

Governance and Audit Committee Meeting

**Moot Hall, Town Hall, High Street,
Colchester, CO1 1PJ
Tuesday, 19 October 2021 at 18:00**

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

Information for Members of the Public

Access to information and meetings

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

<https://colchester.cmis.uk.com/colchester/MeetingCalendar.aspx>.

Most meetings take place in public. This only changes when certain issues, for instance, commercially sensitive information or details concerning an individual are considered. At this point you will be told whether there are any issues to be discussed in private, if so, you will be asked to leave the meeting.

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

Accounts and Audit

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

Governance

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

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

Other regulatory matters

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

To determine and approve Community Governance Reviews.

Standards in relation to Member Conduct

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

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

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

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

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

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

General

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

COLCHESTER BOROUGH COUNCIL
Governance and Audit Committee
Tuesday, 19 October 2021 at 18:00

The Governance and Audit Committee Members are:

Councillor Dennis Willetts	Chairman
Councillor Leigh Tate	Deputy Chairman
Councillor Kevin Bentley	
Councillor Michelle Burrows	
Councillor Adam Fox	
Councillor Chris Hayter	
Councillor David King	
Councillor Steph Nissen	
Councillor Gerard Oxford	

The Governance and Audit Committee Substitute Members are:

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

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

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

1 Welcome and Announcements

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

2 Substitutions

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

3 Urgent Items

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

- 4 **Declarations of Interest**
Councillors will be asked to say if there are any items on the agenda about which they have a disclosable pecuniary interest which would prevent them from participating in any discussion of the item or participating in any vote upon the item, or any other pecuniary interest or non-pecuniary interest.
- 5 **Minutes of Previous Meeting**
The Councillors will be invited to confirm that the minutes of the meeting held on 7 September 2021 are a correct record.
- Draft minutes - 07-09-2021** 7 - 16
- 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 and Social Care Ombudsman – Annual Review Letter 2021** 17 - 24
The Committee will consider a report providing details of Colchester Borough Council’s Annual Review Letter for 2021.
- 8 **Health and Safety Report 2020/21** 25 - 70
The Committee will consider a report setting out the 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, that Colchester Borough Council has to ensure that employees, and others who may be affected, can work safely without risk to their safety or health.
- 9 **Colchester Borough Homes Annual Governance Statement 2020/21** 71 - 80
The Committee will consider a report setting out the Governance Assurance Statement of Colchester Borough Homes.
- 10 **Verbal update on digital meetings following Covid-19**
The Committee will receive a verbal update on digital meetings following the Covid-19 pandemic.
- 11 **Assurance on Council’s Cyber Security provision** 81 - 84
The Committee will consider a report providing an overview as to how Colchester Borough Council ensures appropriate levels of Cyber Security are maintained and monitored.

12 **Work Programme 2020-2021**

85 - 88

The Committee will consider a report setting out its work programme for the current municipal year.

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

7 September 2021

Present:- Councillor Kevin Bentley, Councillor Michelle Burrows, Councillor Adam Fox, Councillor Chris Hayter, Councillor David King, Councillor Steph Nissen, Councillor Leigh Tate, Councillor Dennis Willetts (Chairman)

Substitutions: None

Also Present:- Councillor Sue Lissimore, Portfolio Holder for Resources

271. Minutes of the previous meeting

RESOLVED that the minutes of the meeting held on 27 July 2021 be confirmed as a correct record.

272. Financial Monitoring Report – April to June 2021

Paul Cook, Head of Finance, attended the meeting to present the report and assist the Committee with its enquires. The Committee heard that the monitoring report for first quarter of the financial year 2021/2022 showed an expected outturn of £146,000 on the General Fund, with the Housing Revenue Account expected to be on budget by year end. Given the difficult circumstances of the previous year, it was felt that this was a very satisfactory financial position to be in. During the first quarter, Colchester Borough Council (the Council) had benefitted from the Ministry of Housing, Communities and Local Government (MHCLG) funding by way of an income loss grant which had helped the financial position significantly. It was considered that, taking into account the difficulties of the recent past, there was a good prospect to remain within budget in the current financial year, which would assist with setting the budget for the forthcoming financial year.

Councillor Willetts noted the inherent difficulty with predicting the end of year financial position so early in the financial year, but was pleased to hear that the finances appeared to be in a strong position. He queried the fact that money received via the government's income loss funding was not shown in the report against specific service items, which made it difficult to determine whether or not the services were actually in a good or bad position. Paul Cook confirmed that more detailed information was readily available on this subject, and agreed that he would circulate this to the Committee after the meeting.

Councillor Bentley requested that information on money that had been received from government be included in future monitoring reports in order to provide clarity to the public about where income had come from, and how it had been allocated.

Councillor King supported this request and would welcome additional clarity in future reports. He noted the projected forecast outturn of £146,000, and requested clarification on how much certainty could be placed on this estimate at this stage in the financial year. In addition, he noted a saving of £300,000 had been made on interest payable and a further £300,000 had been received by way of income support, and he requested confirmation that the total benefit of £600,000 had been factored into the calculations. He asked whether an overview of the risks and variables associated with the financial monitoring work could be given.

Paul Cook confirmed that the figures that had been identified had been included in all calculations, and he reiterated the difficulties associated with predicting the Council's financial position based on the relatively small amount of information that was available in quarter one. Early income forecasts tended to be prudent, and it was considered that the current position was a promising one as in previous financial years a higher predicted overspend had been forecast in quarter one. Because of the unusual circumstances there was a continuing need to be vigilant as long term economic recovery was not certain, however, the Council was in a good position at this stage, and this would be carefully monitored.

Councillor King sought additional clarity with regard to the managerial response in relation to the Council's waste services, seeking an assurance as to what steps had been taken to ensure the stability of the service as it sought to recover from the pandemic.

Rosa Tanfield, Group Manager – Neighbourhood Services, confirmed that the last eighteen months had been an incredibly challenging time, not only in relation to delivering the required services, but also ensuring that the Council's workforce had been protected, and it had been necessary to redeploy staff and make use of agency staff to ensure the continuation of service provision. Of key importance had been the support offered to staff during this time, and the Committee was assured that the budget of the service was monitored very closely to ensure that core services continued to be provided without reduction, and that these also represented good value for money.

In response to a request from the Committee, Paul Cook confirmed that future financial monitoring reports would include more information in relation to confidence limits associated with income prediction, to give the Committee a sense of how much volatility was associated with the financial position.

Councillor Willetts observed that information had been given in the report that income targets in relation to the trade waste function of the Council had not been met. Given that the collection of trade waste was not a statutory duty of the Council, he wondered why this activity had not been assigned to one of the Council's commercial companies to manage as profitably as possible.

Dan Gascoyne, Chief Operating Officer, confirmed that there were a number of reasons that the service was managed internally, including VAT advantages which meant that the Council could be competitive with commercial providers. Although using the Council's commercial companies had not been considered for the management of trade waste collection, it would be possible to consider this.

With regard to the loss of trade waste income, Rosa Tanfield explained to the Committee that over the past year many businesses had been impacted by the pandemic with the result that they had produced less waste, which had in turn impacted on the revenue generated by the trade waste service of the Council. The Committee heard that there was no particular reason that the trade waste service was delivered through the Council's Environmental Service, however, from an operational point of view trade waste collection fitted in very well with the Council's staff, existing fleet of vehicles and other services which were provided.

RESOLVED: that the Committee had the financial performance of General Fund Services and the Housing Revenue Account (HRA) for the first three months of 2021/22, and that the forecast budget overspend of £146k on the General Fund be noted.

273. Capital Monitoring Report Quarter 1 – 2021/2022

Councillor Bentley declared a non-pecuniary interest in this item by virtue of his role as Leader of Essex County Council, and the information presented in relation to the Shrub End Depot project.

Paul Cook, Head of Finance, attended the meeting to present the report and assist the Committee with its enquires. The Committee heard that capital expenditure had been £7.7m against a forecast programme of £84.7m, which represented an expenditure of 9% of the projected budget. This represented a slow start which was attributable to the labour and supply issues experienced as a result of the pandemic and represented a similar position to the last financial year. Careful monitoring would be required in quarters three and four to ensure that progress was delivered. The attention of the Committee was drawn to the schedule of projects set out in the report, each of which was attributed a red, amber or green (RAG) rating, with explanations for the rating provided.

Rosa Tanfield, Group Manager – Neighbourhood Services, attended the meeting to provide the Committee with an update on the Shrub End Depot project. The Committee heard that after a faltering start to the project, good progress was now being made, with changes being made to the site to improve things for staff as well as variety of works to ensure safety. In the coming weeks work would be undertaken which would include the provision of a new crew shelter, car park improvements, new fencing and drainage works. Work was continuing with design work on the larger elements of the project which would go to tender to determine the overall costs of the project. Although good progress was being made in all areas, the

Committee were reminded that as with all construction projects there remained some risks in relation to budget and timeline and in particular material availability. The Committee were assured that the project was the subject of close monitoring to ensure that value for money was obtained, and overall good progress was being made.

Councillor Willetts acknowledged the need for short term work to be carried out on the Shrub End site to improve facilities for staff to make it a safer and more comfortable site to work from. He noted that Essex County Council were considering a waste transfer station at Ardleigh, and sought assurances that the improvement works currently being carried out at Shrub End were necessary short term modifications and that the longer term plan would be to align with Essex County Council to ensure that improvements had value in the future.

