Council Meeting

Council Chamber, Town Hall, High Street, Colchester, CO1 1PJ
Wednesday, 02 November 2016 at 18:00

Information for Members of the Public

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COLCHESTER BOROUGH COUNCIL
Council
Wednesday, 02 November 2016 at 18:00

TO ALL MEMBERS OF THE COUNCIL   **Published** 26/10/2017

You are hereby summoned to attend a meeting of the Council to be held at the Town Hall, Colchester on Wednesday, 02 November 2016 at 18:00for the transaction of the business stated below.

A. R. Pritchard.

Chief Executive

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

Please note that the business will be subject to short breaks at approximately 90 minute intervals.

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

1   **Welcome and Announcements (Council)**

(a)   The Mayor to welcome members of the public and Councillors and to invite the Chaplain to address the meeting. The Mayor to remind all speakers of the requirement for microphones to be used at all times.

(b)   At the Mayor's discretion, to announce information on-

- action in the event of an emergency;
- use of mobile phones;
- audio recording of the meeting;
- location of toilets.

Prayers

Apologies

2   **Have Your Say! (Council)**

The Mayor to ask members of the public to indicate if they wish to ask a question, make a statement or present a petition on any matter relating to the business of the Council - either on an item on the agenda for this meeting or on a general matter not on this agenda and to invite any such contributions (Council Procedure Rule 6(2)).

(Note: A period of up to 15 minutes is available for general statements and questions under 'Have Your Say!').

3   **Minutes (Council)**

A... Motion that the minutes of the meeting held on 27 July 2016 be confirmed as a correct record.

Minutes 27-07-16   9 - 18

4   **Declarations of Interest**

The Chairman to invite Councillors to declare individually any interests they may have in the items on the agenda. Councillors should consult Meetings General Procedure Rule 7 for full guidance on the registration and declaration of interests. However Councillors may wish to note the following:-

- Where a Councillor has a disclosable pecuniary interest, other pecuniary interest or a non-pecuniary interest in any business of the authority and he/she is present at a meeting of the authority at which the business is considered, the Councillor must disclose to that meeting the existence and nature of that interest, whether or not such interest is registered on his/her register of Interests or if he/she has made a pending notification.

- If a Councillor has a disclosable pecuniary interest in a matter being considered at a meeting, he/she must not participate in any discussion or vote on the matter at the meeting. The Councillor must withdraw from the room where the meeting is being held unless he/she has received a dispensation from the Monitoring Officer.

- Where a Councillor has another pecuniary interest in a matter being considered at a meeting and where the interest is one which a member of the public with knowledge of the relevant facts would reasonably regard as so significant that it is likely to prejudice the Councillor's judgement of the public interest, the Councillor must disclose the existence and nature of the interest and withdraw from the room where the meeting is being held unless he/she has received a dispensation from the Monitoring Officer.

- Failure to comply with the arrangements regarding disclosable pecuniary interests without reasonable excuse is a criminal offence, with a penalty of up to £5,000 and

disqualification from office for up to 5 years.

5   **Mayor's Announcements**

Mayor's Announcements (if any) and matters arising pursuant to Council Procedure Rule 8(3).

6   **Items (if any) referred under the Call-in Procedure (Council)**

To consider any items referred by the Scrutiny Panel under the Call-in Procedure because they are considered to be contrary to the policy framework of the Council or contrary to, or not wholly in accordance with, the budget.

7   **Recommendations of the Cabinet, Panels and Committees**

To consider the following recommendations:-

B... Motion that the recommendation contained in minute 111 of the Cabinet meeting on 12 October 2016 be approved and adopted.

C... Motion that the recommendation contained in minute 25 of the Governance and Audit Committee meeting of 11 October 2016 be approved and adopted.

D... Motion that the recommendation contained in minute 27 of the Governance and Audit Committee meeting of 11 October 2016 be approved and adopted.

E.... Motion that the recommendation contained in minute 30 of the Governance and Audit Committee meeting of 11 October 2016 be approved and adopted.

8   **Notices of Motion pursuant to the provisions of Council Procedure Rule 11**

To consider the following Motions:-

(i) **Bus Services Bill - Motion withdrawn**

9   **Questions to Cabinet Members and Chairmen pursuant to Council Procedure Rule 10**

To receive and answer pre-notified questions in accordance with Council Procedure Rule 10(1) followed by any oral questions (not submitted in advance) in accordance with Council Procedure Rule 10(3).

(Note: a period of up to 60 minutes is available for pre-notified questions and oral questions by Members of the Council to Cabinet Members and Chairmen (or in their absence Deputy Chairmen)).

Councillor Higgins to Councillor Lilley, Portfolio Holder for Licensing and Safer Communities:-

When will Colchester Borough Council adopt a policy to govern the use of Advertising Boards ("A" Boards) on the public highway within the Borough boundaries?

10   Schedule of Portfolio Holder decisions   27 - 30

To note the schedule of portfolio holder decisions covering the period 13 July 2016 - 16 October 2016.

11   Urgent Items (Council)

To consider any business not specified in the Summons which by reason of special circumstances the Mayor determines should be considered at the meeting as a matter of urgency.

12   Reports Referred to in Recommendations

The reports specified below are submitted for information and referred to in the recommendations specified in item 7 of the agenda:

2015/16 Year End Review of Risk Management, report to Cabinet, 12 October 2016

Year End Review of Risk Management 2015-16 - report to   31 - 54
Cabinet.doc

Health and Safety Policy   - report to Governance and Audit   55 - 92
Committee

Review of the Council's Ethical Governance Policies - report to   93 - 94
Governance and Audit Committee

Review of Local Code of Corporate Governance - report to   95 - 122
Governance and Audit

13   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)

Council
Wednesday, 27 July 2016

Attendees: Councillor Christopher Arnold (Member), Councillor Lewis Barber (Member), Councillor Nick Barlow (Member), Councillor Tina Bourne (Member), Councillor Roger Buston (Member), Councillor Karen Chaplin (Member), Councillor Nigel Chapman (Member), Councillor Peter Chillingworth (Member), Councillor Helen Chuah (Member), Councillor Phil Coleman (Member), Councillor Nick Cope (Member), Councillor Mark Cory (Member), Councillor Robert Davidson (Member), Councillor Beverly Davies (Member), Councillor John Elliott (Member), Councillor Andrew Ellis (Member), Councillor Daniel Ellis (Member), Councillor Annie Feltham (Member), Councillor Martin Goss (Member), Councillor Dominic Graham (Member), Councillor Dave Harris (Member), Councillor Pauline Hazell (Member), Councillor Theresa Higgins (Member), Councillor Mike Hogg (Member), Councillor Brian Jarvis (Member), Councillor John Jowers (Member), Councillor Darius Laws (Member), Councillor Cyril Liddy (Member), Councillor Michael Lilley (Member), Councillor Sue Lissimore (Member), Councillor Derek Loveland (Member), Councillor Fiona Maclean (Member), Councillor Jackie Maclean (Member), Councillor Patricia Moore (Member), Councillor Beverley Oxford (Member), Councillor Gerard Oxford (Deputy Mayor), Councillor Philip Oxford (Member), Councillor Chris Pearson (Member), Councillor Lee Scordis (Member), Councillor Rosalind Scott (Member), Councillor Jessica Scott-Boutell (Member), Councillor Lesley Scott-Boutell (Member), Councillor Paul Smith (Member), Councillor Martyn Warnes (Member), Councillor Dennis Willetts (Member), Councillor Barbara Wood (Member), Councillor Julie Young (Mayor and Chairman), Councillor Tim Young (Member)

Substitutes: No substitutes were recorded at the meeting

139 Prayers

The meeting was opened with prayers by the Reverend Tim Platt.

140 Apologies

Apologies were received from Councillors Barton, Bentley and Fox.

141 Minutes (Council)

RESOLVED that the minutes of the meeting held on 25 May 2016 be confirmed as a correct record.

142 Have Your Say! (Council)

Nick Chilvers addressed the Council pursuant to the provisions of Council Procedure Rule 7(5) to express his concerns about the Charter market, which was not living up to expectations. He queried whether the Council had the expertise to manage the market. A considerable sum had been invested to little effect and it was operating well under capacity. It needed better stalls and a better mix. If a market failed, it meant the operator was failing too. The Council should bring in the necessary expertise to manage it properly or it should be handed over to a professional operator or moved back to Culver Street.

