your complaint may be reviewed by an officer or manager in another department.

### 4.2 Stage 2

If you disagree with our response, you may submit an appeal via our [online form](#). You must provide the original complaint reference provided to you at Stage 1, otherwise the complaint will be considered as a new complaint and will be handled accordingly. You will receive acknowledgement of your request within 5 days, the Stage 1 investigation and response will be reviewed by a member of our Senior Management Team and the outcome of the review will be sent to you within 4 weeks of receiving your appeal. If more time is needed to complete the review, we will write to you to advise you of this and a date that we will respond to you by.

#### 4.3 What you can expect to receive from us

In every instance, you can expect our response to follow our Customer Service Standards. Additionally, you may receive one or more of the following:

- An apology
- An explanation of why the Council handled the matter the way it did
- An explanation of what went wrong
- Remedial action, such as how we will provide the service
- A commitment to how we will try to prevent the same thing happening again

## 5 LOCAL GOVERNMENT & SOCIAL CARE OMBUDSMAN

If, having followed both stages of our complaint process, you are still not satisfied with our response or you are not happy with the way we have handled your complaint, you can contact the [Local Government & Social Care Ombudsman](#).

This is a free service that anyone can use and provides a final stage of investigation into complaints made about councils. They can provide information about next steps and whether they can or should investigate on your behalf. You can ask for a further review if you:

- are not happy with the way we have handled your complaint
- are not satisfied with our response to your complaint

Please note that you must contact them yourself if you want to refer your complaint and they will advise you to follow our complaint process in the first instance.

Website: [www.lgo.org.uk](http://www.lgo.org.uk)

Telephone: 0300 061 614

## 6 COMPLAINT MONITORING

The Council produces statistical reports and analysis of complaints received that are shared with the Senior Management Team. This information is used to review our performance and ensure we continually enhance and improve our services.

## 7 OTHER INFORMATION

### 7.1 Ways to contact us

Online [www.colchester.gov.uk](http://www.colchester.gov.uk)

By phone 01206 282222 – Monday to Friday 9am to 5pm, excluding Bank Holidays

In person Colchester Library & Community Hub, Trinity Square, Colchester CO1 1JB

### 7.2 Unreasonably persistent complaints

A small number of customers place unreasonable demands on our service by submitting multiple, frequent or lengthy contacts. These can take up unnecessary resources and taxpayer funds and can impact upon our ability to deliver services.

In cases where we consider someone's behaviour to be unreasonable, we will explain why and ask them to change it. We may also take action about or apply restrictions to the way we communicate with them. If action is taken, it will be in place for a minimum of six months after which time it can be removed by contacting the Council's Monitoring Officer.

### 7.3 Offensive or abusive behaviour

We do not expect our staff to put up with abusive or offensive behaviour and they may report events in which they feel they have been verbally abused, threatened or assaulted. This includes intimidating behaviour, harassment, sexual threats and threats to others or to property.

Anyone who places our staff in compromising or threatening situations will be placed on our Cautionary Contact Register, which enables Councillors and staff to be aware of potential risks and actions when contact is required.

### 7.4 Complaints about Councillors

There is a separate process if you wish to make a complaint about any Colchester Borough Councillors or Co-opted members – [click here](#).

30 October 2018

Report of	Assistant Director of Communities	Author	Andrew Harley ☎ 03300 538086
Title	Equality and Safeguarding - Annual Update Report		
Wards affected	All		

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

## 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 – An example of a specific project in more detail.

## 4. Continuation of a Combined Approach

- 4.1 This annual report continues a combined approach to scrutiny in the areas of Equality and Diversity, and Safeguarding which brings 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 New [Equality Act regulations](#) came into effect in 2018, requiring public organisations with more than 250 employees to publish a range of gender pay gap figures by 30 March 2018. The required information was published [here](#) on our website. On average for all employees, women's hourly rate was 80p more than men. You can access an explanatory narrative [here](#) and compare the Council's data with other organisations on the Government's Portal [here](#).
- 5.2 In May 2018, the Equality Commission called for a [national strategy](#) to ensure disabled people have access to suitable housing as a survey reveals only 7% of England's housing stock meets minimum standards.
- 5.3 In July, 2018, the Government announced an [overhaul of the Blue Badge parking scheme](#) to ensure that people with 'hidden disabilities' such as autism will be able to get parking permits as well as those with physical conditions.

## Safeguarding

- 5.4 In September 2017, the Department for Education published a report on [Safeguarding and Radicalisation](#).
- 5.5 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](#) to be developed across Government, in conjunction with charities and experts.
- 5.6 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.
- 5.7 There have also been changes over the relevant period in terms of national Governance. On 30 April 2018, Penny Morduant was appointed Minister for Women and Equalities, replacing Amber Rudd. Other relevant appointments include: Baroness Williams of Trafford as Minister for Equalities; Sarah Newton as Minister of State for Disabled People, Health and Work; and Lord Bourne of Aberystwyth as Parliamentary Under-Secretary of State Minister for Faith. Damian Hinds is responsible for the work of the Department for Education which includes Child Protection.
- 5.8 At [Essex County Council](#), David Finch as Leader of the Council has responsibility for Equality and Diversity. Dick Madden continues to be Cabinet Member for Children and Families and Sue Lissimore is Cabinet Member for Culture and Communities (which includes responsibility for 'Gypsy and Traveller' and for 'Faith Covenant'). John Spence is Cabinet Member for Health and Adult Social Care (which includes Disabilities).

- 5.9 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

operational co-ordination. The Assistant Director for Communities provides the strategic lead whereas the Equality and Safeguarding Co-ordinator has provided the operational lead for the majority of the relevant period. From 24 September 2018, however, the Community Enabling Team Leader has acted as operational lead for Equality and Diversity whilst the Community Safety Co-ordinator has acted as operational lead for Safeguarding.