Rosa Tanfield confirmed that the current works represented a short to medium term series of improvements which were targeted to meet the immediate needs of staff, and that wherever possible consideration was given to improvements made which could be adapted or moved if there was any change to the site in the future. The longer term position of the site had yet to be explored, and there were a number of things to consider including not only the recycling and refuse operation but also the Council's ambition to move to an electric vehicle (EV) fleet and the infrastructure needed to support this. The Environment Bill was also likely to have far reaching implications for the site, and all these factors needed to be given careful consideration to ensure that any changes that were made represented good value for money.

Councillor Lissimore, Portfolio Holder for Resources, assured the Committee that there was no intention to spend money on a site that was going to be scrapped, and of key importance was the fact that the project could be moved in the future if need be. The works that were being carried out would bring significant improvements to staff in the short term, and discussions had taken place with the Cabinet Member for Waste and Environment of Essex County Council with a view to establishing the long term future of the site to ensure that the best use was made of it.

Councillor King praised the work that was being undertaken to adapt the site to the current circumstances, and although he noted that project had taken a while to get off the ground he offered his full support to the project and was very pleased that it was taking place. Greater communications with Essex County Council were welcomed, however, he stressed that working with the County Council should not come at the detriment of the excellent waste collection and recycling services currently being provided by the Council.

Councillor Willetts advised the Committee that action that was taken on the Shrub End site would be the subject of a Cabinet decision, and the paper that had been presented to the Committee was for their information, and to note only.

Councillor Fox enquired what the potential of labour shortages and supply issues was for causing difficulties with the capital budget, and whether any specific work

had been carried out on the risk of inflationary pressures in the budget causing some of the capital projects to go over budget or become undeliverable.

Paul Cook confirmed that the Council was aware of inflation supply risks, and although some projects had already been tendered, this was something that would be considered carefully in the future. There would be a comprehensive review of the capital budget when setting the budget for the financial year 2022/2023. In response to a further question from Councillor Fox in relation to house prices associated with Council capital housing projects, the Committee heard that if a significant cost variation was identified then this would be reported to Cabinet.

Councillor Willetts noted that a comprehensive review had been carried out of the capital programme and wondered whether or not the difficulties currently being experienced in the building trade with regard to the supply and cost of materials had been factored into the project RAG ratings. Paul Cook advised the Committee that as far as possible all these factors had been considered, and that at the start of the financial year it had not been certain that progress would be able to be made on capital projects at all, but thankfully the position had improved since then. More detailed analysis would be provided as part of the quarter two monitoring report presented to the Committee.

Councillor Bentley suggested that capital projects should be accompanied by a risk register in order to monitor the impact that external factors could have on projects to ensure clarity for the public. He noted that the Stanway Community Centre project had a shortfall of money, and he wondered what confidence there was that the shortfall could be made up, and from where.

Paul Cook confirmed that when projects were brought into the capital programme, funding assumptions were made in order to calculate the budget but that these assumptions were subject to change and would be picked up at the next review. With regard to risks, the Committee were advised that the Council took a corporate approach to risk management and it was essential that a balanced approach be adopted to any risk reporting associated with capital projects. Further consideration could be given to risk management as part of the next monitoring report.

Councillor King considered that it was important to understand the pressures that were being faced, and how these fitted into budgetary position. When considering the RAG ratings for the capital programme, Councillor King felt that the number of red and amber rated projects could be cause for alarm, and he sought assurance that there was confidence that the programme would be able to be delivered, with more information on risk and contingency presented to the Committee in the future.

By way of response, Dan Gascoyne gave his opinion that the number of red and amber RAG ratings assigned to projects was not cause for alarm, but rather evidence of clear analysis and transparency when considering projects. The Committee were reminded that the report only dealt with quarter one, and that more detailed updates would be expected as the year unfolded. Assurance was given that the programme was carefully monitored by the Council's Senior Management Team and Officers, and all the risks associated with projects were being actively managed.

Councillor Willetts noted the difficulty that had been experienced with the procurement of vehicles for the Council's fleet to replace and upgrade existing vehicles, and he wondered if an opportunity had presented itself to re-tender for vehicles which were not powered by internal combustion engines, but rather by electric or hydrogen engines, and which would therefore support the Council's own climate emergency declaration. Dan Gascoyne confirmed that the schemes which had been referred to were consistent with the Council's fleet transition strategy which would deliver carbon neutrality by 2030. Although there may be an opportunity to re-tender with different contract specifications, the delays that this may incur could lead to additional expense. Rosa Tanfield confirmed to the Committee that since the report had been published, significant progress had been made with regard to the procurement of caged tipper vehicles, and this project was now moving towards a green RAG rating. The other project that had been referred to by Councillor Willetts was light fleet replacement, which was concerned with the procurement of electric vehicles (EV) which the first step to bringing in an EV fleet, together with the necessary infrastructure to support this.

RESOLVED: that the contents of the report be noted.

274. Treasury Management – Annual Review 2020/2021

Paul Cook, Head of Finance, attended the meeting to present the report and assist the Committee with its enquires. The Committee heard that the financial year 2020/2021 had been a fast moving year from the point of view of treasury management, and the receipt of significant sums of money from MHCLG with very little warning had made it difficult to invest this money sensibly on the money markets. Praise was offered to Officers who had done a fantastic job in delivering a successful treasury management strategy under these circumstances. Because of delays to capital projects, there had been a reduced need to borrow at the anticipated level, and it was considered that the year had been a very successful one. It was confirmed to the Committee that there had been no significant changes to the Treasury Management Policy, and it was confirmed that the Council had a 'low risk appetite' towards investments.

Councillor King made an enquiry for some context around the borrowing limits of the Council, and how close to the limits of what was possible was the Council currently operating. Paul Cook confirmed that the borrowing that took place was based on affordability, and a lot of the Council's borrowing related to the housing revenue account which was the subject of a thirty year business plan which was constantly evolving. As part of the capital programme review, care was taken to ensure that there was sufficient provision for the Council's planned borrowing requirements. Mark Jarvis confirmed that the Council needed to be careful with its borrowing, and that this was monitored on an annual basis. With regard to the Turnstone development, Councillor King presumed that this was still on track, and that there may need to be an adjustment to the Council's borrowing limit to reflect this. It was confirmed that it was a technical requirement that it was necessary to account for

part of the Turnstone funding against these limits, but the scheme was going forward as had been reported to Cabinet.

RESOLVED that:

- The Committee noted the Treasury Management Annual Review for 2020/2021
- The Council's increase in borrowing to fund the capital programme be noted
- The Committee noted the satisfactory performance of Link Asset Services

275. Revised Timetable to finalise the audit of the Statement of Accounts 2020/2021

Paul Cook, Head of Finance, attended the meeting to present the report and assist the Committee with its enquires. The Committee heard that the Finance Team had done very well to prepare the draft Statement of Accounts within a very tight timescale, but unfortunately the Council's external auditors, BDO, had been delayed due to escalating audit requirements both locally and nationally. Following discussions with BDO, it was now proposed to present the draft Statement of Accounts to The Governance and Audit Committee at its November meeting. The Committee were assured that it was very rare for the draft Statement of Accounts to be presented to the Committee late, and there was little that officers could do to remedy this apart from providing BDO with the resources that they needed. Confidence had been expressed that the draft Statement of Accounts would be ready to present to the November meeting of this Committee. The reason for the delay would need to be published on the Council's website.

Mark Jarvis, Finance Manager, confirmed that the audit had now commenced, and it was planned to finish the main work required by the end of October to facilitate the presentation of the report to the Governance and Audit Committee in November. #

Councillor Willetts noted that it was particularly galling that officers had worked extremely hard to support the audit, only to be let down by the Council's external auditor.

Councillor Bentley asked for clarification on the reason for the delay, and further wondered whether this would be reflected in the fee that the Council was charged for the audit service. Paul Cook explained that unfortunately the fee would not be reduced, and in fact fees were likely to increase over the coming years. The reasons for the delay included delays in the audits of other local authorities and the lack of resources to carry out the audits, and it was felt that the planning had been unsatisfactory. The situation was a national one which was being looked into by MHCLG and Public Sector Audit Appointments (PSAA), and the new potential regulatory body for external audit. Better results were hoped for in the future, but the situation was being monitored very closely. Councillor Bentley suggested that a strongly worded letter be written by the Chair of the Governance and Audit Committee expressing dissatisfaction with the position, a suggestion that was fully supported by Councillor Fox. He stated that having the Council's accounts audited

was an important part of good governance, and Colchester Borough Council was clearly not the only local authority that had been placed in this position. Councillor Fox suggested that it may be more appropriate to write to the Secretary of State and PSAA, together with the local Members of Parliament, to put on record strongly but politely the Committee's displeasure at the state of the system. Councillor King added his support for the proposal, and was keen to emphasise that officers were not to blame for this situation.

RESOLVED that:

- That the revised timetable for the presentation of the draft Statement of Accounts be noted
- The requirement to issue a public notice for late publication of the Statement of Accounts be noted
- A letter be written expressing the displeasure of the Committee to the Secretary of State and Public Sector Audit Appointments.

276. Review of the Council's Processing of Special Category & Criminal Convictions Personal Data Policy

Nicola Cooke, Information Services Manager, attended the meeting to present the report and assist the Committee with its enquiries. The Committee were advised that Colchester Borough Council (the Council) had a need as a local authority to have a policy that covered the processing of the Council's Special Category and Criminal Convictions Data, and this Policy was a requirement of the Data Protection Act 2018. The proposed Policy covered additional information which was processed under certain circumstances, and covered the distinction between personal data, special category data and criminal convictions information. There were only a limited number of areas of the Council which processed this kind of data routinely, however, there was a requirement to implement measures to ensure the safety of personal data. The proposed Policy was a new Policy which the Committee were asked to read, review and approve for inclusion in the Council's Policy Framework.