Councillor T. Young, Portfolio Holder for Culture and Regeneration, responded that the market was run by a professional market manager and was performing well, with a good range of stalls.

Councillor J. Scott-Boutell addressed the Council pursuant to the provisions of Council Procedure Rule 7(5) and presented the Mayor with a petition containing nearly 600 signatures entitled "Save Stanway's Lexden Heath Delivery Office". The Delivery Office had operated in Stanway for over 40 years and their employees played an active role in the community. The closure was due to take place in September 2016, although there were rumours that this might take place earlier, with services and employees due to transfer to Moorside. Both employees and customers would need to travel by car to Moorside. This was a difficult and time consuming journey which would only increase congestion. This would also be detrimental to business in Stanway.

The Mayor received the petition, which was passed to Councillor Paul Smith, Leader of the Council.

143 Mayor's Announcements

The Mayor thanked those Councillors who attended the Civic Service. She had made a number of visits to local business to engage them in her Mayoral Year and to seek sponsorship for events. Tesco were supporting three charity evetns and also developed a strong link with Beacon House. Sponsorship arrangements and support in kind had also been agreed with Williams and Griffin, New Homes Group, Colchester Round Table, Alderman Sutton, Boydens, Monthind, Anglia Crown, The Mercury Theatre, Tiptree Jam, Colchester Zoo, David Lloyd, Turners, Debenhams, Colchester Borough Homes, Colne Housing, John Fowler Solicitors and Platinum Crown.

The Charity Committee had run three events: the Mayor's Quiz, the Classic Lunch and the Alderton Trusler Trophy Match. In addition the 100th Anniversary of the Battle of the Somme had been marked on 1 July 2016.

The following Mayoral events were scheduled:-

- The Mayors Cricket Tent: 4th August 2016
- The Opening of the Oyster Fisheries: 2nd September 2016
- Walking the Ward: 18th September 2016
- The Classic Lunch: a second helping: 23rd September 2016
- Colchester Fire Swim: 1st October 2016
- Beer Festival: 15th October 2016
- A special screening of "To Kill a Mocking Bird" together with a discussion on tackling racial division at Colchester Arts Centre: 23rd October 2016
- The Oyster Feast: 30th October 2016

144   Annual Scrutiny Report

RESOLVED (UNANIMOUSLY) that the recommendations contained in minute 78 of the Scrutiny Panel meeting of 19 July 2016 be approved and adopted.

145   Notices of Motion pursuant to the provisions of Council Procedure Rule 11

It was proposed by Councillor T. Young and supported by Councillors B. Oxford, Higgins and Willetts that:-

"We are proud to live in a diverse and tolerant society. Racism, xenophobia and hate crimes have no place in our country. This Council condemns racism, xenophobia and hate crimes unequivocally. We will not allow hate to become acceptable.

This Council will work to ensure local bodies and programmes have support and resources needed to fight and prevent racism and xenophobia.

We reassure all people living in the Borough of Colchester that they are valued members of our community."

On being put to the vote, the motion was carried unanimously.

146   Questions to Cabinet Members and Chairmen pursuant to Council Procedure Rule 10

Questioner	Subject	Response
Verbal Questions		
Councillor L. Scott-Boutell	Would the Leader of the Council agree that that the petition presented to the Mayor earlier in the meeting indicated a strong level of opposition to the closure of the Lexden Heath Delivery Office and what action would he take to support residents on this issue?	Councillor Smith, Leader of the Council and Portfolio Holder for Strategy, indicated that it did show a strong level of opposition and that he had written to the Post Office to ask for a meeting to discuss the issue.
Councillor Harris	What plans were in place to support the community groups using the Alderman Blaxill site and secure accommodation for them, given the plans to reopen the school in two years?	Councillor Feltham, Portfolio Holder for Business, Opportunities and Leisure, indicated that she would look into the issue.
Councillor Hazell	Whether the Portfolio Holder for Business, Opportunities and Leisure would provide information about the budget for 2015-16 for Gosbecks Archaeological Park, as previously requested?	Councillor Feltham, Portfolio Holder for Business, Opportunities and Leisure indicated that she would forward the information.
Councillor Chillingworth	Whether the administration had any plans for a travellers transit site in the borough and whether it would adopt the same process the Conservative administration had used to successfully identify the travellers site at Severalls Lane?	Councillor Bourne, Portfolio Holder for Housing and Public Protection, explained that the Essex County Travellers Unit was trying to get a commitment for such sites from boroughs across Essex. The provision of a transit site would make it easier to move travellers from unauthorised sites. The administration was content to use the Local Plan process to see if a

		suitable site could be found.
Councillor Wood	Could the Portfolio Holder for Resources confirm that the budget for 2016/17 was a balanced budget? According to her calculations it was not and should be revised and resubmitted.	Councillor Cory, Portfolio Holder for Resources invited Councillor Wood to set out her concerns in writing so they could be addressed.
Councillor Liddy	How the Council's performance on irrecoverable debts compared with other local authorities in the region.	Councillor Cory, Portfolio Holder for Resources, invited Councillor Liddy to submit a detailed written question to which he would respond. However, debts were rigorously pursued.
Councillor Scott	Could the Portfolio Holder for Waste and Sustainability provide an update on the latest position on the waste and recycling options consultation? Had a further report from QA been commissioned?	Councillor Graham, Portfolio Holder for Waste and Sustainability, indicated that the consultation had concluded and the results were being analysed. The conclusions would be announced soon. The report would be circulated to all Councillors in due course and the recommendations from the consultation would be referred to the Scrutiny Panel.
Councillor Lissimore	Could the Portfolio Holder for Waste and Sustainability confirm that the target announced by officers of reporting to Scrutiny Panel and Cabinet on the consultation by September 2016 was still realistic and would he be publishing a plan to increase the levels of recycling?	Councillor Graham, Portfolio Holder for Waste and Sustainability, indicated that he could not be precise on the timing but expected that he would be able to report in September.

Councillor Jarvis	Councillor Jarvis thanked Councillor T. Young for making himself available and sharing information where appropriate and hoped that this would continue as they had the shared aim of improving Colchester's prosperity.	Councillor T. Young, Portfolio Holder for Culture and Regeneration, thanked Councillor Jarvis for his comments.
Councillor Davies	As the Charter Market had started with 100% occupancy rates, and that occupancy rates were now 54% what had happened to the other 46% of occupants.	Councillor T. Young, Portfolio Holder for Culture and Regeneration, explained that he would be looking at occupancy rates with the market manager. However, the occupancy rates were amongst the best of any market in Essex.
Councillor Davies	Would the Portfolio Holder for Community Safety and Licensing be pursuing a policy of tackling inconsiderate parking outside schools?	Councillor Lilley, Portfolio Holder for Community Safety and Licensing, explained that he had asked officers to see what could be done to address the issue and the Civil Enforcement Officers had been asked to visit each school every two weeks. He would brief the Shadow Portfolio Holder when he had further information.
Councillor Davies	Were all websites for which Colchester Borough Council was responsible, kept fully up to date? In particular there was information on the Better Colchester website that was out of date.	Councillor Smith, Leader of the Council and Portfolio Holder for Strategy, indicated that every effort was made to keep websites up to date but if Councillors came across out of date or incorrect information, then they should inform the Council.