- 6.2 The relevant [Cabinet Portfolios](#) are Cllr Mike Lilley (Planning, Public Safety and Licensing) and Cllr Tina Bourne (Housing and Communities).
- 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 attend quarterly 'workshops' to review safeguarding referrals and improve processes. Each service area has between two and four officers who have an enhanced level of training to provide expertise and assistance to officers.
- 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 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 issues including domestic violence and hate 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 attends local 'MACE' (Missing and Child Exploitation) meetings which facilitate joint approaches and key information sharing to help protect children from exploitation.
- 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.

### Equality and Diversity

- 6.7 The Equality Act 2010 imposed a Public Sector Equality Duty (PSED) upon local authorities including 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.  
Training has been delivered to 42 CBC staff since April 2018 to date, with further sessions planned for October, November, January and March. Training for Councillors is currently delivered face to face, every 12 months. The Equality and Diversity lead Officer is working to develop and implement an online training package for staff and Councillors from April 2019.
- 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 2017-18 we have continued to meet both of these 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
  - Workforce statistics: [Equality monitoring information](#)
  - Work undertaken by the Council's Research and Engagement team about service users, customers and the borough's population.
- 6.12 On 31 March 2018, the Council published its new 'equality objective' which is:
- '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
  - Target support to the most disadvantaged residents and communities
- 6.13 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, disproportionate negative impacts upon the 'protected characteristics'. It allows us to make the right judgements on the basis of sound information and data, in an open and transparent way.
- 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.



- 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. There are revised and updated [SET Procedures](#) (covering Southend Essex and Thurrock) for child safeguarding which district councils are required to follow, and which are integrated into the Council’s Safeguarding Policy.
- 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 Procedures](#) 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 [SETSAF1](#) 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 2017, the number of referrals made to the Children and Families Hub was 21. 16 referrals were made to Adults Safeguarding Board.

Completing Safeguarding Level 1 training is a statutory requirement for all CBC staff; between the period July 2017 to date, 1019 CBC staff have completed this training. Safeguarding Level 2 training is also available for frontline staff who work directly with children or vulnerable adults – in 2017, this was delivered to approximately 25 staff in the Helpline Service.

CBH did not provide Safeguarding Level 2 training in 2017, however it will be delivered to approximately 60 frontline staff by the end of March 2019.

- 6.18 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, the Safer Colchester Partnership has continued work on two Domestic Homicide Reviews and has provided relevant information following ‘scoping enquiries’ on Partnership Learning Reviews, Serious Case Reviews and Domestic Homicide Reviews.
- 6.19 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. 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 forms the basis of an internal action plan which is subject to regular monitoring.
- 6.20 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 third Modern Slavery

Transparency Statement in September 2018. In July 2018, the Council agreed unanimously to adopt and apply, as far as is legally possible, the Co-operative Party's [Charter Against Modern Slavery](#).

- 6.21 [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.” Over the relevant period, the Council has worked closely with Essex Police PREVENT officers in order to raise awareness and complete referrals to the Channel Panel (where people have been identified as being in need of support).

In 2016/17, approximately 150 CBC staff received PREVENT training via a face to face training session. Content of these sessions and delivery procedures were provided by Home Office and Essex Police Counter Terrorism.

Development of an elearning package is currently underway to facilitate maximum participation in 2017/18 for all frontline staff.

## **7. Going Forward**

- 7.1 Continued further financial challenges are anticipated over the next 12 months and vulnerable residents are likely to face increasing pressures as a result of the continued impact of welfare reform. The Council will need to continue to exploit the benefits offered by digital platforms whilst concentrating assistance on the most vulnerable.
- 7.2 The Council will continue to raise awareness for staff (and highlight its procedures) on key issues including PREVENT, Modern Slavery and CSE (Child Sexual Exploitation). To do this effectively, the Council will increase its commitment to online training.
- 7.3 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.
- 7.4 The Council will continue to be innovative in applying for, and securing, funding in related areas such as Arts Council Funding (Museums), DCLG funding (Homelessness) and Sport England funding (Leisure World). This can significantly assist the Council in achieving its objectives and meeting its obligations.

## **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'.

## **9. Consultation**

- 9.1 The Council's strategic approach in these areas is underpinned by its Strategic Plan for which extensive consultation took place.

## **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. This helps with openness and transparency, with everything 'in one place'. 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 The Council continues to face significant financial pressures. As part of its strategic response, the Council has sought to mainstream a "business culture" focused on commercialisation and income generation. In this context, special attention will continue to be paid to 'advancing equality' and safeguarding children and 'adults at risk'.
- 11.2 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.
- 11.3 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 and Diversity, and Safeguarding. The importance that the Council attaches to these areas helps to protect vulnerable groups from harm and exploitation and promotes the human rights of all.

## **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.

### Key improvements and initiatives 2017-18

- 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 2017-18, the following organisations received funding: Age Concern; Colchester Citizen's Advice Bureau; Community 360; Colchester and Tendring Women's Refuge; Emergency Night Shelter; Grassroots; Rural Community Council of Essex (RCCE); and SHAKE Colchester Furniture Project.
- The Community Safety Team has led on a number of projects including a *Virtual Crew* pilot in order to deliver key community safety messages to all 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. Working with Essex County Council Youth Service and the University of Essex, the *Detached Youth Work* Project aimed to identify and implement the necessary interventions to tackle and reduce levels of youth anti-social behaviour within two 'hotspot' areas of Colchester. The project also helps to raise awareness of vulnerabilities, and can therefore help to safeguard against grooming and other forms of CSE.
- The Community Initiatives Team has worked in partnership with Dementia Friends and the Alzheimer Society in order to awareness and understanding across the Council and in the community. Working with TSP Legal Services and Community 360, the team attended public awareness events to provide information, signposting and advice.
- Having earned the status of a National Portfolio Organisation, the 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 of access and promoting inclusion. 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 at 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 Rainbow Flag flying at the Town Hall. Ipswich Museums Service (also managed by Colchester Borough Council) offered 'early bird' sessions for people with autism and 'handling objects' sessions, which were focused on increasing access for Blind and Partially Sighted customers.
- 2017-18 was a busy year for training and development for the Customer Support Team. The whole team was trained to be Dementia Friendly Champions and the team completed the innovative *Dementia Experience* to truly understand the impacts of this condition. LGBTQ+ training was also cascaded to the team.
- 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 EPUT's Access and Assessment Team.