Councillor Willetts praised the clarity of the proposed Policy, and expressed surprise that the information classed as special category data was not already covered by the Council's procedures which had been designed to provide comprehensive protection to personal data. He enquired whether there was, in reality, a real change in what the Council had to do to, to meet the requirements of the legislation in respect of special category data.

Nicola Cooke confirmed that the Council's processes and procedures were already in line with the requirements of the legislation, however, when the legislation had been introduced there had been significant ambiguity as to whether existing data protection policies would cover the processing of special category data. The Council had initially included special category and criminal conviction data within its original Data Protection Policy, however guidance now issued by the Information Commissioners Office stated that two separate policies were required. The Committee were assured that all the correct processes and procedures were being

followed, and had always been followed, with regard to the legislative requirements of processing special category data, and appropriate controls were in place. It was confirmed to the Committee that existing information technology that was used was already compliant with the requirements of the Policy, and a data protection impact assessment was carried out when a new computing system was introduced to ensure that the required safeguards remained in place. In addition to this, as part of the Council's procurement process, suppliers were now being asked what measures they put in place to ensure that data was secured, particularly in cloud based systems.

Councillor Bentley voiced his support for the proposed Policy, and considered that its implementation was necessary and appropriate.

RESOLVED: that the Processing of Special Category & Criminal Convictions Personal Data Policy be adopted and *RECOMMENDED TO COUNCIL* that it be included in the Council's Policy Framework.

277. Work Programme

Matthew Evans, Democratic Services Officer, attended the Committee to present the report and assist the Committee with its enquiries.

RESOLVED that: the content of the Work Programme be agreed.



Governance and Audit Committee

Item
7

19 October 2021

Report of	Monitoring Officer	Author	Andrew Weavers
Title	Local Government and Social Care Ombudsman – Annual Review Letter 2021		
Wards affected	Not applicable		

1. Executive Summary

- 1.1 The Local Government & Social Care Ombudsman produces an Annual Review Letter on the number of complaints it has received regarding each local authority. This report provides details of Colchester Borough Council's Annual Review Letter for 2021.

2. Recommended Decision

- 2.1 To note the contents of the Local Government & Social Care Ombudsman's Annual Review Letter for 2021.

3. Reasons for Recommended Decision

- 3.1 To inform the Committee of the contents of the Local Government & Social Care Ombudsman's Annual Review Letter relating to Colchester Borough Council for 2021.

3. Alternative Options

- 3.1 No alternative options are presented.

4. Supporting Information

- 4.1 The Local Government & Social Care Ombudsman issues an Annual Review Letter to each local authority. The Annual Review Letter for Colchester for the period ending 31 March 2021 is attached to this report at Appendix 1.
- 4.3 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.
- 4.4 The Annual Review Letter states that at the end of March 2020 the Local Government & Social Care Ombudsman took the unprecedented step of temporarily stopping its casework in the wider public interest, to allow authorities to concentrate efforts on vital frontline services during the first wave of the Covid-19 outbreak. Casework was restarted in late June 2020, after a three month pause. Accordingly, this needs to be taken into account when comparing performance data with previous years.

4.5 A report on the contents of the Annual review Letter were agreed by Cabinet at its meeting on 1 September 2021.

5. Key Headlines

5.1 There were no findings of maladministration or public interest reports issued against the Council.

5.2 The Local Government & Social Care Ombudsman Annual Review Letter focuses on the outcomes of complaints and what can be learned from them. The statistics are on 3 key areas:

(i) Complaints upheld - The Ombudsman upholds complaints when it finds some form of fault in an authority's actions, including where the authority accepted fault before it investigated.

(ii) Compliance with recommendations - The Ombudsman recommends ways for authorities to put things right when faults have caused injustice and monitor their compliance with its recommendations. Failure to comply is rare and a compliance rate below 100% is a cause for concern.

(iii) Satisfactory remedies provided by the authority – In these cases, the authority upheld the complaint and the Ombudsman agreed with how the authority offered to put things right. The Ombudsman encourages the early resolution of complaints and credit authorities that accept fault and find appropriate ways to put things right.

The Ombudsman compares the three key annual statistics for each authority with similar types of authorities to work out an average level of performance.

	Period ending 31/03/21	Period ending 31/03/20
Complaints Upheld	No detailed investigations carried out	1
Compliance with Ombudsman's recommendations	No recommendations due for compliance	100%
Satisfactory remedies provided by the authority	No detailed investigations upheld	0

5.3 The following table provides a comparison of complaints and enquires received. (NB. categories are those used by the Ombudsman)

Year	Benefits and Tax	Corporate and other services	Environmental Services & Public Protection & Regulation	Highways and Transport	Housing	Planning and Development	Other	Total
2020/21	2	1	4	4	1	3	0	15
2019/20	3	1	5	3	6	2	0	20
2018/19	0	1	4	0	5	10	0	20
2017/18	1	1	5	2	8	3	1	21
2016/17	2	0	2	0	5	7	0	16
2015/16	3	2	3	2	6	8	0	25

5.4 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	
2020/21	1	0	5	7	0	0	N/A	13
2019/20	2	0	9	6	3	1	25%	21
2018/19	2	1	4	10	3	3	50%	23
2017/18	1	2	8	5	4	1	20%	21
2016/17	0	1	4	5	2	1	33%	13
2015/16	2	3	12	4	1	1	50%	23

5.5 The following table shows Colchester's performance compared with other Borough and District Councils in Essex.

Name	Complaints Upheld % (numbers)	Compliance with recommendations	Satisfactory remedies provided by Council (numbers)
Basildon	0% (0)	None	None
Braintree	None	None	None
Brentwood	67% (2)	100%	0% (0)
Castle Point	100% (1)	100%	0% (0)
Chelmsford	0% (0)	None	None
Colchester	None	None	None
Epping Forest	67% (2)	100%	0% (0)
Harlow	100% (1)	100%	0% (0)
Maldon	0% (0)	None	None
Rochford	50% (1)	100%	0% (0)
Tendring	0% (0)	100%	None
Uttlesford	100% (1)	None	0% (0)

6. Strategic Plan References

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

7. Publicity Considerations

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

8. Financial, Equality, Diversity and Human Rights, Consultation, Community Safety, Health and Safety, Risk Management and Environmental and Sustainability Implications

8.1 No direct implications.

21 July 2021

By email

Mr Pritchard
Chief Executive
Colchester Borough Council

Dear Mr Pritchard

Annual Review letter 2021

I write to you with our annual summary of statistics on the decisions made by the Local Government and Social Care Ombudsman about your authority for the year ending 31 March 2021. At the end of a challenging year, we maintain that good public administration is more important than ever and I hope this feedback provides you with both the opportunity to reflect on your Council's performance and plan for the future.

You will be aware that, at the end of March 2020 we took the unprecedented step of temporarily stopping our casework, in the wider public interest, to allow authorities to concentrate efforts on vital frontline services during the first wave of the Covid-19 outbreak. We restarted casework in late June 2020, after a three month pause.

We listened to your feedback and decided it was unnecessary to pause our casework again during further waves of the pandemic. Instead, we have encouraged authorities to talk to us on an individual basis about difficulties responding to any stage of an investigation, including implementing our recommendations. We continue this approach and urge you to maintain clear communication with us.

Complaint statistics

This year, we continue to focus on the outcomes of complaints and what can be learned from them. We want to provide you with the most insightful information we can and have focused statistics on three key areas:

Complaints upheld - We uphold complaints when we find some form of fault in an authority's actions, including where the authority accepted fault before we investigated.

Compliance with recommendations - We recommend ways for authorities to put things right when faults have caused injustice and monitor their compliance with our recommendations. Failure to comply is rare and a compliance rate below 100% is a cause for concern.

Satisfactory remedy provided by the authority - In these cases, the authority upheld the complaint and we agreed with how it offered to put things right. We encourage the early resolution of complaints and credit authorities that accept fault and find appropriate ways to put things right.

Finally, we compare the three key annual statistics for your authority with similar types of authorities to work out an average level of performance. We do this for County Councils, District Councils, Metropolitan Boroughs, Unitary Councils, and London Boroughs.

Your annual data will be uploaded to our interactive map, [Your council's performance](#), along with a copy of this letter on 28 July 2021. This useful tool places all our data and information about councils in one place. You can find the decisions we have made about your Council, public reports we have issued, and the service improvements your Council has agreed to make as a result of our investigations, as well as previous annual review letters.

I would encourage you to share the resource with colleagues and elected members; the information can provide valuable insights into service areas, early warning signs of problems and is a key source of information for governance, audit, risk and scrutiny functions.

As you would expect, data has been impacted by the pause to casework in the first quarter of the year. This should be considered when making comparisons with previous year's data.

Supporting complaint and service improvement

I am increasingly concerned about the evidence I see of the erosion of effective complaint functions in local authorities. While no doubt the result of considerable and prolonged budget and demand pressures, the Covid-19 pandemic appears to have amplified the problems and my concerns. With much greater frequency, we find poor local complaint handling practices when investigating substantive service issues and see evidence of reductions in the overall capacity, status and visibility of local redress systems.

With this context in mind, we are developing a new programme of work that will utilise complaints to drive improvements in both local complaint systems and services. We want to use the rich evidence of our casework to better identify authorities that need support to improve their complaint handling and target specific support to them. We are at the start of this ambitious work and there will be opportunities for local authorities to shape it over the coming months and years.