Councillor Pearson	Did the Leader of the Council have a view on collective Cabinet responsibility for agreed Council policy?	Councillor Smith, Leader of the Council and Portfolio Holder for Strategy, explained that all members of the Council and Cabinet had a responsibility to work together to provide the best performance for the people of Colchester. There would on occasions be times when views differ and members may need to represent the views of their residents rather than the views of Cabinet.
Councillor Maclean	Had the Council received any legal advice in respect of the Planning Inspector's decision on Stane Park and whether the Council would be appealing. Given the complexity of the issues, would the possibility of significant costs being awarded against the Council be considered as part of the decision making on any appeal?	Councillor Graham, Portfolio Holder for Waste and Sustainability, indicated that the Council was considering its position and it would be inappropriate to comment further at this stage. The risk of costs being awarded against the Council would be considered as part of the assessment of any appeal.
Councillor Laws	Would the Portfolio Holder for Community Safety and Licensing see what could be done to repair the bridge at Middleborough by the River Lodge and also the condition of the bridge on North Station Road.	Councillor Lilley, Portfolio Holder for Community Safety and Licensing, indicated that he had asked officers to look into both these issues.
Councillor Arnold	Officers had indicated at the Scrutiny Panel meeting that they were not aware of a timetable for the reporting on the outcome of the waste recycling options consultation.	Councillor Graham, Portfolio Holder for Waste and Sustainability, indicated that he would speak to officers to ensure that a timetable was agreed in the near

	Was the Portfolio Holder aware that it was his responsibility to drive the process forward?	future.
Councillor Hazell	Would the Portfolio Holder for Community Safety and Licensing ensure that Gosbecks Primary School was included in the schools visited in respect of inconsiderate parking?	Councillor Lilley, Portfolio Holder for Community Safety and Licensing, explained that all schools would be visited.
Councillor Chapman	Had the Portfolio Holder for housing and Public Protection had enquiries from residents or organisations wishing to self-build and what steps had been taken to match people and plots. Would there be value in further publicity?	Councillor Bourne, Portfolio Holder for Housing and Public Protection, explained that a register had been set up and to date 11 applications had been received. There would be an opportunity through the Local Plan process to match applicants with suitable plots. Information on the scheme was available on the website. It was quite a specialised field and most of those who were interested had already been aware of the scheme.
Councillor Barber	Would the Leader of the Council give residents greater say over the use of New Homes Bonus? The community budgets were not enough to cope with need especially in respect of investment in infrastructure.	Councillor Smith, Leader of the Council and Portfolio Holder for Strategy, explained that each Councillor was given a community budget of £2000 from New Homes Bonus funding, to spend on projects within their ward. In terms of infrastructure, Essex County Council received 20% of New Homes Bonus raised in Colchester and did not

		reallocate any of this back in Colchester.

147   Amendments to the Constitution

RESOLVED that the decisions proposed in the Monitoring Officer's report be approved and adopted.

148   Schedule of Portfolio Holder Decisions

RESOLVED that the schedules of Portfolio Holder decisions for the period 2 February 2016 – 12 July 2016 be noted.

Extract from the minutes of the Cabinet meeting on 12 October 2016

111. 2015/16 Year End Review of Risk Management

The Assistant Chief Executive submitted a report a copy of which had been circulated to each Member.

Councillor Davies attended and with consent of the Chairman addressed the Cabinet. In view of the recent problems with the Council's telephony system, risk 6e needed to be reviewed and its probability scoring increased to five.

Councillor Mark Cory, Portfolio Holder for Resources, explained that Councillor Davies concerns would be considered when the risk register was next reviewed. The reduced probability in risk 6c – inability to deliver the budget strategy as planned - was highlighted.

RESOLVED that:-

(a)   The risk management work undertaken during 2015/16 be noted.

(b)   The current strategic risk register be noted.

(c)   The proposed risk management strategy for 2016/17 be approved and *RECOMMENDED TO COUNCIL* that it be included in the Council's Policy Framework.

REASONS

Cabinet has overall ownership of the risk management process and is responsible for endorsing its strategic direction. Therefore the risk management strategy states that Cabinet should receive an annual report on progress and should formally agree any amendments to the strategy itself.

During the year progress reports are presented to the Governance and Audit Committee detailing work undertaken and current issues. This report was presented to the Governance and Audit Committee on 26 July 2016, where they approved its referral to this meeting.

The Risk Management Strategy is one of the key corporate governance documents that supports the Constitution of the Council and forms part of the Policy Framework. Accordingly any amendments have to be approved by Full Council.

ALTERNATIVE OPTIONS

Not to approve the risk management strategy or to approve it with amendments.

Agenda item 7(ii)

Extract from the minutes of the Governance and Audit Committee meeting on 11 October 2016

25.   Health and Safety Policy 2016/17

Hayley McGrath, Corporate Governance Manager, introduced the Health and Safety Policy 2016/17. The report requests that the Committee review and endorse the Health and Safety Policy for 2016/17 and consider and comment on the work undertaken during 2015/16.

Hayley McGrath outlined that this was the first time the Health and Safety Policy had been sent to the Governance and Audit Committee for approval. Health and safety had been previously been included as part of the Annual Governance Statement for Colchester Borough Council and the partnership organisations; in previous years health and safety had been identified as an area that required improvement.

Since the review a new officer has been employed and new policies and procedures have been implemented. Colchester Borough Council has a Health and Safety Committee where all teams across the Council are represented by a designated officer who has been given Institution of Occupational Safety and Health training. Currently the Health and Safety Policy is not part of the formal policy framework, but does form part of the risk management process. Hayley McGrath stated that there is a quarterly audit programme for Health and Safety, and a Health and Safety training matrix has been agreed by Senior Management team to ensure that there is training at all levels of the organisation.

Councillor Willetts questioned whether there had been any serious failures of health and safety, as any incidents reported to the Governance and Audit Committee would assist in assessing whether the policy is fit for purpose. In response Hayley McGrath stated that a table of incidents can be brought to a future briefing. The majority of changes to the Health and Safety Policy have only been introduced during this year, and statistics prior to its introduction are skewed as incidents that weren't related to health and safety were recorded as such. Hayley McGrath highlighted one of the most serious accidents over the past year involved a member of staff operating a street sweeper in the Town Centre. The incident was investigated by the Health and Safety Executive and found no failings.

In response to a further question regarding North Essex Parking Partnership (NEPP) staff, Hayley McGrath and Matthew Sterling, Assistant Chief Executive, confirmed that whilst they are directed by the Partnership in terms of role objectives they are Colchester Borough Council staff. Both the North Essex Parking Partnership and the Colchester and Ipswich Museums Service have representatives on the Health and Safety Committee. With regard to the NEPP, the Health and Safety Committee have assisted in the introduction of the body warn cameras and violence and aggression training for the Civil Enforcement Officers. In addition information on health and

safety is reported to both partnerships joint committees through the annual governance statement.

The Chair proposed, with agreement from the Committee, that a recommendation be made to Council that the Health and Safety Annual report be incorporated into the Council's policy framework.

RESOLVED;

a) That the Health and Safety Policy for 2016/17 be endorsed.

b) That the work undertaken during 2015/16 be noted.

c) To *RECOMMEND* to Council that the Health and Safety Policy be included in the Council's Policy Framework.

Extract from the minutes of the Governance and Audit Committee meeting on 11 October 2016

27.   **Review of the Council's Ethical Governance Policies**

Andrew Weavers introduced the report, which comes to the Committee each year, which requests that the following policies be reviewed;

* Anti-Fraud and Corruption

* Whistleblowing

* Anti-Money Laundering

* Covert Surveillance

* Corporate Information Security

* Data Protection

The report also requests that the revised policies are recommended to Council to be included in the Council's Policy Framework.

Andrew Weavers went through the policies and highlighted whether any revisions had taken place during the year. With regard to the Anti-Fraud and Corruption Policy, Andrew Weavers stated that it had been reviewed and was deemed fit for purpose, the only alteration is that any allegations of benefit fraud are to be referred to the Department of Work and Pensions for investigation, rather than previous having been dealt with Colchester Borough Council staff.

With regard to the Whistleblowing Policy, Andrew weavers said that there had been no change in the policy as it remains fit for purpose. Mr Weavers also stated that there had been no instances of whistleblowing during the financial year; the Council has a secure whistleblowing e-mail address that is monitored by the Monitoring Officer, the Corporate Governance Manager and the Section 151 Officer.

With regard to the Anti-Money Laundering policy this had been reviewed and deemed fit for purpose with no instances of the policy being used. The Covert Surveillance policy, which involves Regulations of Investigatory Powers Act (RIPA), has been received and updated with Home Officer advice. Andrew Weavers stated that the Council must report annually to the

Office of Surveillance Commissioner to inform if any powers are used; during 2015/16 no covert surveillance was undertaken.

The Corporate Information Security Policy has also been reviewed, following its introduction into the Ethical Governance Policies last year and was deemed fit for purpose. The Data Protection Policy was also brought to the Committee for the first time last year and has also been reviewed. Andrew Weavers highlighted that a data protection incident had occurred during the year involving a third party contractor losing an encrypted memory stick, which underlined the importance of having this policy in place. All the policies will need to be recommended to the next Council meeting.