- The Macmillan Team had its best year in terms of performance, helping to achieve almost £5m in *benefit gains* for people affected by cancer. (This is the amount of welfare benefit raised for a client we have advocated for.) In addition, an online referral form has been developed for the use of Macmillan clients and health care professionals in order to increase equality of access to the service.
- 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.
- 2017-18 has been a successful year for the Council in terms of winning funding for a variety of services. There have been successful joint bids with Essex County Council, CBC and two neighbouring district councils, to access funding (£130 million, nationally) from Sport England to explore ways for communities to become more active. Programmes developed within the Colchester pilot, of which there are twelve in all, will promote increased levels of activity among vulnerable young families and older people living in circumstances of deprivation.
- The Council's Licensing Food and Safety Team has organised four Food Hygiene Training courses in 2018 delivered in Chinese on behalf of the Colchester Chinese Community Association (CCA).
- The Council has a zero tolerance approach to any refusal to a licensed driver's refusal to carry Assistance Dogs. The new Taxi and Private Hire Policy includes arrangements for spot checks to be carried out along with mandatory disability awareness training.
- The Council has taken a robust approach to enforcing the [Public Space Protection Order](#) for the Town Centre introduced by the Council in October, 2017. This included the prohibition of "the stationing of advertising boards, or other structures being used as such." The restriction has enhanced equality of access into the Town Centre by all those with limited mobility, and can be enforced by the Council's Zone Wardens.
- The Environmental Protection Team provides an air quality forecast service by text which is especially helpful to the elderly, pregnant women, children and babies and those with respiratory issues. The team continues to work 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 an attempt to promote the Making Every Contact Count (MECC) approach, new staff are required to complete a new online module as part of their induction process, in order to promote supportive conversations with residents and customers about behaviour change, thereby increasing opportunities to promote health and reduce health inequalities. The *Beat the Street* project, which ran in autumn 2017, increased physical activity levels. As a disproportionate number of participants were from Colchester's BAME community, the project is one example of an initiative that has helped to reduce health inequality.
- In February 2018, Leisure World introduced a free programme of fun, relaxed activities and sports aimed at people living with dementia and their carers. It has worked in partnership with a number of organisations including Community 360 to ensure that transport is provided for participants to access these activities.

- The Council has adopted the *Dying to Work Charter* which confirms its commitment to providing additional and clear reassurance to staff who are diagnosed with a terminal illness. The Charter confirms that such staff will be given employment protection and be supported sensitively during a traumatic period of their life. The Council has also signed up to further commitments within the *Disability Confident Scheme* including providing work experience and guiding staff to information and advice on mental health conditions. In addition, the Council introduced a new online payroll system called 'MySelf' which includes a secure facility for each member of staff to update their details, many of which reflect the Equality Act's so-called 'protected characteristics' This helps the Council to build a fuller profile of its staff which is necessary in order to help ensure that it treats its employees fairly.
- During the period 2017-18, 647 Council owned properties were let by Colchester Borough Homes which is the Council's ALMO. A majority of these were let on the basis of serious or critical medical or welfare awards via the Gateway to Homechoice scheme. Colchester Borough Homes has worked closely with the Council over the period to help ensure compliance with the revised duties introduced through the Homelessness Reduction Act. In response to this legislation, between April and June 2018, 4094 customers have accessed the Enhanced Housing Options (EHO) Wizard and 212 full assessments have taken place. Colchester Borough Homes has continued to strengthen its commitment to being a *Mindful Employer*. Colchester Borough Homes has committed to a charter of voluntary principles that helps employers support staff with mental health issues.
- The Generic Call Centre has worked closely with *Essex Sight* over the period in order to reduce the barriers to accessing services experienced by people with a visual impairment. It has developed a new *VIP (Visual Impairment Priority) Line* which was launched on 3 April 2018. This dedicated line removes the need for users to press a series of numbered options on a keypad. Offices either resolve the enquiry with the customer, or arrange a call back. A range of information can be provided to the customer on service-specific adjustments which has been detailed in Appendix B (below).



### VIP (Visual Impairment Priority) Line - Service Adjustments for Customers

Information compiled for the CBC Generic Call Centre VIP Line – launched 2018

	<p><b>WEBSITE</b></p> <ul style="list-style-type: none"> <li>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.</li> <li>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.</li> <li>Other features include: Dual-Colour Highlighting Talking Translator; Secure Site Reading; Text Magnification; MP3 Maker; PDF Reading; Talking Dictionary; Screen Masking; and International Languages</li> </ul>
	<p><b>BRAILLE</b></p> <p>The Council will always consider requests for letters or documents to be produced in Braille.</p>
	<p><b>ELECTIONS</b></p> <p>The Council's Elections Team provides the following adjustments at all elections:</p> <ul style="list-style-type: none"> <li>○ Tactile Template Devices</li> <li>○ Large versions of the printed ballot paper</li> <li>○ A magnifying glass</li> </ul>
	<p><b>RUBBISH AND RECYCLING</b></p> <p>The recycling calendar is available as a PDF and audio version, both of which are downloadable from the website from 1 March (for new 2018-19 calendar)</p>
	<p><b><u>LEISURE WORLD</u></b></p> <p>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 offers:</p> <ul style="list-style-type: none"> <li><a href="#">Phoenix Disability Swimming Club</a> - Various sports hall based activities for people with a range of disabilities including sensory.</li> <li><a href="#">Whiz Kids</a> sessions offer <i>children</i> with disabilities and their families a safe and supportive environment to participate in a variety of sports.</li> <li><a href="#">Endeavour</a> is an activity session on Friday afternoons that offers <i>adults</i> with disabilities access to a range of sports.</li> </ul>

## **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 30 '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 a number of 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**

NEPP offices will be happy to complete a permit application or type a challenge (to a parking notice) on a customer's behalf.