An already established tool we have for supporting improvements in local complaint handling is our successful training programme. During the year, we successfully adapted our face-to-face courses for online delivery. We provided 79 online workshops during the year, reaching more than 1,100 people. To find out more visit www.lgo.org.uk/training.

We were pleased to deliver an online complaint handling course to your staff during the year. I welcome your Council's investment in good complaint handling training and trust the course was useful to you.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'M King', with a stylized flourish at the end.

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

Complaints upheld
<p>The Ombudsman carried out no detailed investigations during this period</p>
Compliance with Ombudsman recommendations
<p>No recommendations were due for compliance in this period</p>
Satisfactory remedy provided by the authority
<p>The Ombudsman did not uphold any detailed investigations during this period</p>

NOTE: To allow authorities to respond to the Covid-19 pandemic, we did not accept new complaints and stopped investigating existing cases between March and June 2020. This reduced the number of complaints we received and decided in the 20-21 year. Please consider this when comparing data from previous years.

19 October 2021

Report of	Chief Operating Officer	Author	Carl Free
Title	Health and Safety Report 2020/21		☎ 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 overseen by the Chief Operating Officer and managed by the Corporate Health and Safety Officer and Designated Officers within services, who form the Health and Safety Committee.

2. Recommended Decision

- 2.1 To note the Health and Safety report for 2020/21 and approval of the Health and Safety Policy for 2021/22.

3. Reason for Recommended Decision

- 3.1 The Leader of the Council has the ultimate responsibility for the management and monitoring of health and safety provision across all the Council’s undertakings. Cabinet are jointly and severally the primary duty holders for health and safety across the Council’s undertakings.
- 3.2 The Health and Safety Policy is an integral part of the risk management process, which forms part of the policy framework. As such it is appropriate to provide an annual report on Health and Safety to the Governance and Audit Committee, to assist with the Committee’s responsibility for reviewing the effectiveness of risk management.

4. Background Information

- 4.1 The Health and Safety policy sets out the Council’s commitment to managing health and safety risks, organisation structure and the individual responsibilities, at all levels of the organisation. The policy is still considered suitable and sufficient and has been updated to include the new leader on the H&S statement and to reflect the latest organisation structure.
- 4.2 The policy (appendix A) is supported by a set of arrangements (appendix B) 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. Services supplement these arrangements with their own additional health and safety procedures where necessary for example due to the specific or higher risks involved in their work.

5. **Summary of Policy outcomes – October 2020 to September 2021.**

- 5.1 Similar to last year, the Coronavirus pandemic continued to impact the ways of working and health and safety priorities of ensuring staff, customer and member of public safety during this time. The priority of usual health and safety scheduled tasks and other non-critical work for 2020/21 was lowered to provide Covid-19 focused health and safety support to the Council.
- 5.2 Audits and reviews have recommenced within 2021 and are in progress on 'A12 litter picking' and 'Hand Arm Vibration' within the Neighbourhoods Service, as these have potentially high and serious immediate injury and long-term ill health risks. The audits are in progress but no significant concerns to health and safety of staff have been identified at this time.
- 5.3 The health and safety committee meetings continued virtually using Teams with the standard agenda in place. This includes updates on the corporate items such as findings from incident reports/investigations, training and guidance updates and any other significant items. The meeting also enabled useful discussions between the designated officers and services to continue particularly regarding latest significant concerns, Covid safety measures and mental health of staff, which also adds input to the corporate health and safety action priorities going forward.
- 5.4 The prioritisation of supporting and providing advice to the Council widely and specific services on Coronavirus matters continued in 2020 and most of 2021, this included:
- Producing or updating health and safety documentation, templates and guidance based on latest Covid-19 information and research from the Government or other official sources
 - Providing updates on key changes and requirements from latest guidance to services, managers, and staff and to ensure offices and customer sites remained Covid-secure
 - Ensuring adequate supply and resupply of personal protective equipment (PPE) and hand sanitiser to services/teams and CBC corporate sites
 - Reviewing CBC H&S arrangements to ensure suitable for the new and continued ways of alternative working across the Council
- 5.5 The corporate approach to supporting lone workers remains to be using personal monitoring devices via GPS connected to an alarm receiving centre staffed by the supplier. These products are reactive and therefore an addition to proactive safety measures already in place such as training, following best safety practices and working in pairs.
- 5.6 Following the successful trial of the smartphone app last year where staff preferred this to the already in use devices, progress has been made to switch over approximately half the teams from the devices to the app where this would be beneficial for them. Having availability to the app and device from the supplier, allows teams to choose the best option for them. The app maintains lone worker safety, while reducing the costs to the Council and risk of spreading coronavirus through shared devices.
- 5.7 The internal audit of health and safety at Colchester Borough Council provided an opinion of "Reasonable Assurance" in 2020. The recommendations have been actioned and continued as ongoing improvements. The next internal audit will be in 2022.
- 5.8 Fire Risk Assessments for all corporate buildings (primarily used as CBC staff workplaces) have been completed by an experienced Fire Safety Consultant. The

- 5.9 reports are being receiving and recommendations will be collated into an action plan and will be remedied as per guided timescales. Any significant issues will be actioned without delay where possible or highlighted through H&S reporting processes to the Chief Operating Officer and H&S Committee if further resources are required.
- 5.10 The upcoming Rowan House refurbishment includes fire safety improvements including new alarm detectors/sounders and emergency lighting.
- 5.11 Face to face training has been postponed where possible due to the pandemic. However, essential courses have continued such as health and safety induction using an eLearning package and first aid training with Covid secure measures in place.
- 5.12 Additional training has been organised to take place over the upcoming months, this includes a recognised qualification for the Executive Management Team designed to help them become better influencers of health and safety, and managers health and safety training that will help them gain the knowledge and tools and get up-to-speed on the practical actions they need to take to tackle safety and health issues.
- 5.13 Reported incidents across the Council remain low compared to previous years and the new online incident report form will allow improved analysis and display of statistics at the H&S committee and for this report. There have been no serious injuries to staff or members of public taken to hospital for treatment this year. These type incidents are notifiable to the Health and Safety Executive often referred as "RIDDOR incidents". Last year there was 1 RIDDOR incident (staff fractured wrist on moving bin lift), and previously 2, 4 and 7 in 2019, 2018 and 2017 respectively.
- 5.14 Near miss reporting continues to be encouraged and promoted, and actively reported by staff and managers, helping resolve any concerns or issues before they become a potential incident and/or injury.
- 5.15 A water safety consultant will soon review the Council water ways and open water for which we have responsibility. This is taking place to ensure legal compliance and suitable documentation and safety provisions are in place to help prevent drowning and water related incidents across the Borough.
- 5.16 This is to coincide with the UK Drowning Prevention Strategy which aims to reduce accidental drowning fatalities in the UK by 50 per cent, by 2026. A central objective of the UK national strategy is to ensure that water risks are risk assessed which will identify the safety provisions needed.

6. Equality, Diversity and Human Rights implications

- 6.1 Equality Impact Assessment (EIA) [link](#)

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. Environmental and Sustainability Implications

- 11.1 There are no environmental or sustainability implications as a result of this report.

12. Standard References

- 12.1 There are no particular references to publicity considerations or financial; health, wellbeing and community safety implications.

Appendices

Appendix A: Health and Safety Policy 2021/22

Appendix B: Health and Safety Arrangements



Health and Safety Policy 2021/22

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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 safely
- 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 feedback on health and safety in the workplace and will actively seek to rectify any areas of concern.

All contractors and others working for Colchester Borough Council or providing our services are required to maintain health and safety standards in accordance with this health and safety policy, or their own where applicable.