The Committee welcomed the reports, and requested that when the reports come back to the Committee additional information is included about the times when the policies have been invoked.

Councillor Chillingworth questioned whether the surveillance policy included information on drones. Andrew Weavers responded to the question stated that it depends on what is being done with the drones. For example overt CCTV is not surveillance, however if it is directed or it zooms in it becomes direct surveillance, footage of the street scene from a drone would be classed as overt. The Government will be issuing guidance in the near future about usage of drones.

RESOLVED;

a) that the following polices be approved:

* Anti-Fraud and Corruption

* Whistleblowing

* Anti-Money Laundering

* Covert Surveillance

* Corporate Information Security

* Data Protection

b) RECOMMENDED to Council that the policies be included in the Council's Policy Framework.

Extract from the minutes of the Governance and Audit Committee meeting of 11 October 2016

30.   Review of Local Code of Corporate Governance

Hayley McGrath, Corporate Governance Manager, introduced the report which requests that the updated Local Code of Corporate Governance for 2016/17 be reviewed and recommended to Council for inclusion in the Council's policy framework.

Hayley McGrath stated that the aim of the Local Code of Corporate Governance is deliver good governance at Colchester Borough Council. The code has six core principles, which contain a number of aims and steps to achieve those aims. Hayley McGrath stated that this is reviewed on an annual basis and forms the basis of the Annual Governance Review.

Councillor Chillingworth suggested that under 4.1.1 of the Local Code of Corporate Governance there should be a reference to the Call-in procedures as part of the Scrutiny function.

RESOLVED;

a) That Scrutiny of Portfolio Holder decisions be included under the processes of principle 4.1.1

b) To *RECOMMEND* to Council that the Local Code of Corporate Governance be included in the Council's Policy Framework.

Record of Decisions taken under Scheme of Delegation to Cabinet Members
13 July 2016 – 16 October 2016

Portfolio – Business, Leisure and Opportunities					
Date	Number	Report Title	Author	Decision	Result
04/08/16	BUS-002-16	Dog Control; Orders at Mill Road Sports Ground	Cassandra Clements/David Carter	To agree the implementation of a Dog Control Order at Mill Road Sports Ground under the Clean Neighbourhoods and Environment Act 2005	Agreed 11/08/16
24/08/16	BUS-003-16	Get Active Grant Award	Bob Penny	To agree the award of small grants to clubs and organisations	Agreed 01/09/16
06/09/16	BUS-004-16	Macmillan Award Benefit Service	Erroll Holloway	To accept the contract offer from Macmillan for Colchester Borough Council to host the Macmillan Welfare Benefits Service for period 1st November 2016 to 31st October 2017. This presents a cost neutral position for Colchester Borough Council in terms of salary costs and direct expenses. To expand the service and shift operational priorities to acute settings.	Agreed 13/09/16
27/09/16	BUS-005-16	Transparency Statement on Modern Slavery	Andrew Harley	That a Transparency Statement is published by the Council on its website by 30 September 2016 in accordance with Section 54 of the Modern Slavery Act 2015	Agreed 04/10/16

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Record of Decisions taken under Scheme of Delegation to Cabinet Members
13 July 2016 – 16 October 2016

Portfolio – Culture and Regeneration					
Date	Number	Report Title	Author	Decision	Result
14/09/16	CRG-001-16	**Colchester Borough Council's response to Tendring District Council's Preferred Options Local Plan consultation.**	Christopher Downs	**To approve the Council's consultation response to Tendring District Council's Preferred Options Local Plan consultation.**	Agreed 21/09/16

Portfolio – Customers					
Date	Number	Report Title	Author	Decision	Result
No decisions in this period					

Portfolio – Housing and Public Protection					
Date	Number	Report Title	Author	Decision	Result
No decisions in this period					

Portfolio – Resources					
Date	Number	Report Title	Author	Decision	Result
20/07/16	RES-003-16	**Award of Contract for the Supply of Insurance services**	Hayley McGrath	**To award the contract for the provision of Insurance Services, as set out in the invitation to tender, to Zurich Municipal for a**	Agreed 03/08/16

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Record of Decisions taken under Scheme of Delegation to Cabinet Members
13 July 2016 – 16 October 2016

				period of three years with an option to extend for a further two years.	
28/09/16	RES-004-16	**Appointment of professional services team for the Mercury redevelopment project**	Holly Brett	**To appoint Colchester Borough Homes (CBH) to carry out professional services in order to deliver stage one of the Mercury redevelopment project as set out in the Arts Council bid and for them to procure specialist consultants (where necessary subject to complying with their own internal procurement rules)**	Agreed 05/10/16
29/10/16	RES-005-16	**Irrecoverable Debts over £5,000**	**Michelle Tarburn**	**To approve the writing off of the following debts totalling £69,471.62 which have proved irrecoverable. Housing Benefit Overpayments totalling: £69,471.62**	Agreed 06/10/16

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Record of Decisions taken under Scheme of Delegation to Cabinet Members
13 July 2016 – 16 October 2016

Portfolio –Safer Communities and Licensing					
Date	**Number**	**Report Title**	**Author**	**Decision**	**Result**
14/07/16	SCL-002-16	**Refurbishment of Priory Street Car Park**	Matthew Young	**To accept the tender submitted by Eurovia Infrastructure Ltd for the refurbishment of Priory Street car park at £499, 968**	Agreed 21/07/16
06/10/16	SCL-003-16	**Response to the consultation on the Police and Crime Commissioner for Essex' Police and Crime Plan 2016-2020**	Melanie Rundle	**To agree the Portfolio Holder response to the consultation on the Essex Police and Crime Commissioner's Police and Crime Plan for 2016 - 2020.**	Agreed 13/10/16

Portfolio – Strategy					
Date	**Number**	**Report Title**	**Author**	**Decision**	**Result**
No decisions in this period					

Portfolio – Waste and Sustainability					
Date	**Number**	**Report Title**	**Author**	**Decision**	**Result**
No decisions in this period					

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	Cabinet	**Item**
	12 October 2016	**8(ii)**

Report of	**Assistant Chief Executive**	**Author**	**Hayley McGrath** ☎ **508902**
Title	**2015/16 Year End Review of Risk Management**		
Wards affected	Not applicable		

> **This report concerns the Risk Management work undertaken for the period 1 April 2015 to 31 March 2016.**

1. Decisions Required

1.1 Note the risk management work undertaken during 2015/16.
1.2 Note the current strategic risk register.
1.3 Approve the proposed risk management strategy for 2016/17 and recommend to full Council that it be included in the Council's Policy Framework.

2. Reason for Decisions

2.1 Cabinet has overall ownership of the risk management process and is responsible for endorsing its strategic direction. Therefore the risk management strategy states that Cabinet should receive an annual report on progress and should formally agree any amendments to the strategy itself.

2.2 During the year progress reports are presented to the Governance & Audit Committee detailing work undertaken and current issues. This report was presented to the Governance & Audit Committee on 26 July 2016, where they approved its referral to this meeting.

2.3 The Risk Management Strategy is one of the key corporate governance documents that supports the Constitution of the Council and forms part of the Policy Framework. Accordingly any amendments have to be approved by Full Council.

3. Key Messages

➢ The main risks on the register - the potential impact of future central government decisions to reduce public funding, failure or inappropriate management of a strategic partner and the potential impact of the European Union referendum result - are all outside of the direct control of the Council. However the impact of these risks can be mitigated, and the reduction of risk 6c – inability to deliver the budget strategy – is a reflection of the work that has been undertaken to ensure that the organisation can respond to these challenges.

➢ Risk Management principles continue to be reinforced and embedded in the organisation. The 2015 Audit Results Report, issued by the Council's external auditors, Ernst & Young, in August 2015, did not include any findings of anticipated risks occurring. This is further demonstrated by the 2015/16 internal audit review which provided a substantial assurance level.

4. Supporting Information

4.1 The aim of the Council is to adopt best practices in the identification, evaluation, cost-effective control and monitoring of risks across all processes to ensure that risks are properly considered and reduced as far as practicable.