## **MACMILLAN WELFARE RIGHTS**

The team will be happy to order Macmillan information leaflets in a larger font as required.



## **COLCHESTER GOOD GYM**

The Council supports the local Good Gym launched in 2016 which helps promote a healthier lifestyle - whilst reducing isolation and assisting vulnerable people at the same time. The initiative was shortlisted as a finalist in the Voluntary Community Service Award in the 'Who Will Care?' awards.



## **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.



30 October 2018

<b>Report of</b>	<b>Assistant Director of Policy &amp; Corporate</b>	<b>Author</b>	<b>Hayley McGrath</b>
<b>Title</b>	<b>Mid-Year Internal Audit Assurance Report 2018/19</b>		
<b>Wards affected</b>	Not applicable		

## 1.0 Executive Summary

- 1.1 This report summarises the performance of Internal Audit, and details the audits undertaken, between 1 April and 30 September 2018.
- 1.2 The audit plan consists of a mix of regularity, systems and probity audits, and reports are generated for all audits carried out. This report has been designed to show:
- Summary information concerning audits finalised in the period receiving a 'Full' or 'Substantial' assurance rating and more detailed information on those audits receiving a 'Limited' or 'No' assurance rating.
  - The effectiveness of the Internal Audit provider in delivering the service
- 1.3 The key messages are:
- An effective internal audit service was provided during the first half of the 2018/19 financial year.
  - The Visitor Information Centre (VIC) Cash Up, Discretionary Housing Payments and Exceptional Hardship Payments, Council Tax, and Housing Benefits and Local Tax Support Scheme audits have achieved a 'Full' assurance rating.
  - The assurance rating for the Council Tax audit has increased from "Substantial" assurance.
  - Two priority 1, nineteen priority 2 and five priority 3 recommendations have been made. All recommendations have been accepted by management.
  - There is good progress made in implementing and verifying outstanding recommendations.

## 2.0 Recommended Decision

- 2.1 To review and comment on:
- Internal audit activity for the period 1 April – 30 September 2018
  - Performance of internal audit by reference to national best practice benchmarks.

## 3.0 Reason for Recommended Decision

- 3.1. The Accounts and Audit Regulations 2015 require that 'A relevant authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance'. Internal audit is a key element of the Council's corporate governance framework. Robust implementation of audit recommendations gives assurance to members and management that services are operating effectively, efficiently and economically and in accordance with legislative requirements and professional standards.

## 4.0 Alternative Options

4.1 None.

## 5.0 Background Information

### 5.1 Summary of Audits Finalised During the Period

During the period 1 April to 30 September 2018 a total of twelve audits have been finalised. There was no previous audit against which a change of assurance level could be assessed in two cases, including one (Community Hub) where no assurance rating was given. One audit increased its assurance rating whilst in the remaining nine, the audits remained at the same level. A guide to assurance levels is set out at appendix A.

Audit	Assurance Level	Change in Level	Priority of Recommendations			Agreed
			1	2	3	
401 – Cash Up – VIC	Full	►	0	0	0	0
402 – Zone Working	Substantial	►	0	1	2	3
403 – Discretionary Housing Payments and Exceptional Hardship Payments	Full	►	0	0	1	1
404 – Health and Safety	Substantial	►	0	3	1	4
405 – S106 Monies	Substantial	►	0	1	1	2
406 – Homelessness and Housing Advice	Substantial	►	0	1	0	1
407 – Housing Register and Allocations	Substantial	►	0	1	0	1
409 – Council Tax	Full	▲	0	0	0	0
410 – Housing Benefits / Local Tax Support Scheme	Full	►	0	0	0	0
411 – Treasury Management	Substantial	►	0	2	0	2
428 – Community Hub	N/A	N/A	2	8	0	10
430 – Cash Up – Aqua Springs	Substantial	N/A	0	2	0	2

### 5.2 Use of Audit Resources:

	Days	%
Audit days delivered April – September 2018	106.5	32
Audit days remaining	222.5	68
	<b>329</b>	<b>100%</b>

5.2.1 The number of days delivered is in line with the profiled plan. A larger proportion of the plan is delivered in the second half of the year as they relate to key financial control and governance audits which impact on the annual Head of Internal audit Opinion and the Annual Governance Statement. A number of the audits have also been deferred to later in the year, at the request of management, to meet operational requirements.

5.2.2 During the period, seventeen days carried over from 2017/18 in respect of Homelessness and Housing Advice, and the Housing Register and Allocations audits have been delivered. These audits were previously deferred at the request of management due to

changes in legislation that came in to effect on 1 April 2018, and would have impacted on the audit coverage / work undertaken.

### 5.3 Status of all recommendations as at 30 September 2018:

5.3.1 Following the completion of each audit, a report is issued to management, incorporating recommendations for improvement in controls and management's response to those recommendations.

5.3.2 The table below provides a breakdown of the outstanding recommendations as at the 30 September 2018.

	<b>Outstanding Recommendations That Are:</b>			
<b>Date</b>	<b>Implemented &amp; Verified</b>	<b>Awaiting Verification</b>	<b>Not Due</b>	<b>Overdue</b>
30/09/18	148	35	67	0

5.3.3 Progress in following up recommendations has continued throughout the period with revised lists of recommendations provided to the Assistant Directors to enable them to confirm that they have been implemented and for Internal Audit to verify.