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



Councillor Paul Dundas
Leader of the Council

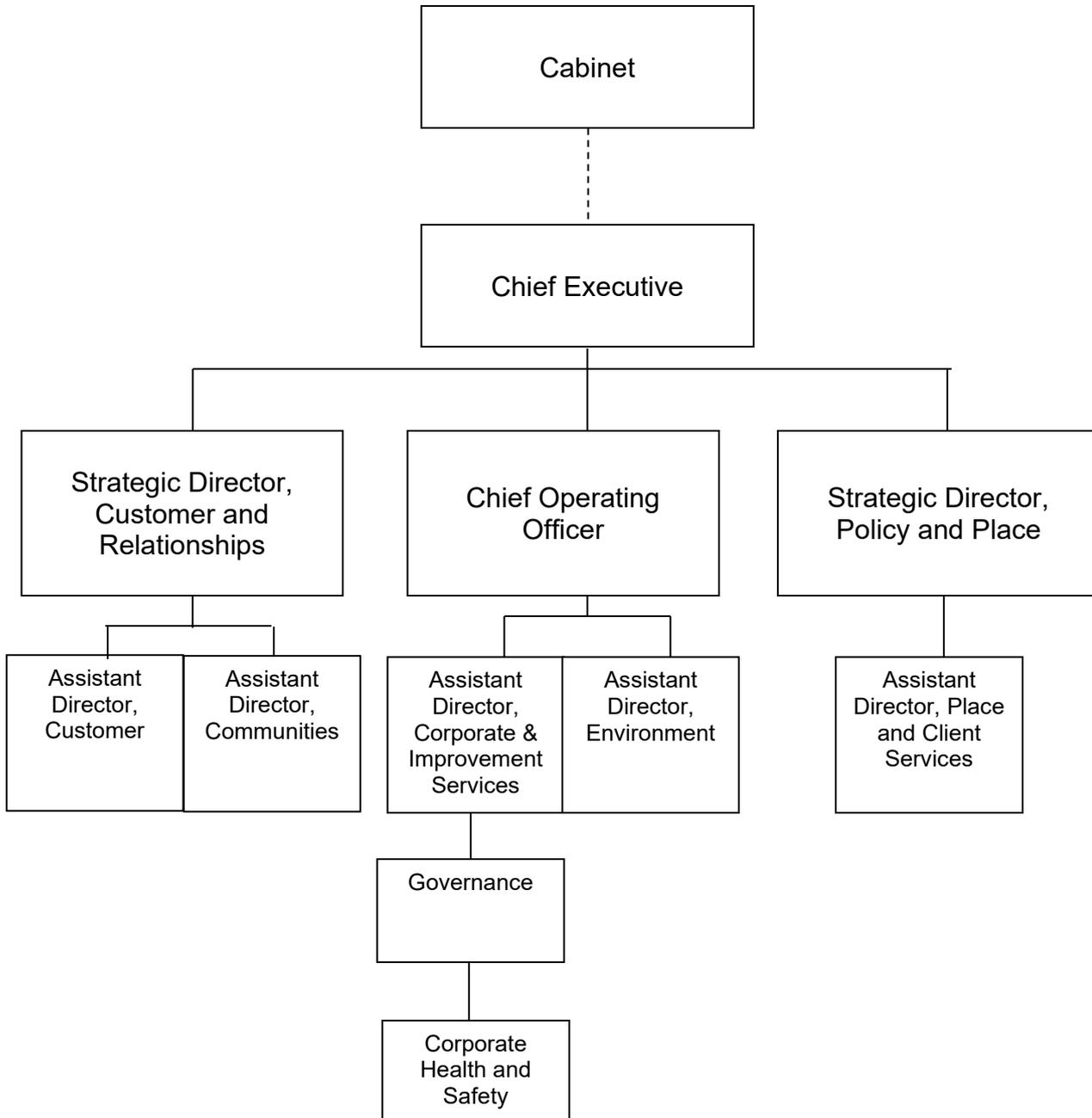


Adrian Pritchard
Chief Executive

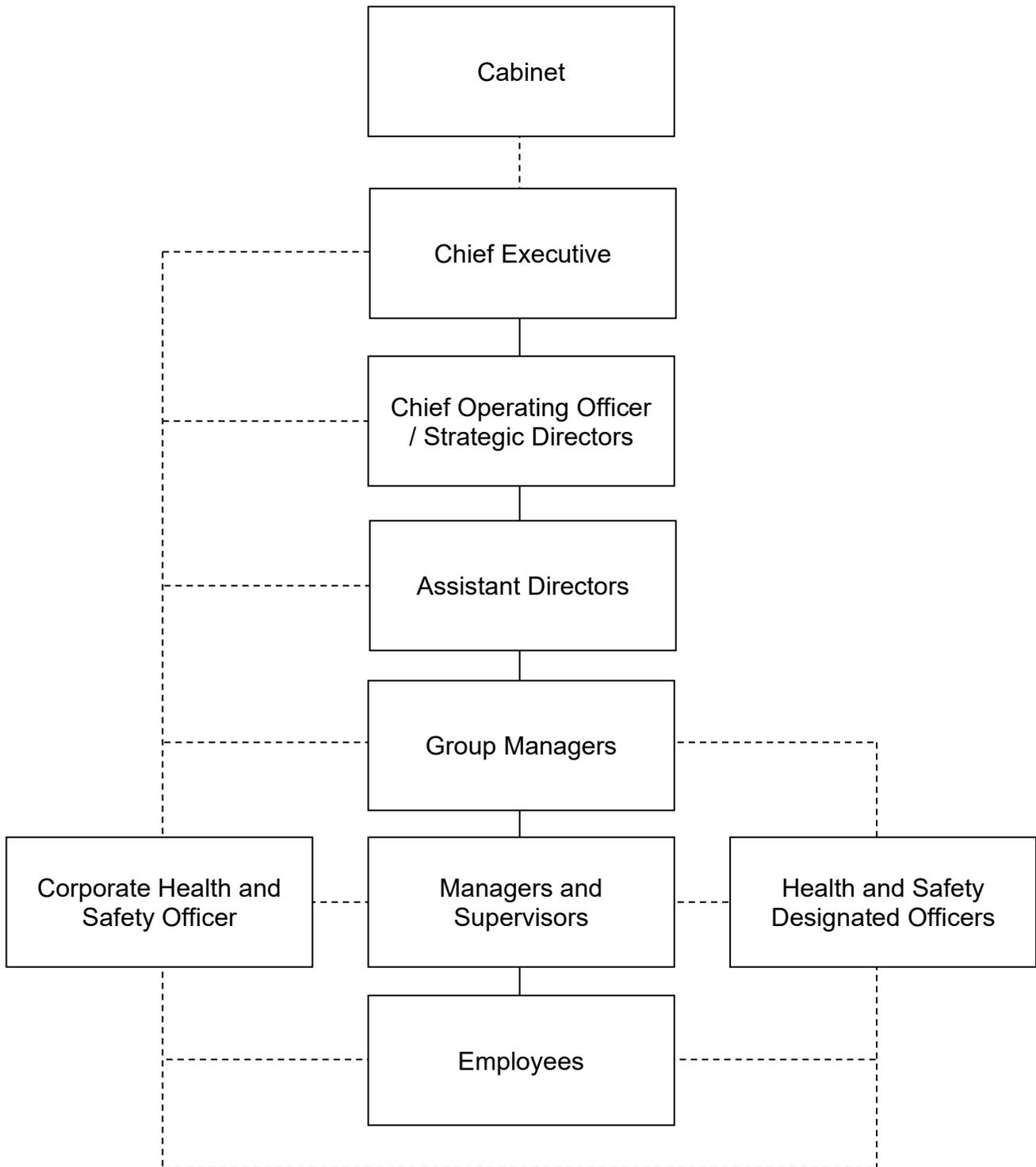
September 2021

3. ORGANISATION

3.1 Organisation Structure



3.2 Organisation Health and Safety Responsibilities



4. RESPONSIBILITIES

4.0 Leader of the Council and Cabinet

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

1. Ensure that adequate financial and other resources are provided, so that the health and safety policy can achieve its aims.
2. Give due regard to requests from the Chief Executive for financial and other resources to meet statutory duties and other obligations regarding health and safety management.
3. Ensure that the Chief Executive has in place an effective health and safety policy and management system, which will ensure that all health and safety hazards and risks within the Council are adequately controlled.
4. Require the Chief Executive to be able to confirm, during the reporting period; health and safety performance, any major incidents or failure in the health and safety management system, accident history and key improvements to health and safety that have been implemented.

4.1 Chief Executive

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

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

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

4.3 Strategic Directors

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

4.4 Assistant Directors

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

4.5 Group Managers

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

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

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

14. Ensure that all materials, plant, vehicles, equipment and personal protective equipment procured for use comply with legislation, commercial and any other specific standards which ensure that it is safe and without risk to health when used correctly.
15. Ensure that all plant, vehicles and equipment is adequately maintained and subjected to statutory examinations where appropriate and relevant records are kept.
16. Ensure that all employees within their group are provided with the correct level of personal protective equipment as identified by risk assessments and that it is maintained or replaced when necessary.
17. Ensure that arrangements are implemented in respect to the requirements of the Construction (Design and Management) Regulations 2015.
18. Ensure health and safety is considered during tender of new contracts and contractors employed are competent with suitable health and safety arrangements in place. Monitor and review contractors' health and safety processes and performance.

4.6 Managers and Supervisors

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

4.7 Corporate Health and Safety Officer

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

4.8 Designated Officers for Health and Safety

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

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

4.9 Employees

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

5. DOCUMENT INFORMATION

Title:	Health and Safety Policy
Status:	Final
Version:	11
Consultation:	SMT, Health and Safety Committee, and Unison
Approved By:	SMT and Governance and Audit Committee
Approval Date:	October 2021
EQIA:	Yes - link
Review Frequency:	Annually or earlier if notable changes occur

5.1 Document Control

Date	Version	Description	Sections Affected	Approved by
September 2015	1	Initial draft	All	
April 2016	2	Updated draft. Moved arrangements to separate document.	All except 1 and 2	
June 2016	3	Updated following SMT meeting.	4.0 and 4.9	SMT
July 2016	4	Final draft version - Signatures added	2	Leader of Council and Chief Executive
August 2016	5	Minor amendments following Unison consultation. Final version.	2, 4.1, 4.3, 4.4, 4.5,	Unison and Executive Director
October 2016	6	Review and endorse the revised Health and Safety policy for 2016/17.	All	Governance and Audit Committee
October 2017	7	Annual review. Organisation structure and job titles updated. Minor amendments to improve comprehension.	All	Corporate Health and Safety Officer
June 2018	8	Updated statement with new leader's signature to approve commitment. Updated structure to include Commercial.	2, 3.1	Corporate Health and Safety Officer, and Leader of Council and Chief Executive
October 2018	8.1	Approved Policy for 2018/19	None	Governance and Audit Committee
October 2019	9	Approved Policy for 2019/20.	3.1, 4.2	Governance and Audit Committee

		Updated organisation structure and responsibility for H&S to CEO from Strategic Director		
October 2020	10	Approved Policy for 2020/21. Updated organisation structure.	3.1	Governance and Audit Committee
October 2021	11	Approved Policy for 2021/22. Updated: <ul style="list-style-type: none"> • H&S Statement agreed by new Council leader. • Organisation structure. • Policy review timings clarified. 	2, 3.1	Governance and Audit Committee

Health and Safety Arrangements

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

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

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

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

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

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1 Audit & Review

1.1 Audit

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

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

1.2 Review

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

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

If none of the above occur, then all policies and procedures are reviewed at least every three years.