4.2 In broad terms risks are split into three categories:
  ➤ Strategic – those risks relating to the long term goals of the Council
  ➤ Operational – risks related to the day-to-day operation of each individual service
  ➤ Project – consideration of the risks relating to specific initiatives

4.3 Strategic risks are essentially those that threaten the long term goals of the Council and therefore are mainly based around meeting the objectives of the Strategic Plan. They may also represent developing issues that have the potential to fundamentally affect service provision, such as proposals to dramatically change welfare processes. Strategic risks are owned by members of the Senior Management Team.

4.4 Operational risks are those that threaten the routine service delivery of the Council. Each service area has their own operational risk register that details the risks associated with providing the service. These registers are reported, in summary format, to the Senior Management Team and committee on an annual basis. High risks and the success in controlling them are reported to Senior Management Team on a quarterly basis, as these assist in the formulation of the strategic risk register.

4.5 Project risks are those that relate solely to the successful delivery of that specific project. They tend to be quantifiable issues, such as resource or time related, and constantly change and develop over the course of the project as each stage is completed. The lead on the project is responsible for ensuring that there is an appropriate risk register and high level issues are reported to the senior management team.

5.0 Summary of 2015/16

5.1 A significant proportion of the work undertaken this year has been to support the review of the Council's Health and Safety framework. Health and Safety is the subject of a separate report to this committee later in the year, however it forms part of the governance framework and is essential for managing the Council's physical risks.

5.2 Work has been undertaken supporting the Community Stadium and football club with their Safety Advisory Group (SAG). This meets on a regular basis to review arrangements for general events as well as football matches. Previously this operated in isolation to the overall Colchester SAG (which is chaired by the Council but is attended by partner organisations including Police, Fire and Essex County) however it now works alongside it.

5.3 A specific SAG has been set up in respect of Garrison related events, which include the Royal Salute, anniversaries of significant battles and Remembrance Sunday. The group reviews the risks relating to these events including public order and, crowd / traffic management.

5.4 The Change and Performance team have been refining the processes for managing project risks and there is guidance and documentation available online for all staff to access, to be able to complete a risk log for their projects. These are then used to monitor risks across all projects and any significant issues are raised at project board level.

5.5   There were no fundamental changes to the processes used to identify and control risk, during 2015/16.

5.6   An audit of the risk management function was carried out in January 2016. This produced two level two recommendations. These related to refreshing the information available to staff on-line and to the formal review of operational risks registers.

5.7   The risk registers for the Joint Museum Service and the North Essex Parking Partnership both continue to be produced and reported to the joint committees.

6.   Strategic Risk Register

6.1   During 2015/16 the strategic risk register was reviewed by the senior management team every quarter and reported to the Governance & Audit Committee every six months. The current register is shown at appendix 1. These risks have been mapped onto a risk chart as shown at appendix 2.

6.2   The Corporate Governance Manager reviewed the strategic risks with each member of the Senior Management Team in March 2016, and in June the Performance Management Board (PMB) comprehensively reviewed the register to ensure that the identified risks were still appropriate.

6.3   The review by PMB reduced the probability of risk 6c - Inability to deliver the budget strategy as planned - to 3, resulting in an overall score of 12 (down from 16).

6.4   A new risk has been added at 4.e - relating to the results of the EU referendum. Whilst it is still uncertain what the impacts will be on the organisation, it was felt appropriate that the risk should be included for monitoring.

6.5   A further new risk has been added at 5d – relating to the management of the Garden Communities project – recognising this is a fundamental project to deliver significant investment in not just Colchester but the surrounding areas as well.

7.   Risk Management Strategy for 2016/17

7.1   The Council's current approach to managing risk was introduced in 2006/07. A requirement within the strategy, and also of the annual audit assessment, is to review the approach each year to ensure that it is still appropriate to the Council's needs.

7.2   Therefore a review has been undertaken and the strategy has been updated for 2016/17. The revised strategy is attached at appendix 3. There are no fundamental changes proposed to the risk process with amendments only to external review comments and the updating of role titles.

8.   Proposals

8.1   To note and comment upon:
   ➢ the Councils progress and performance in managing risk during 2015/16, and
   ➢ the current strategic risk register.

8.2   To endorse the submission of the revised Risk Management Strategy for 2016/17 to Full Council for inclusion in the Policy Framework.

9. Strategic Plan References

9.1   The strategic risk register reflects the objectives of the strategic plan and the actions have been set with due regard to the identified key strategic risks. Therefore the risk process supports the achievement of the strategic objectives.

10. Risk Management References

10.1   The failure to adequately identify and manage risks may have an effect on the ability of the Council to achieve its objectives and operate effectively.

11. Other Standard References

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

1. AMBITION									
	SCORE								
Specific Risks	Current			Previous			Consequences	Actions	Owner	Timing
	P	I	O	P	I	O				
1a	In a period of public sector resource reductions the ability to have ambition and to deliver on that ambition.	3	2	6				Major changes needed to the town would not be delivered thus affecting the quality of life of its residents and businesses.	Implement a regular reporting mechanism to SMT that includes defined performance criteria.	Executive Director	September 2016
1b	Unrealistic internal and external expectations on the speed of delivery.	3	3	9				Major downturn in public sector resourcing over the next few years will hamper the speed of delivery across the services provided.	Produce an IT development strategy that supports the next stage of our transformation and outcomes. This should be reviewed and reported to PMB on a regular basis.	Assistant Chief Executive	September 2016
1c	The Council is unable to effectively influence changes in the Borough economy.	3	4	12				Poorer external assessments by independent agencies and loss of Council reputation.			
1d	Over reliance on a limited number of people limits ability to deliver our ambition.	3	3	9				The Borough Council loses its status and influencing ability at sub-regional, regional and national levels.	Officers with more commercial skills have been appointed and others can learn from their experiences together with a set of commercial skills training being implemented across the organisation to re-skill officers for the new ways of working. The Trading Board and the Cabinet need to continue to enhance their commercial understanding in order to take the opportunities offered by a more commercial approach.	Strategic Director	September 2016
1f	The organisation fails to recognise the tensions between aspirations and statutory functions.	3	3	9							

		SCORE									
		Current			Previous						
	Specific Risks	P	I	O	P	I	O	Consequences	Actions	Owner	Timing
2a	The increasing expectations of our customers, set alongside the financial constraints will create challenges to service delivery, our channel shift ambitions and the reputation of the authority.	4	3	12				The Authority fails to deliver the standards of service and delivery which our customers expect, especially in relation to self-service and the reliance on IT capabilities.	An engagement and consultation programme is put in place, to ensure customers are able to inform service priorities and delivery and to secure the capability amongst our customers to drive our channel shift program. This will be evidenced by reporting the pattern of usage of the routes used by customers and savings achieved.	Executive Director	September 2016
2b	The expectation remains that the Council will step in to deliver services when other providers either fail or reduce service provision	3	3	9				The Council suffers from a loss of reputation as customers' expectations are not met. There is increased demand on existing services leading to a reduction in standards of delivery.	The UCC environment, creating a single point of contact for our customers, is now in place and a performance framework for customer standards is being developed and will be monitored to ensure delivery. A full lessons learned exercise will be conducted.	Executive Director	September 2016
2c	Impact of Welfare Reform will pose challenges to our resources in responding to rising customer need.	2	4	8				The Council fails to support our most vulnerable residents leading to an increase in crisis intervention.			