5.3.4 Priority continues to be given to those awarded a higher priority rating and/or those that have been outstanding the longest, and work continues with management to arrange for them to be verified and cleared down.

5.3.5 Of the 35 recommendations that are awaiting verification 29 of them relate to IT audits (a net reduction from 48 reported in March 2018).

5.3.6 The "not due" recommendation include those relating to the annual managed audit where it has been agreed that they will be formally followed up as part of the next audit.

### 5.4 Performance of Internal Audit 2018/19 to date – Key Performance Indicators (KPIs):

<b>KPI</b>	<b>Target</b>	<b>Actual</b>
<b><i>Efficiency:</i></b>		
Percentage of annual plan completed (to at least draft report stage)*	<b>35%</b>	<b>33%</b>
Average days between exit meeting and issue of draft report	<b>10 max</b>	<b>4.3</b>
Average days between receipt of management response and issue of final report	<b>10 max</b>	<b>0.5</b>
<b><i>Quality:</i></b>		
Meets CIPFA Code of Practice – per Audit Commission	<b>Positive</b>	<b>Positive</b>
Results of Client Satisfaction Questionnaires (Score out of 10)	<b>7.8</b>	<b>9.3</b>
Percentage of all recommendations agreed	<b>96%</b>	<b>100%</b>

\* As noted in 5.2.1, the audit plan is profiled towards the second half of the year. In addition a number of audits have been deferred, at the request of management, to meet business needs.

5.4.1 The key performance indicators show that the internal audit provider is successfully meeting or exceeding the standards set.

## **5.5 Colchester Borough Homes Limited**

5.5.1 Colchester Borough Homes Limited has its own agreed audit plan which is administered by Mazars LLP, who are also the Council's auditors. The coverage of the plan, and the scope of the audits, is decided by Colchester Borough Homes Limited and in general the audits do not affect the systems operated by the Council.

5.5.2 However, there are a small number of audits that, whilst they are carried out for either Colchester Borough Homes Limited or the Council, have a direct relevance and impact on the other organisation and in these circumstances it is appropriate that the results of the audit are reported to both organisations. These are known as joint audits.

5.5.3 The Homelessness and Housing Advice and the Housing Register and Allocations audits have been completed. Both audits retained a substantial assurance rating with one priority 2 recommendation being raised in each.

## **6.0 Strategic Plan Implications**

6.1 The audit plan has been set with due regard to the identified key strategic risks to the Council and the objectives of the strategic plan to be vibrant, prosperous, thriving and welcoming. Therefore, the audit work ensures the effectiveness of the processes required to achieve the strategic objectives.

## **7.0 Risk Management Implications**

7.1 The failure to implement recommendations may have an effect on the ability of the Council to control its risks and therefore the recommendations that are still outstanding should be incorporated into the risk management process.

## **8.0 Other Standard References**

8.1 There are no direct Publicity, Financial, Consultation, Equality, Diversity, Human Rights, Community Safety or Health and Safety implications as a result of this report.

## **Appendices**

Appendix A – Guide to Assurance Levels

## Guide to Assurance Levels

### Assurance Gradings

Internal Audit classifies internal audit assurance over four categories, defined as follows:

Assurance Level	Evaluation and Testing Conclusion
Full	There is a sound system of internal control designed to achieve the client's objectives. The control processes tested are being consistently applied.
Substantial	While there is a basically sound system of internal control, there are weaknesses, which put some of the client's objectives at risk. There is evidence that the level of non-compliance with some of the control processes may put some of the client's objectives at risk.
Limited	Weaknesses in the system of internal controls are such as to put the client's objectives at risk. The level of non-compliance puts the client's objectives at risk.
No	Control processes are generally weak leaving the processes/systems open to significant error or abuse. Significant non-compliance with basic control processes leaves the processes/systems open to error or abuse.

### Recommendation Gradings

Internal Audit categories recommendations according to their level of priority as follows:

Priority Level	Staff Consulted
1	Major issue for the attention of senior management and the Governance and Audit Committee.
2	Important issues to be addressed by management in their areas of responsibility
3	Minor issues resolved on site with local management.



30 October 2018

Report of	Assistant Director of Policy and Corporate	Author	Carl Free
Title	Annual Health and Safety Review 2018/19		☎ 506579
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 primarily managed by the Strategic Director (with responsibility for Health and Safety), along with the Corporate Health and Safety Officer and Designated Officers within services, who form the Health and Safety Committee.
- 1.3 The Health and Safety policy is reviewed annually to ensure that it is still appropriate to the Council's needs, and continues to be effective in identifying and mitigating health and safety risks.

## 2. Recommended Decision

- 2.1 Approve the Health and Safety Policy for 2018/19 and recommend it to full Council for inclusion in the policy framework.
- 2.2 Review and comment on the Council's progress and performance in managing Health & Safety during the period October 2017 to September 2018.

## 3. Reason for Recommended Decision

- 3.1 The Health and Safety Policy is included in the Council's Policy Framework and forms 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.

## **5. Background Information**

### **5.1 Health and Safety Policy**

- 5.2 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.
- 5.3 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 successfully manage health and safety.
- 5.4 It is good practice to regularly ensure that the policy, and arrangements, continue to meet the Council's needs. Therefore a review has been undertaken and the revised policy is attached at appendix A, and the revised arrangements are attached at appendix B. It is considered that the policy and arrangements continue to meet the Council's needs and therefore there are no fundamental changes proposed.