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 supports staff wellbeing through its Policy and Wellbeing Group and trained Mental Health First Aiders.

The Council has an Employee Assistance Programme which offers 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.

Managers are encouraged to set up shared email mailboxes for their staff to contact customers especially in services where conflict may arise due to the nature of the work such as enforcement or debt collection. Staff can and are advised to only use and give their first name when communicating with customers to avoid personal identification outside of work – these principles should also be applied to in person locations, for example on name badges and while talking with customers.

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 through Skyguard / PeopleSafe.

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.

Services will manage risk of slips on ice/snow on their sites, and clear or grit upon ice/snow warnings as far as is practical with the resources available to them, prioritising high use external areas such as main entrances, exits and walkways, and higher risk areas such as slopes and stairs. In extreme circumstances, areas may be closed for safety.

5 Risk Control

5.1 Risk Assessment

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

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

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

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

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

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

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

5.2 Hot Work Permits

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

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

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

5.3 Method Statements

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

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

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

6 Induction and Training

6.1 Inductions

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

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

6.2 Training

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

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

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

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

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

Further information and guidance is available on the intranet.

6.3 Supervision

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

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

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

6.3 Young Person (under 18)

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

7 Accident / Incident Reporting and Investigation

Once an accident / incident has been reported we will:

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

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

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

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

Managers will complete a health and safety investigation as soon as possible and within 20 working days 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 and investigations to identify trends and concerns, and report at the quarterly H&S committee and annual H&S report to SMT.

8 Emergency Arrangements

8.1 Fire Safety

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

CBC will maintain responsibility for fire safety with their 'Corporate' premises, and as such a Fire Risk Assessment will be completed for these sites and stored electronically available to necessary managers. These may also be held at each site within the Fire Log Book. We will carry out a review of these whenever any significant changes are made to building layouts or processes carried out in them, or at least every three years.

All building fire protection measures are inspected and serviced by CBH in line with regulatory requirements/guidance and FRA findings. New building fire protection measures or improvements identified by updated guidance or FRA findings will be reported by the Corporate Health and Safety Officer to CBH for inclusion in the asset improvement and management plan. Day to day management of fire safety measures are the responsibility of the Health and Safety Designated Officer or respective 'facilities contact' for the site.

Emergency arrangements will be made known to staff during their 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.

Corporate buildings will have appropriate fire safety arrangements such as evacuation plans and fire marshals. These nominated staff will be trained to carry out this role and fire drills will be completed 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 will have first aid coordinators and aim to have dedicated trained first aiders. Their details are included in the inductions carried out for all new starters. Should this person change, updated information will be communicated as appropriate.

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

9 Workplace Safety

Managers named as the 'facilities contact' will be responsible and monitor day to day operation on their site to 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.

Facilities Management is contracted to Colchester Borough Homes (CBH) who are responsible for the planned and responsive maintenance and asset management of 'Corporate' buildings and will act as the 'responsible person' for Legionella and 'duty holder' for Asbestos management.

Contractors will comply with CBC arrangements for contractor management on sites and sign in and check the relevant information in the Building and Fire Log Books. The 'facilities contact' will ensure contractors are inducted on their site and safety/emergency arrangements.

We will report matters as soon as possible to CBH Facilities Management, concerning repairs to or structural defects of these workplaces which may impact health and safety.

Facilities Management compliance will be monitored through a dashboard updated quarterly by CBH, reported to the Client Team and Corporate Health and Safety Officer - who will then present to the H&S committee and SMT.

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	Yes	Yes: 6 months – 1 year	Yes, 1 – 2 years

Kitchen equipment Irons			
Cables, leads & plugs connected to the above equipment Mains voltage extension leads Battery charging equipment	Yes	Yes: 6 months – 4 years dependant on the type of equipment it is connected to	Yes, 1 – 5 years depending on the type of equipment it is connected to

9.2 Workstations and Display Screen Equipment

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

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

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

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

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

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

Further information and guidance is available on the intranet.

9.3 Work Equipment

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

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

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

When materials that contain asbestos are disturbed or damaged, fibres are released into the air. When these fibres are inhaled they can cause serious diseases. These diseases will not affect you immediately; they often take a long time to develop, but once diagnosed, it is often too late to do anything.

Asbestos fibres are present at low levels in the environment, however the risk of developing an asbestos-related disease increases the more fibres breathed in, and those who also smoke are at a much greater risk of developing lung cancer.

Asbestos was used in buildings built or refurbished before 2000. The majority of asbestos within Council owned buildings was removed as part of an initiative in 2004. In Council owned buildings leased to external parties - the tenants responsible for alterations, repairs and maintenance as specified under a tenancy agreement or contract are the 'duty holder' under the Control of Asbestos Regulations - where there is no agreement/contract or similar repair/maintenance arrangements in place, CBC acknowledges they remain the 'duty holder'.

CBC will fulfil their requirements of 'duty holder', and CBH will manage asbestos in corporate buildings on behalf of CBC by ensuring suitable arrangements are in place, which includes but is not limited to:

- Asbestos Management Survey completed by a competent person
- Asbestos Register produced from the survey findings
- Asbestos Management Plan in place and:
 - Regular monitoring/inspection of the asbestos condition remaining in place,
 - Asbestos containing materials are further made safe (sealed or encapsulated) or
 - Asbestos is removed where necessary
- Plans and arrangements are reviewed regularly so they are relevant and up to date
- Information on the location and condition of asbestos is provided to those who may work on or disturb it
- Competent people or licensed contractors are used for asbestos work and removal (with license applications to the HSE as required)
- Refurbishment and Demolition Survey completed before significant premises work that affects the fabric of a building such upgrading, refurbishment or demolition

Any contractors who carry out work in our corporate buildings are required to read the Asbestos register (usually held within the Building Log Book at individual premises) and must acknowledge or sign to confirm that they understand where asbestos is located, or if unsure will presume that materials contain asbestos.

Staff who may disturb asbestos containing materials as part of their usual work for example minor building refurbishment or removing fly tipped waste will receive appropriate Asbestos awareness training.

Concerns with asbestos or suspected asbestos containing materials such as condition changes, accidental release or disturbance or during work with an asbestos containing material must follow the usual incident reporting and investigation arrangements and be reported to the Corporate Health and Safety Officer as soon as possible.

Further information can be found on the [Asbestos](#) page of HSE website.

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
9

19 October 2021

Report of	Director of Business Improvement Colchester Borough Homes	Author Matt Armstrong ☎ 07951 013364
Title	Colchester Borough Homes Annual Governance Statement 2020/21	
Wards affected	Not Applicable	

The purpose of the report is for the Committee to consider and comment on the Governance Assurance Statement of Colchester Borough Homes

1. Recommended Decision

- 1.1 The Committee considers and comments on the Governance Assurance Statement of Colchester Borough Homes.
- 1.2 The Committee accepts the assurance provided by Colchester Borough Homes regarding its governance arrangements throughout 2020/21.

2. Background

- 2.1 Colchester Borough Homes is a wholly owned company of the Council. As such:
 - Its accounts are consolidated into the Council's financial statements
 - Disclosures regarding the adequacy and effectiveness of its governance arrangements are included in the Council's Annual Governance Statement.
- 2.2 Colchester Borough Homes has therefore provided the Council with its own Annual Governance Statement for 2020/21 as evidence of how well its arrangements are operating (Appendix 1).
- 2.3 The Annual Governance Statement will inform the Council's Governance Statement.
- 2.4 Fiona Marshall, Chair of Colchester Borough Homes' Finance and Audit Committee, and Matt Armstrong, Director of Business Improvement, will present this report to Committee and respond to any questions relating to it.

3. Additional Information

- 3.1 The Finance and Audit Committee of Colchester Borough Homes also takes the following actions to assure itself that the Company has proper and secure arrangements in place:

- Each year it agrees an audit plan for a three-year period on a risk- based approach
- It receives regular updates on the progress against this plan throughout the year from Internal Audit
- It considers and recommends the Annual Governance Statement to the Board
- It monitors the actions coming out of the Annual Governance Statement
- It produces the Risk Management Strategy and monitors the key strategic risks of the Company
- It scrutinises the proposed budget for the Company and monitors the Company's financial performance against budget and business plan on a quarterly basis.

3.2 In accordance with company law Colchester Borough Homes has produced its annual statutory accounts for 2020/21 and had these audited by Scrutton Bland, a firm of external auditors. Scrutton Bland have approved these accounts and given a clean audit opinion.

The External Audit Partner attended the Finance and Audit Committee's July meeting to report on the audit and take questions from the Committee as they scrutinised the accounts.

4. Head of Internal Audit Opinion 2020/21

4.1 Set out below is some key information from the Internal Audit Opinion Report:

- The Audit Plan covered 9 internal audit reviews, including all the key financial areas (these were amalgamated into one audit in the year).
- Assurance gradings for the 9 completed reviews were as follows:

Assurance Assessments	Number of Reviews	Previous Year
Substantial Assurance	4	2
Reasonable Assurance	5	10
Limited Assurance	0	0
No Assurance	0	0

- The above assurance gradings show that Colchester Borough Homes' control environment has improved on 2019/20, with the number of audits gaining substantial assurance increasing from 2 to 4.
- The reduction in audits was the outcome of moving to a risk-based approach, a total of 77 days of audit was conducted throughout the financial year.

- The total number of recommendations are shown below, all of which were implemented by 31st March 2021.

Urgent	Important	Routine
0	7	12

4.2 The Head of Internal Audit's annual opinion stated...

TIAA is satisfied that, for the areas reviewed during the year, Colchester Borough Homes has reasonable and effective risk management, control and governance processes in place.