2. CUSTOMERS

		SCORE						Consequence	Actions	Owner	Timing
3. PEOPLE											
Specific Risks		Current			Previous			Consequence	Actions	Owner	Timing
		P	I	o	P	I	O				
3a	Unable to compete with the private sector in the recruitment (and retention) of staff with key marketable skills	4	3	12				Decline in service performance Disengaged and demotivated staff Efficiency and productivity reduction	Communicate job opportunities and benefits of working at CBC clearly and imaginatively.	Assistant Chief Executive	Ongoing
									Review opportunities for to do things differently for key posts including considering the value of trading companies.	Assistant Chief Executive	December 16
3c	Staff motivation declines with an impact on service delivery, our capacity to make changes and implementation of budget efficiencies	3	4	12				Inability to meet changing requirements and needs Customer perceptions decline as we deliver less Loss of key staff	Implement the internal communications strategy for staff allowing for staff to feed back.	Assistant Chief Executive	September 2016
									Agree and implement an action plan for the new People Strategy; reviewing performance regularly.	Assistant Chief Executive	September 2016
									Implement a formal learning and development strategy that includes financial considerations and business behaviours, and explores training alternatives.	Assistant Chief Executive	September 2016

P - Probability   I – Impact   O – Overall score

Low = 1 – 4   Medium = 5 – 9   High = 10 – 25

4. HORIZON SCANNING										
Specific Risks		SCORE						Consequence	Actions	Owner	Timing
		Current			Previous						
		P	I	o	P	I	O				
4a	To continuously assess future challenges to ensure Council is fit for future purpose	2	4	8				If not properly managed then either the Council will lose the opportunity to develop further or will have enforced changes to service delivery.	Ensure organisational readiness to respond to external challenges through the organisational goals – Customer, Business, Culture	Executive Director	September 2016
4b	Not taking or creating opportunities to maximise the efficient delivery of services through shared provision, partnerships or commercial delivery	4	3	12				Adverse impact on local residents / resources. Missed opportunities to boost local economy. Conflict between Council / Government agendas. Reduction in levels of service provision and potential withdrawal of services.	Ensure there are regular reports to the Trading Board providing updates on delivery options including assessing the future potential for the Council to deliver commercial income.	Strategic Director	September 2016
4c	Failure by the Council to spot / influence at an early stage the direction of Central Government policies / new legislation.	3	3	9					Review and report the Organisational Development Strategy	Assistant Chief Executive	September 2016
4d	Potential impact of future central government decisions to reduce public funding, including that of our partners	5	4	20					The budget situation is constantly reviewed, incl impact of decisions from central government. Additional actions and areas for spending reviews are being identified.	Chief Operating Officer	September 2016
4e	The outcome of the referendum to leave the European Union is leading to a number of uncertainties. At the moment it is unclear how this will impact on the Council, our communities and businesses. However, it does raise a potential set of risks that will need to monitored	5	3	15							

P - Probability   I – Impact   O – Overall score

Low = 1 – 4   Medium = 5 – 9   High = 10 – 25

		SCORE									
5. PARTNERSHIPS											

Specific Risks		Current			Previous			Consequence	Actions	Owner	Timing
		P	I	O	P	I	O				
5a	Failure or inappropriate performance management of one or more strategic partnerships or key contracts E.g. Haven Gateway, LEP, Health, CAPITA, CBH	4	4	16				The cost of service delivery is increased however quality decreases. Failure to deliver key priorities. Reputational and financial loss by the Authority.	Set an assessment process for proposed strategic partnerships (to ensure that they will satisfy the Council's objectives) that needs to be signed off by EMT before commitment to new partnerships is made.	Executive Director	September 2016
5b	Change of direction / policy within key partner organisations and they revise input / withdraw from projects.	4	3	12				Failure to deliver expected outcomes through partnerships Requirement to repay external funding granted to partnership – taking on the liabilities of the 'withdrawn' partner. External assessment of the Councils partnerships are critical and score poorly.	Set a formal relationship / performance review process to be used by all partnerships and ensure results are reported to senior management...	Executive Director	September 2016
5c	Potential inability to agree shared outcomes/ agendas with partners and the Council's ability to influence partner's performance.	3	4	12							
5d	Working across the partners for delivery of the garden settlements project encounters delay. The partners - Colchester BC, Tendring DC, Braintree DC, Essex CC and the landowners fail to agree objectives and actions	2	4	8				The project fails to deliver its objectives leading to increased costs as there would be delays in local plan progress and loss of reputation, as well as the long term effect on ability to generate investment into the area and meet housing and employment needs.	There is a joint shadow delivery Board that allows the Authorities to co-ordinate their actions and resolve issues.	Strategic Director	September 2016

		SCORE								
		Current			Previous					
Specific Risks		P	I	O	P	I	O	Consequence	Actions	Owner	Timing

6. ASSETS & RESOURCES

Specific Risks		Current P	I	O	Previous P	I	O	Consequence	Actions	Owner	Timing
6a	Failure to protect public funds and resources – ineffective probity / monitoring systems	3	4	12				Service delivery failure Financial and reputational loss by the Authority Personal liability of Officers and Members. Legal actions against the Council Loss of stakeholder confidence in the Borough Inability to sustain costs	Develop a formal process to manage the assurance systems that form the internal control environment, including Internal Audit, Risk Management, Budget process, Corporate Governance and performance management. This must be reported to senior officers and members on a regular basis to ensure that it is fully embedded	Chief Operating Officer	September 2016
6b	Risk that Asset Management is not fully linked to strategic priorities and not supported by appropriate resources	3	4	12				Failure to deliver a balanced budget as planned. A need to use balances / reserves or to adapt financial plans to deal with impact of changes. Required to use Reserves & Resources to fund capital priorities Severe impact on cash-flow leading to negative effect on performance targets	Review the budget monitoring process to ensure it reflects the structure and co-ordinates finances across the whole Council not just individual service areas.	Chief Operating Officer	Regular reporting to PMB. & Governance Review September 2016
									Ensure the continued development of the Revolving Investment Fund (RIF) - a sub-committee of Cabinet which has been created to link asset management to the strategic priorities and ensure that assets are used to their full commercial potential.	Strategic Director	September 2016

Continued.

P - Probability   I – Impact   O – Overall score

Low = 1 – 4   Medium = 5 – 9   High = 10 – 25

June 2016

6. ASSETS & RESOURCES										
Specific Risks		SCORE						Consequence	Actions	Owner	Timing
6c	Inability to deliver the budget strategy as planned.	3	4	12	4	4	16		Develop the annual budget strategy to ensure it has controls built in to be able to respond to changes in the strategic objectives and includes sensitivity analysis to consider the impact of potential changes to external funding or other incomes streams. Consider impact of loss or reduction in key income areas as part of budget strategy / budget plans.	Chief Operating Officer	Annual exercise. Council approves budget in Feb annually
6d	Failure to set aside sufficient capital funds for strategic priorities	3	4	12					Implement a regular review process for the medium term financial outlook, capital programme and HRA business plan processes to ensure they are kept up to date and realistic.	Chief Operating Officer	MTFS is part of the budget strategy & considered during the process. Capital programme regularly reported to Governance Cttee. Review September 2016
6e	Significant reliance on our ICT presents challenges in maintaining customer service in the event of service interruptions.	2	5	10					Changes to be planned to ensure customer service is maintained	Assistant Chief Executive	Next review September 2016
6f	Increasing demands around information security create a risk in the event that security breaches occur	2	5	10					Review the IT security policies to ensure that they are fit for purpose and implement a training program for all staff.	Assistant Chief Executive	Next review September 2016

P - Probability   I – Impact   O – Overall score

Low = 1 – 4   Medium = 5 – 9   High = 10 – 25

SCORE DEFINITIONS	1 Very Low	2 Low	3 Medium	4 High	5 Very High
Impact	Insignificant effect on delivery of services or achievement of Strategic Vision & Corporate Objectives.	Minor interruption to service delivery or minimal effect on Corporate Objectives.	Moderate interruption to overall service delivery/effect on Corporate Objectives or failure of an individual service.	Major interruption to overall service delivery or severe effect on Corporate Objectives.	Inability to provide services or failure to meet Corporate Objectives
Probability	10% May happen – unlikely	10 -25% Possible	26 – 50% Could easily happen	51 – 75% Very likely to happen	Over 75% Consider as certain

Risks Removed

1e The resource implications, including ICT, staffing and financial, of the UCC FSR are greater than anticipated. Removed July 15.

3b Failure to sustain adequate resource to support training and development because of the financial situation. Removed July 15.

3d Failure to provide effective and visible political and managerial leadership. Removed July 15

RISK MATRIX
JUL 16 - SEP 16

Low Risks	Medium Risks	High Risks

Scoring 1-5

Risk Tolerance Line

		1 Very Low	2 Low	3 Medium	4 High	5 Very high
Probability of Occurance	5 Very High			4e	4d	
	4 High			2a 3a 4b / 5b	5a	
	3 Medium		1a	1b 1d / 1f / 2b 4c	1c 5c 6a / 3c / 6b 6c 6d	
	2 Low				2c 4a / 5d	6e 6f
	1 Very Low					

Severity of Impact

Removed Risks

1e The resource implications, including ICT, staffing and financial, of the UCC FSR are greater than anticipated. Re

3b Failure to sustain adequate resource to support training and development because of the financial situation. Ren

DRAFT
Risk Management Strategy 2016/17

A guide to the Council's approach to managing risk. Draft for review.