### **5.5 Health & Safety performance during 2017/18**

- 5.6 Audits of services and arrangements have been continued by the Corporate Health & Safety Officer for 2018. These have been completed for Community Zones, Parks and Recreation, Corporate Facilities Management and Manual Handling. Action plans have been produced, however there were no significant risks identified. Countryside and Health and Safety Training audits are upcoming.
- 5.7 Following the previous year's Lone Working audit, the significant finding was: "the CRISYS lone working monitoring system is not used by lone workers and not considered adequate" and therefore an alternative system was investigated by the Corporate Health and Safety Officer. The Skyguard MySOS personal monitoring device was chosen and implemented as the corporate approach, with 50 devices shared across approximately 90 lone workers. The new system is a device which utilises GPS tracker and an alarm, which when activated is responded by Skyguard, with two way communication via the device and assistance from emergency services as required. Initial feedback has been positive, with users stating the Skyguard devices are working well and is easy to use.
- 5.8 The internal audit of health and safety at Colchester Borough Council provided an opinion of "Substantial Assurance".
- 5.9 Fire Risk Assessments for all corporate buildings (primarily used as CBC staff workplaces) were reviewed and updated to a new more comprehensive but easier to use format. These premises have all been considered suitable with good management of fire risks and no recommendations were identified at a high risk rating. A review of the fire risk assessments and action plans was completed, with the majority of actions identified having been completed.
- 5.10 Near miss reporting is continued to be encouraged as this helps management resolve concerns or issues before they become a potential incident and injury. A near miss report card was produced to further encourage reporting from employees without immediate computer access.
- 5.11 Health and Safety training continues to be well attended with approximately 250 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
- Personal Stress and Wellbeing awareness
- Health and Safety Induction

## **6. Equality, Diversity and Human Rights implications**

- 6.1 There are no equality, diversity or Human Rights implications as a result of this report.

## **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 is included in Document Information section of the policy.

## **9. Health and Safety Implications**

- 9.1 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.

## **10. Risk Management Implications**

- 10.1 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.

## **11. Other Standard References**

- 11.1 There are no particular references to publicity considerations, and no particular financial nor health, wellbeing and community safety implications.

## **Appendices**

Appendix A – Health and Safety Policy

Appendix B – Health and Safety Arrangements

## **Background Papers**

N/A





# Health and Safety Policy 2018/19

October 2018

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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