5. Equality & Diversity Implications

5.1 There are no direct diversity or equal opportunities issues as a result of these reports.

6. Financial Implications

6.1 No further financial implications arise from matters included in these reports.

7. Health, Wellbeing and Community Safety Implications

7.1 No HR implications arise from matters included in these reports.

8. Health & Safety Implications

8.1 No Health & Safety implications arise from matters included in these reports.

9. Risk Management

9.1 Failure to operate robust governance arrangements can potentially lead to poor management, performance, stewardship of public engagement and, ultimately, poor outcomes for citizens and service users. It increases the risk that the company's priorities will not be delivered. Reviewing the governance arrangements each year and identifying and addressing the key issues minimises these risks.

10. Environmental and Sustainability Implications

10.1 Colchester Borough Homes supports and contributes towards the Council's carbon reduction target throughout all its service delivery.

11. Appendices

11.1 Appendix 1 – CBH Annual Governance Statement 2020/21

Colchester Borough Homes Annual Governance Statement 2020/21

1. Scope of Responsibility

Colchester Borough Homes (CBH), formed in October 2003, is the Arms-Length Management Organisation of Colchester Borough Council (CBC), responsible for the management and maintenance of the Council's homes and transferred general fund services. In 2020/21, these were primarily financed from the Council through a Management Fee of £9,940,000. This fee also includes professional fees to manage capital and revenue projects, Corporate Facilities management fee and CBH Revenue work costs. The capital projects costing £3,442,000 are paid directly by CBC.

There is a formally binding Management Agreement between the Council and CBH in place until August 2023, and a recently agreed extension of 5 years will extend the agreement until August 2028. This clearly sets out the governance arrangements that should apply between the two parties and complies with national best practice.

CBH is managed by a Board comprising at least three Council nominees, three residents, four independent members (increased from three in February 2021) and the Chief Executive. The Memorandum and Articles of Association were revised and approved in 2017, Colchester Borough Homes is responsible for putting in place proper arrangements for the governance of its affairs and facilitating the effective exercise of its functions, which includes arrangements for the management of risk. Three committees (increased from two in February 2021) report to the Board: Finance & Audit, Operations & Performance (new) and Governance & Remuneration. Additionally, there is also a Residents Voice Panel. These all have formal, approved terms of reference, which are reviewed annually.

2. The Purpose of the Governance Framework

Good governance leads to good management, good performance, good stewardship, good public engagement and ultimately good outcomes for citizens and the service user. Good governance enables the Company to pursue its vision effectively, as well as underpinning that vision with mechanisms for control and management of risk.

The governance framework comprises the systems, processes, culture and values by which the Company is directed and controlled and its activities through which it accounts to, engages with and serves the community. It enables the Company to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate, cost-effective services.

The system of internal control is a significant part of that framework and is designed to manage risk to a reasonable level. It cannot eliminate all risk of failure to achieve policies, aims and objectives and can therefore only provide reasonable, not absolute, assurance of effectiveness. The system of internal control is based on an ongoing process, designed to:

- Identify and prioritise the risks to the achievement of the Company's policies, aims and objectives

- To evaluate the likelihood of those risks being realised and the impact should they be realised
- To manage them efficiently, effectively and economically.

The governance framework has been in place at Colchester Borough Homes for the year ended 31 March 2021 and up to the date of approval of the financial statements of accounts. Colchester Borough Homes exercises control through:

- Corporate governance arrangements outlined in the Memorandum & Articles of Association, the NHF Code of Governance (adopted in December 2020) and the Standing Financial Instructions.
- The employment of suitably qualified and experienced staff to take responsibility for key areas of the business. This is supported by a formal appraisal system using 'check-ins' (monthly) and 'Quarterlies' through the MyContribution App (adopted in December 2020). Previously an annual appraisal system was used.
- The preparation of forecasts and budgets that allow the committees and the executive officers to monitor the key business risks and financial objectives, and identify variances arising during the monthly reporting cycle.
- Business planning based on a Strategic Plan, that sets out key actions to enable CBH to achieve its goals for the ensuing year, and the Medium Term Delivery Plan which is approved by CBC. This cascades through supporting Service Plans and individual performance appraisals (quarterlies). The key aims of the Strategic Plan are:
 - ✓ Customer Plan
 - To deliver services that reflects the needs and diversity of our customers
 - To make it easy for customers to do business with us
 - To improve Customer Satisfaction
 - ✓ Value for Money, Technology and Investment Plan
 - To invest money in a way that helps customers and communities
 - To use technology to do things better
 - To get the most for the money we spend
 - ✓ People Plan
 - To support our staff to do the best job possible
 - To make CBH a great place to work
 - ✓ Business Development Plan
 - To protect services by looking after the future of the business
 - To bring in extra income to invest in our services
 - ✓ Leadership Plan
 - To show we can be trusted to do what say we will
 - To be clear about our organisational goals and how to achieve them
 - ✓ Community Plan

- To raise awareness of our work in the community
- To bring together organisations and residents for the benefit of the community

The Executive Management and the Board carry out regular review of performance against objectives and targets detailed in the Strategic Plan.

3. Review of Effectiveness

Colchester Borough Homes conducts, at least annually, a review of the effectiveness of its governance framework, including the system of internal control. The review of effectiveness is informed by the work of the Executive Directors and Corporate Management Team within the Company, who have responsibility for the development and maintenance of the governance environment. This is supported by the Internal Audit's annual report, and by comments made by external auditors and other review agencies and inspectorates.

The company has produced a Strategic Plan, setting out the direction of the company until 2022. This combined with the Medium Term Delivery Plan are the primary guiding documents for the Company. From these plans, Key Performance Indicators (KPIs) and projects are produced. A performance and scrutiny framework is in place to review and monitor delivery against these. This is a combination of Board, corporate management, tenants and CBC scrutiny as well as benchmarking against other providers. CBH's internal arrangements for ensuring the effectiveness of its governance arrangements consist of:

- The Board receiving quarterly progress reports on delivery of the Strategic plans and the Medium Term Delivery Plan.
- The Governance & Remuneration Committee considering significant staffing matters.
- The Finance & Audit Committee considering Internal Audit reports throughout the year, reviewing how well strategic risks are identified and managed, and monitoring financial performance against budgets.
- The Finance & Audit Committee monitoring the regular review of key policies against an agreed policy review timetable.
- The Residents Voice, consisting of involved residents and Resident Board Members, reviewing policies which affect services to Residents, influencing decisions about housing services, challenging and scrutinising performance and oversee the Community investment fund.
- The Operations and Performance Committee reviewing and scrutinising the performance of the Strategic plans and the Medium Term Delivery Plan.

Reviewing performance against the Business Development Plan and scrutinising new business opportunities. Reviewing resident engagement, social value and complaints.

- The monthly review and update of the Board and Committee work plan.

CBH will ensure that its arrangements to monitor the effectiveness of its governance arrangements remain in place and reflect best practice.

Internal Audit

Internal Audit is delivered through a contract with TIAA Ltd from 1st April 2020 for the next 5 years.

The audit plan was delivered, with reports issued to senior managers at the conclusion of each audit highlighting internal control weaknesses identified and the actions required to address them. Recommendations were also reviewed to ensure they were implemented properly by the due date. Reports were presented to each Finance & Audit Committee of progress against the audit plan as well as the status of outstanding recommendations.

Internal Audit performance is subject to annual review by the external auditor of CBH in order that they can place reliance on its audit work. The Company provided the Council with the following assurance regarding the robustness of its governance arrangements during the year:

- Internal Audit reports
- Board and Committee Work Plan
- The Annual Report, which incorporates the Head of Internal Audit's annual report (including an opinion on the effectiveness of the company's systems of internal control)

External Audit

External Audit of the annual financial statements is undertaken by Scrutton Bland with a view to expressing an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland).

In carrying out the audit work, Scrutton Bland will consider whether the financial statements are free from 'material misstatement'. Materiality is an expression of the relative significance of a particular matter in the context of the financial statements as a whole. An item will normally be considered material if its omission would reasonably influence the decisions of those using the financial statements.

Scrutton Bland will issue a report to management at the conclusion of the audit work. This will include a management letter that will contain comments and recommendations for improvements in operations and internal control in respect of the Company. This will be discussed with management prior to the issue of the final report. The report will also include details of significant adjusted and unadjusted items that arise as a result of the audit work.

The Finance & Audit Committee considers the external auditor's report and recommends adoption of the financial statements to the Board.

4. Significant Governance Issues brought forward from 2019/20

There were two significant governance issues reported and brought forward in 2019/20.

- **Procurement training, particularly for medium and low value transactions**
Audit of supply chain management was conducted in July 2018 with substantial assurance. Following from this, team training took place and closer working with the CBC procurement team to provide greater efficiency and assurance.
- **Review and testing of the Business Continuity Plan**
This was tested in December 2019 through a communication tree exercise. Further more the plan was put in place in March 2020 when the Covid-19 pandemic emerged.

5. Significant Governance Issues completed in 2020/21

The significant governance issues raised in 2019/20 and actioned in 2020/21 were:

- **New Management Agreement**
This was consulted on and agreed to be extended until August 2028 by Cabinet on the 23rd November 2020.
- **Review, update and embed a new Risk Management Policy, Strategy and Framework**
The new policy was adopted in February 2020 following consultation and a Board Away day to establish the risk appetite and new framework.
- **Review and update the Business Continuity Plan**
This was consulted on in December 2020 and adopted in May 2021.