July 2016

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RISK MANAGEMENT STRATEGY

This document outlines the Council's commitment to managing risk in an effective and appropriate manner. It is intended to be used as the framework for delivery of the Risk Management function and provides guidance on developing risk management as a routine process for all services.

INTRODUCTION

The Council undertakes that this strategy will ensure that:

1. The management of risk is linked to performance improvement and the achievement of the Council's strategic objectives.

2. Members and the Senior Management Team own, lead and support on risk management.

3. Ownership and accountability are clearly assigned for the management of risks throughout the Council.

4. There is a commitment to embedding risk management into the Council's culture and organisational processes at all levels including strategic, programme, project and operational

5. All members and officers acknowledge and embrace the importance of risk management as a process, by which key risks and opportunities are identified, evaluated, managed and contribute towards good corporate governance.

6. Effective monitoring and reporting mechanisms are in place to continuously review the Council's exposure to, and management of, risks and opportunities.

7. Best practice systems for managing risk are used throughout the Council, including mechanisms for monitoring and reviewing effectiveness against agreed standards and targets.

8. Accountability to stakeholders is fully demonstrated through periodic progress reports and an annual statement on the effectiveness of and the added value (benefits) from the Council's risk management strategy, framework and processes.

9. The Council's approach is regularly assessed by an external, independent body against other public sector organisations, national standards and Best Practice.

10. The Risk Management Strategy is reviewed and updated annually in line with the Council's developing needs and requirements.

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Endorsement by Adrian Pritchard, Chief Executive

"*Colchester Borough Council is committed to ensuring that risks to the effective delivery of its services and achievement of its overall objectives are properly and adequately controlled. It is recognised that effective management of risk will enable the Council to maximise its opportunities and enhance the value of services it provides to the community. Colchester Borough Council expects all officers and members to have due regard for risk when carrying out their duties.*"

WHAT IS RISK MANAGEMENT

Risk Management is the control of business risks in a manner consistent with the principles of economy, efficiency and effectiveness. It is an essential performance management process to ensure that both the long and short term objectives of the Council are achieved and that opportunities are fully maximised.

Risk Management is not about eliminating risk, as this would limit the ability of the organisation to develop and deliver its ambitions. Its purpose is to recognise the issues that could effect the achievement of our objectives and develop actions to control or reduce those risks. Acknowledgement of potential problems and preparing for them is an essential element to successfully delivering any service or project. Good management of risk will enable the Council to rapidly respond to change and develop innovative responses to challenges and opportunities.

'The Good Governance Standard for Public Services' issued by The Independent Commission on Good Governance in Public Services states that there are six core principles of good governance including 'Taking informed, transparent decisions and managing risk'. The document goes on to state 'Risk management is important to the successful delivery of public services. An effective risk management system identifies and assesses risks, decides on appropriate responses and then provides assurance that the chosen responses are effective'.

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BACKGROUND

A process for managing risks was first adopted by the Council in 2003 and since then has been developed to ensure that it continues to be an effective management system. This strategy defines Colchester Borough Council's definition of risk and the processes to be followed.

In broad terms risks are split into three categories:
➢ Strategic – those risks relating to the long term goals of the Council
➢ Operational – risks related to the day-to-day operation of each individual service
➢ Project – consideration of the risks occurring as a result of the Council's involvement in specific initiatives

The following are some of the practical ways that risks are managed and how effectiveness is measured:
➢ Creation of an overall strategic register.
➢ Creation of operational risk registers for all service areas.
➢ Consideration of risk in Committee reports.
➢ Development of a comprehensive risk register for the project management programme and consideration of risk as a project management tool.
➢ Successful internal and external assessment.
➢ Provision of advice to other authorities regarding our management of risk.

This has led to a practical and workable approach to managing risk and has resulted in the Council becoming more risk aware and actually taking more risks, as demonstrated by the comprehensive project risk register. Colchester is also highly regarded for managing risk by both our insurers and other authorities.

The 2015/16 internal audit of risk management gave a substantial assurance opinion. Two recommendations were raised during the audit relating to the update of on-line guidance and reviewing of operational risk registers.

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OWNERSHIP

The responsibility to manage risk rests with every member and officer of the Council however it is essential that there is a clearly defined structure for the co-ordination and review of risk information and ownership of the process.

Appendix 3 is from the CIPFA/SOLACE risk management guide, Chance or Choice. It is a generic map of responsibility for each part of the risk management process.

The following defines the responsibility for the risk management process at Colchester:

Cabinet – Overall ownership of the risk management process and endorsement of the strategic direction of risk management.

Portfolio Holder for Resources – Lead Member for the risk management process

Governance and Audit Committee – Responsible for reviewing the effectiveness of the risk management process and reporting critical items to Cabinet as necessary.

Performance Management Board (PMB) – Ownership of the strategic risks and overview of the operational risks. Actively support the Risk Management Strategy and framework.

Chief Operating Officer – Lead officer for the risk management process, demonstrating commitment to manage risk.

Assistant Chief Executive – Responsible for co-ordination of the risk management process, co-ordinating and preparing reports and providing advice and support.

Heads of Service – Ownership, control and reporting of their service's operational risks. Contribute to the development of a risk management culture in their teams.

All Employees – To understand and to take ownership of the need to identify, assess, and help manage risk in their individual areas of responsibility. Bringing to the management's attention at the earliest opportunity details of any emerging risks that may adversely impact on service delivery.

Internal Audit, External Audit and other Review Bodies – Annual review and report on the Council's arrangements for managing risk throughout the Council, having regard to statutory requirements and best practice. Assurance on the effectiveness of risk management and the control environment.

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AIMS & OBJECTIVES

The aim of the Council is to adopt best practices in the identification, evaluation, cost-effective control and monitoring of risks across all processes to ensure that risks are properly considered and reduced as far as practicable.

The risk management objectives of Colchester Borough Council are to:

➢   Integrate risk management into the culture of the Council
➢   Ensure that there are strong and identifiable links between managing risk and all other management and performance processes.
➢   Manage risk in accordance with best practice
➢   Anticipate and respond to changing social, environmental and legislative requirements
➢   Prevent injury, damage and losses and reduce the cost of risk
➢   Raise awareness of the need for risk management by all those connected with the Council's delivery of services.
➢   Ensure that opportunities are properly maximised through the control of risk.
➢   Reduce duplication between services in managing overlapping risks and promote 'best practise'.

Risk Management forms an important part of the Council's system of Internal Control. Previously the Audit Commission assessed the function as operating at level 3 as part of their 'Use of Resources' review... However, the Use of Resources assessment is no longer carried out but the criteria laid down for each assessment level, set out in Appendix C, still provides a robust framework for delivering an effective service.

STRATEGIC RISK MANAGEMENT

Strategic risks are essentially those that threaten the long term goals of the Council and therefore are mainly based around meeting the objectives of the Strategic Plan. They may also represent developing issues that have the potential to fundamentally effect service provision, such as proposals to dramatically change the corporate assessment process.

Strategic risks will be controlled using a register that will detail the risks and associated controls. The register will be owned by the Senior Management Team, with ownership for risks being assigned to individual officers, and will be reviewed every quarter. The strategic risks will be reported to the Governance & Audit Committee at least twice a year.

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OPERATIONAL RISK MANAGEMENT

Operational risks are those that threaten the routine service delivery of the Council. Each service area will have their own operational risk register that details the risks associated with providing the service. These registers will be reported, in summary format, to the Senior Management Team and committee on an annual basis. High risks and the success in controlling them will be reported to Senior Management Team on a quarterly basis, as these will help in the formulation of the strategic risk register.