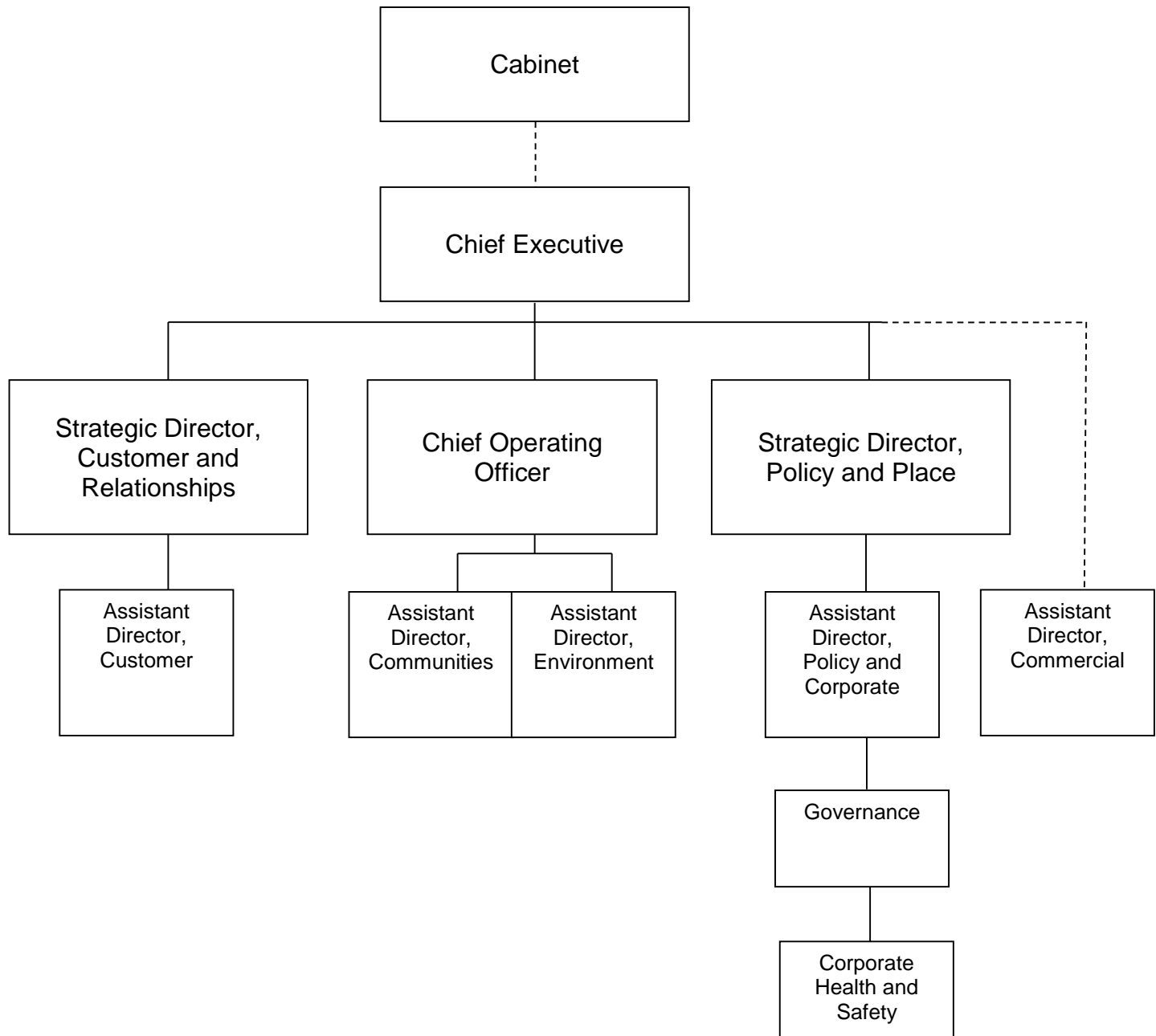
13 June 2018



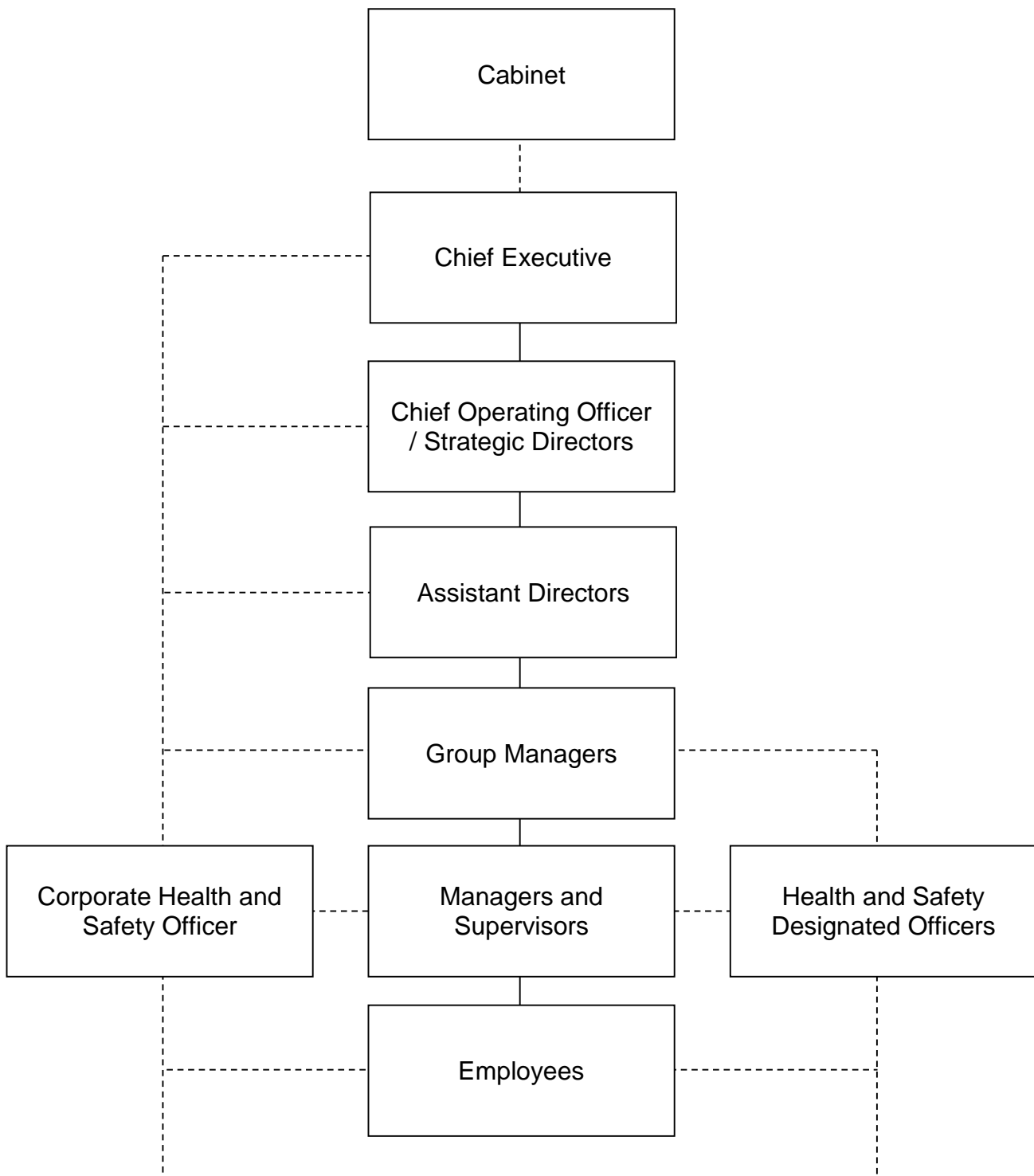
Adrian Pritchard  
Chief Executive

### 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.

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## 4.2 Strategic Director (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 Chief Operating Officer and Strategic Director**

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.

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## 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.

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## 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.



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## 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

<b>Title :</b>	Health and Safety Policy
<b>Status :</b>	Final
<b>Version :</b>	8.1 - October 2018
<b>Consultation :</b>	SMT, Health and Safety Committee, and Unison
<b>Approved By :</b>	SMT and Governance and Audit Committee
<b>Approval Date :</b>	October 2018
<b>EQIA :</b>	Yes - <a href="#">link</a>
<b>Review Frequency :</b>	Annually or if change occurs (and a comprehensive review every three years)
<b>Next Review :</b>	October 2019

### 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

## 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](mailto: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

Regulation 3 of the Management of Health and Safety at Work Regulations 1999 requires that employers carry out an assessment of reasonably foreseeable risks that may be faced by employees and anyone else affected by their activities.

The Health and Safety Officer has produced a bank of generic risk assessments which Managers and Health and Safety Designated Officers can then use to make specific for particular tasks. These are published on COLIN along with a blank template which can be downloaded and completed as appropriate.

Following this process, appropriate control measures are then put in place to reduce risks as far as reasonably practicable. We apply control measures in line with the generally accepted hierarchy of control:

Eliminate → Reduce → Isolate → Control → PPE → Discipline

COSHH assessments are carried out for all hazardous substances used in the workplace. Assessments of typical hazardous substances are published on COLIN for Managers to use and amend for their needs.