6. Significant Governance Issues to be addressed in 2021/22

The following significant governance issues have been raised through the Board and Committee work plan to be completed in 2021/22.

- Update of the Management Agreement and associated schedules in line with the action plan agreed at the time of extension.
- Induction of new Board Members and briefings of new administration.
- Development of a new strategic plan for April 2022 – March 2027

Action Plan

An action plan is set out below to address the governance issues that have been identified. Progress against this plan will be monitored by the Finance and Audit Committee and Board.

Description	Action	Responsibility	Target Completion Date
Management Agreement Action Plan	Ensure the CBH contribution is well planned, consulted on and that the overall plan remains on target	DMT	November 2021
New Administration	Prepare and deliver briefings to new Portfolio Holders for Housing, Resources and Communities	DMT and Chair	July 2021
Strategic Plan 2022 - 2027	Develop plan with Resident and stakeholder engagement through a dedicated working group.	CEO and Chair	November 2021

Through completing this action plan the Company is satisfied that it will have made the improvements that were identified in its review of effectiveness.

Signed: _____
(Chair of the Board)

Signed: _____
(Chair of the Finance & Audit Committee)

Signed: _____
(Director of Business Improvement)



Governance and Audit Committee

Item

11

19 October 2021

Report of	Dan Gascoyne, Chief Operating Officer & Senior Information Risk Owner (SIRO)	Author	Wayne Murray ☎ 07966 236074
Title	Briefing Note: Assurance on Council's Cyber Security provision		
Wards affected	Not applicable		

1. Executive Summary

- 1.1 This report provides an overview as to how Colchester Borough Council ensures appropriate levels of Cyber Security are maintained and monitored.

2. Recommended Decision

- 2.1 The Committee are invited to note the contents of the report

3. Reason for Recommended Decision

- 3.1 At its meeting in June 2021 the Committee noted the threat of a successful cyber security attack was an increasing risk to the Council and requested that a report be presented to the Committee to reassure Councillors and members of the public that all necessary steps were being taken to mitigate this risk

4. Alternative Options

- 4.1 Not applicable

5. Background Information

- 5.1 Colchester Borough Council's ICT (Information and Communication Technology) Team are responsible for providing the technical ICT services (including Networking, Infrastructure, Information Governance and Cyber Security) to Colchester Borough Homes, CCHL (Colchester Commercial Holdings Limited) Ltd, and the Council. They are tasked with providing a robust infrastructure that allows staff and Councillors to fulfil their roles and responsibilities whilst ensuring all Council data is secure and only accessible to the relevant people. This includes maintenance of all systems and related servers, networks, end point devices such as laptops and mobile phones as well as user and data permissions and access
- 5.2 The Council currently has 862 E3 licenced users (these are full time staff that require full access such as Outlook, SharePoint, Office365 applications) and 565 F3 licenced users (these are full time or casual staff that require limited applications such as email only). This is a total of 1,427 licence user accounts that ICT manage
- 5.3 The Council has adopted a modern, cloud first approach to technology that ensures infrastructure and devices are always up to date and as secure as possible.
- 5.4 The risk of the Council suffering a successful cyber-attack is captured as a significant risk on the Council's Corporate Risk Register with mitigation and controls defined as ensuring policies and protocols are subject to ongoing review, and ensuring training is in place for staff and Members.
- 5.5 The Council's approach to keeping our information and systems secure is based upon guidance from the National Cyber Security Centre (NCSC) and the 5 key factors of cyber security:
- Infrastructure
 - Analysis
 - Alerting
 - Actions
 - Awareness
- 5.6 The Council works closely with other organisations and bodies such as NCSC, Microsoft, the local Warning, Advice and Reporting Point (WARP), Essex Online Partnership and more, to share best practice and gain insight and early warning about cyber threats and trends.
- 5.7 Cyber security and Network resilience are areas that are tested both externally as part of our annual penetration testing, and internally as part of the Council's corporate audit plan. There are no outstanding urgent recommendations from audits or from penetration testing.
- 5.8 The Network Resilience Audit was completed by our Internal Auditors in April 2021 and the high-level report was shared with this Committee. Good practice was identified in the Audit Report and the overall assurance level was Reasonable Assurance (the second highest level of assurance). The Key findings and Management Action Plan are monitored regularly, and actions are underway.
- 5.9 The Cyber Maturity Audit by our Internal Auditors is currently in progress and builds upon the Network Resilience Audit previously undertaken.

5.9 All staff and Members are required to complete mandatory Data Protection training annually and this year's training included an element on Cyber Security best practice and hints and tips around how to spot a cyber threat. The most recent round of training has seen 99% completion by staff and 2/3rds of Members have completed it so far.

5.10 All Members were invited to a briefing and training session recently that provided further information on the level of risk to the Council, the Council's approach to prevention and to mitigation of issues, and the mechanisms in place to help prevent or respond to cyber incidents

6. Equality, Diversity and Human Rights implications

6.1 None identified

7. Strategic Plan References

7.1 Secure, resilient, and robust ICT systems underpin our service delivery, ensure that data is protected, and enable delivery of our Strategic Objectives

8. Consultation

8.1 Not applicable

9. Publicity Considerations

9.1 Not applicable

10. Financial implications

10.1 Not applicable

11. Health, Wellbeing and Community Safety Implications

11.1 Not applicable

12. Health and Safety Implications

12.1 Not applicable

13. Risk Management Implications

13.1 The risk of a cyber breach is recognised as a significant threat on the Corporate Risk Register.

14. Environmental and Sustainability Implications

14.1 Not applicable

Appendices

None

Background Papers

None



Governance and Audit Committee

Item
12

19 October 2021

Report of	Assistant Director Corporate and Improvement Services	Author	Matthew Evans ☎ ext. 8006
Title	Work Programme 2020-2021		
Wards affected	Not applicable		

1. Executive Summary

- 1.1 This report sets out the current Work Programme 2021-2022 for the Governance and Audit Committee. This provides details of the reports that are scheduled for each meeting during the municipal year. Members are asked to note that the Equality and Safeguarding Annual Update which was due to be considered at the meeting of this Committee in November 2021, will now be considered at the meeting in March 2022.

2. Recommended Decision

- 2.1 The Committee is asked to note the contents of the Work Programme for 2021-2022.

3. Reason for Recommended Decision

- 3.1 The Work Programme of this Committee is kept under review throughout the municipal year to ensure that business is progressed and Members have the opportunity to review upcoming agenda items. Members are asked to note that the item; Colchester Borough Homes Annual Report and Governance Statement, has been moved from this meeting to the next meeting of this Committee in October.

4. Alternative Options

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

5. Background Information

- 5.1 The Governance and Audit Committee deals with the approval of the Council's Statement of Accounts, audit, other miscellaneous regulatory matters and standards.
- 5.2 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.

6. Standard References

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

7. Strategic Plan References

7.1 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.

7.2 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 2021-22

Governance and Audit Committee
Meeting date / Agenda items -
Governance and Audit Committee - 22 June 2021
<ol style="list-style-type: none"> 1. Draft Annual Statement of Accounts 2020/2021 2. Year End Internal Audit Assurance Report 2020/2021 3. Review of the Governance Framework and Draft Annual Governance Statement 4. Financial Regulations 2022-2023 5. Financial Monitoring Report – End of Year 2020-2021 6. Capital Outturn – End of Year 2020-2021
Governance and Audit Committee - 27 July 2021
Governance and Audit Committee briefing followed by the following items -
<ol style="list-style-type: none"> 1. Review of digital meetings following Covid-19 2. Colchester Commercial Holdings Limited – Annual report

3. 2020/2021 Year End Review of Risk Management

Governance and Audit Committee - 7 September 2021

1. Financial Monitoring Report – April to June 2021
2. Capital Expenditure Monitor 2021/2022
3. Treasury Outturn 2020/2021
4. Audited Annual Statement of Accounts 2020/2021 and Annual Audit Letter
5. Processing of Special Category & Criminal Convictions Personal Data Policy

Governance and Audit Committee - 19 October 2021

1. Local Government and Social Care Ombudsman Annual Review 2020/2021
2. Health and Safety Policy and Annual Report
3. Colchester Borough Homes Annual Report and Governance Statement
4. Review of digital meetings following Covid-19
5. Review of Colchester Borough Council's Cyber Security provisions

Governance and Audit Committee – 23 November 2021

1. Treasury Management Report 2020-21
2. Review of the Council's Ethical Governance Policies
3. Annual Review of the Members' Code of Conduct and the Council's Localism Act "Arrangements"
4. Review of Local Code of Corporate Governance
5. Review of Member/Officer Protocol
6. Gifts and Hospitality – Review of Guidance for Councillors and Policy for Employees
9. Treasury Management – Half Yearly Update
10. Annual Audit Letter 2020/2021
11. Financial Monitoring Report June – September 2021
12. Capital Monitoring 2021/2022

Governance and Audit Committee - **18 January 2022**

1. Interim Review of the Annual Governance Statement Action Plan
2. Risk Management Progress Report
3. Mid-Year Internal Audit Assurance Report 2021/2022
4. CCHL Half-Year Performance Report (to include draft 3 year plan)
5. Annual Review of the Council's Companies' Business Plans
6. Annual Review of Business Continuity

Governance and Audit Committee - **8 March 2022**

1. External Audit Plan for year ending 31 March 2022 and Certification of Claims and Returns – Annual Report 2020/2021
2. Financial Monitoring Report October to December 2021
3. Capital Expenditure Monitor 2021/2022
4. Internal Audit Plan 2022/2023
5. Review of digital meetings Covid-19
6. Equality and Safeguarding Annual Update