Fire Risk Assessments are carried out for each Council corporate workplace. A copy of each is held centrally and also at the site concerned.

It is our policy to communicate relevant risk assessments to all employees during their initial induction and at regular intervals. We also communicate any changes that have been made following a review.

Unless any changes occur to the processes, machinery used, people carrying out the work, or following an incident, we review our risk assessments on an annual basis to ensure that they remain relevant.

### 5.2 Hot Work Permits

Where work is carried out that creates a source of ignition, a hot work permit is required. This is to give the worker permission to carry out the work providing necessary precautions are taken.

Fire watches are required in line with the permit. Permits should only be cancelled by an authorised person after they are satisfied that all the conditions are met.

The necessary precautions are described on our standard permit which is available on COLIN.

### **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 are given a company induction which includes the following:

- Health and safety information;
- Emergencies and fire arrangements;
- Welfare facilities and first aid;
- Accidents and hazard reporting;
- Risk assessments and training;
- Work prohibitions; and
- Personal protective equipment.

### **6.2 Training**

A training matrix is in place which details mandatory health and safety training for all employees and recommended training for specific services/employees.

Mandatory training for is provided by the Health and Safety Officer and recommended training will be provided as decided by the Corporate Health and Safety Officer. Managers are responsible for providing recommended training within their services.

The e-learning portal also provides additional training that employees are encouraged to complete.

### **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.

## **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 Procedures**

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 for each site are responsible for 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 insulated equipment: Fans Table Lamps (not hand held & moved occasionally)	No	Yes: 2 – 4 years	No
Class II Double insulated 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
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## 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 has 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  
**11**

30 October 2018

<b>Report of</b>	<b>Assistant Director of Policy and Corporate</b>	<b>Author</b>	<b>Jonathan Baker</b>
			 <b>282207</b>
<b>Title</b>	<b>Work Programme 2018-19</b>		
<b>Wards affected</b>	Not applicable		

### 1. Executive Summary

- 1.1 This report sets out the current Work Programme 2018-2019 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 Committee's Work Programme for 2018-19.

### 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.
- 4.3 Due to the number of items originally scheduled for the October Governance and Audit Committee, an additional meeting has been scheduled for 13 November.
- 4.4 The March meeting of the Governance and Audit meeting will now take place two days later on Thursday 7 March. This is due to an event taking place at the Town Hall on the previously scheduled date.

### 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 2018-19**

<b>Meeting date / Agenda items</b>
<b>Governance and Audit Committee - 5 June 2018</b>
<b>Governance and Audit Committee briefing – 31 May 2018</b>
<ol style="list-style-type: none"> <li>1. 2018/19 Audit and Certification Fees letter</li> <li>2. Draft Annual Statement of Accounts 2017/18</li> <li>3. Year End Internal Audit Assurance Report 2017/18</li> <li>4. Review of the Governance Framework and Draft Annual Governance Statement</li> <li>5. Committee on Standards in Public Life Consultation on Local Government Ethical Standards Response</li> </ol>
<b>Governance and Audit Committee - 10 July 2018</b>
<b>Governance and Audit Committee briefing – 3 July 2018</b>
<ol style="list-style-type: none"> <li>1. Annual Statement of Accounts 2017/18</li> <li>2. Review of Meetings and Ways of Working Update</li> </ol>
<b>Governance and Audit Committee - 4 September 2018</b>
<b>Governance and Audit Committee briefing – 28 August 2018</b>
<ol style="list-style-type: none"> <li>1. Colchester Borough Homes Annual Report and Governance Statement</li> <li>2. 2017/18 Year End Review of Risk Management</li> <li>3. Annual Audit Letter</li> <li>4. Publication of Annual Statement of Accounts 2017/18</li> <li>5. Financial Monitoring Report – April to June 2018</li> <li>6. Capital Expenditure Monitor 2018/19</li> </ol>
<b>Governance and Audit Committee - 30 October 2018</b>
<b>Governance and Audit Committee briefing – 23 October 2018</b>
<ol style="list-style-type: none"> <li>1. Local Government and Social Care Ombudsman Annual Review 2017/18</li> </ol>



<ul style="list-style-type: none"> <li>2. Mid-Year Internal Audit Assurance Report 2018/19</li> <li>3. Health and Safety Policy and Annual Report</li> <li>4. Equality and Safeguarding Annual Update</li> </ul>
<b>Governance and Audit Committee – 13 November 2018</b>
<b>Governance and Audit Committee Briefing – 8 November 2018</b>
<ul style="list-style-type: none"> <li>1. Treasury Management – Half Yearly Update</li> <li>2. Review of the Council's Ethical Governance Policies</li> <li>3. Review of the Members' Code of Conduct and the Council's "Arrangements"</li> <li>4. Gifts and Hospitality – Review of Guidance for Councillors and Policy for Officers</li> <li>5. Review of Local Code of Corporate Governance</li> <li>6. Income and Debt Policy</li> <li>7. Member/Officer Protocol Review</li> </ul>
<b>Governance and Audit Committee - 15 January 2019</b>
<b>Governance and Audit Committee briefing – 8 January 2019</b>
<ul style="list-style-type: none"> <li>1. Certification of Claims and Returns – Annual Report 2017/18</li> <li>2. Interim Review of the Annual Governance Statement Action Plan</li> <li>3. Risk Management Progress Report</li> <li>4. Annual Review of Business Continuity</li> </ul>
<b>Governance and Audit Committee - 7 March 2019</b>
<b>Governance and Audit Committee briefing – 26 February 2019</b>
<ul style="list-style-type: none"> <li>1. External Audit Plan for year ending 31 March 2019</li> <li>2. Financial Monitoring Report</li> <li>3. Capital Expenditure Monitor 2018/19</li> <li>4. Internal Audit Plan 2018/19</li> </ul>