LINKS

It is essential that risk management does not operate in isolation to other management processes. To fully embed a risk management culture it has to be demonstrated that risk is considered and influences all decisions that the Council makes. It is essential that there is a defined link between the results of managing risk and the following:

➢ The Strategic Plan
➢ Service Plans
➢ Revenue and Capital Budgets
➢ Annual Internal Audit Plan

ACTION REQUIRED

The following actions will be implemented to achieve the objectives set out above:

➢ Considering risk management as part of the Council's strategic planning and corporate governance arrangements.
➢ Ensuring that the responsibility for risk management is clearly and appropriately allocated
➢ Maintaining documented procedures for managing risk
➢ Maintaining a corporate approach to identify and prioritise key services and key risks across the Council and assess risks on key projects.
➢ Maintain a corporate mechanism to evaluate these key risks and determine if they are being adequately managed and financed.
➢ Establish a procedure for ensuring that there is a cohesive approach to linking the risks to other management processes
➢ Including risk management considerations in all committee reports
➢ Providing risk management awareness training to both members and officers.
➢ Developing risk management performance indicators.
➢ Establishing a reporting system which will provide assurance on how well the Council is managing its key risks and ensures that the appropriate Members and officers are fully briefed on risk issues.
➢ Preparing contingency plans in areas where there is a potential for an occurrence to have a significant effect on the Council and its business capability.
➢ Regularly reviewing the risk process to ensure that it complies with current national Governance Standards and Best Practice.
➢ Developing risk management links with key partners and contractors, to ensure that principles are adopted in all areas of service delivery.

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REVIEW

To ensure that the risk management process is effective it will need to be measured and reported to P.M.B., Governance & Audit Committee and Cabinet. As well as a structured reporting process of risks and controls during the year there will need to be an annual review demonstrating the success of the following:

➢   The inclusion of risk management principles within Service Plans and budgets.

➢   The development of the Internal Audit plan based on the risk issues.

➢   Achievement against identified performance indicators.

➢   Members consistently ensuring managing risk is considered as part of the decision making processes within the Council.

➢   Service managers making recommendations that regard risk as an opportunity as well as a threat.

➢   Risk management principles being considered in service reviews, for example in areas such as options for change and service improvements.

➢   Changes in risk being independently identified and assessed by Service Managers

➢   Compliance with the use of resources criteria and self assessment requirements.

Suitable opportunities to benchmark the risk management service against other organisations should also be explored to ensure that it is effective and the work carried out by the Council conforms to best practise.

The four appendices attached give greater detail of key issues:

Appendix 1 – Outline of the risk management process
Appendix 2 – Details of how Risk Management will be reported.
Appendix 3 – CIPFA guidance on Risk Management Responsibilities

The Risk Management Process

Risk Management is a continual process of identifying risks, evaluating their potential consequences and determining the most effective methods of controlling them and / or responding to them. The risks faced by the Council are constantly changing and the continual process of monitoring risks should ensure that we can respond to the new challenges. This process is referred to as the risk management cycle.

Stage 1 – Risk Identification
Identifying and understanding the hazards and risks facing the council is crucial if informed decisions are to be made about policies or service delivery methods. There is detailed guidance available on how to identify risks which includes team sessions and individual knowledge. Once identified a risk should be reported to the Head of Service who will consider its inclusion on the relevant risk register. If the risk is identified in between register reviews then it is reported to the Risk & Resilience Manager for information and the Head of Service is responsible for managing the risk.

Stage 2 – Risk Analysis
Once risks have been identified they need to be systematically and accurately assessed. If a risk is seen to be unacceptable, then steps need to be taken to control or respond to it.

Stage 3 – Risk Control
Risk control is the process of taking action to minimise the likelihood of the risk event occurring and / or reducing the severity of the consequences should it occur.

Stage 4 – Risk Monitoring
The risk management process does not finish with the risk control procedures in place. Their effectiveness in controlling risk must be monitored and reviewed. It is also important to assess whether the nature of the risk has changed over time.

APPENDIX 2

Reporting

No matter how good the process to identify and control risks is, it will not be effective unless the information gained from it is reported and used to influence other management issues / processes. Therefore it is essential that there is a defined process and timetable for reporting the results of the risk management process to both members and officers.

Types of Report

➢ The strategic risk register is reviewed a minimum of twice yearly by P.M.B., with interim reports quarterly as required.

➢ Six monthly review of the operational risk registers and a summary report of these reviews to P.M.B.

➢ A six monthly report is provided to Committee (Governance and Audit) detailing the current strategic and high level operational risks and the progress made in controlling them.

➢ An annual report reviewing Risk Management activity and an action plan for the coming year - taking into account changes in methodology and results of internal and external reviews. Going to P.M.B., Governance & Audit and Cabinet. This needs to cover all of the three areas of risk

➢ Ad-hoc reports need to be provided to P.M.B. when new, significant risk issues arise.

The reports can be summarised as follows:

	Service's	P.M.B.	Governance & Audit	Cabinet
Quarterly		Review of strategic risk register		
6 Monthly	Review of operational risk register	Summary of operational review from services	Progress report of strategic & high level operational risks	
Yearly		Scrutiny of annual progress report to cttee on R.M.	Endorsement of annual progress report on R.M.	Summary of past years work on R.M.

Appendix 3

Risk Management Responsibilities – CIPFA / SOLACE Guidance

	Framework, Strategy and Process	Identifying risk	Analysing Risk	Profiling risk	Prioritising action based on risk appetite	Determining action on risk	Controlling risk	Monitoring & Reporting	Reporting to external stakeholders.
Members	Agreeing the Framework, Strategy and Process Determined by Officers	Identifying risk	Analysing Risk	Profiling Risk	Determining the risk appetite and prioritising risk. Agreeing the priorities determined by officers			Reviewing the effectiveness of the risk management process.	Reporting to external stakeholders on the framework, strategy, process and effectiveness .
Risk Management Team	Providing advice And support to the executive Management Team and Members	Providing advice and support.	Providing Advice and support	Providing advice and support	Providing advice and support			Co-ordinating the results for reporting to the corporate management team and members	
Senior Management Team	Determining the framework, Strategy and Process	Identifying strategic and cross-cutting issues	Analysing Strategic and cross-cutting issues.	Profiling strategic and cross-cutting issues.	Determining the risk appetite and prioritising strategic and cross-cutting issues	Determining action on strategic and cross-cutting issues. Delegating responsibility for control.		Monitoring progress on managing strategic and cross-cutting risks and reviewing the implementation of the risk management framework, strategy and process. Reporting to members.	Reporting to external stakeholders on the framework, strategy, process and effectiveness.
Assistant Chief Executive	Providing Advice and Support	Providing advice and support	Providing advice and support	Providing advice and support	Providing advice and support	Providing advice and support	Providing advice and support	Co-ordinating the results for reporting to the executive management team and members	Preparing draft reports for the corporate management team and members to issue.
Service Managers / G.M.T's		Identifying service Risks	Analysing Service risks.	Profiling service risks.	Prioritising action on service risks.	Determining action on service risks. Delegating responsibility for control.		Monitoring progress on managing service risks. Reporting to the group management team	
Employees, contractors And partners		Maintaining awareness of risks and feeding these into the formal process.	Maintaining awareness impact of risks and feeding information into the processes				Controlling risk in their jobs.	Monitoring progress on Managing job related risks Reporting to the service manager.	

	Governance & Audit Committee		**Item**
			9
	11 October 2016		

Report of	**Assistant Chief Executive**	**Author**	**Hayley McGrath**
			☎ **01206 508902**
Title	**Health & Safety Policy 2016/17 & Annual Review**		
Wards affected	Not Applicable		

This report requests the Committee to review the Health & Safety policy for 2016/17 and work undertaken for the period 01 September 2015 to 31 August 2016.

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1. Decision(s) Required

1.1 The Committee is requested to:

1.2 Review and endorse the revised Health & Safety policy for 2016/17.

1.3 Consider and comment on the work undertaken during 2015/16

2. Reasons for decision

2.1 Whilst the Health & Safety policy does not form part of the formal policy framework, it is an integral part of the risk management process. As such it is appropriate to provide an annual report to the Governance and Audit Committee, to assist with the Committee's responsibility for reviewing the effectiveness of risk management.

3. Supporting Information

3.1 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.

3.2 Overall responsibility for Health & Safety rests with Cabinet but is primarily managed by the Executive Director – Customer Operations and Partnerships, along with the Corporate Health & Safety Officer and Designated Officers within services, who form the Health & Safety Committee.

4. Policy for 2016/17

4.1 The Health & Safety policy sets out the Council's commitment to managing health and safety risks and the individual responsibilities, at all levels of the organisation.

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

4.3 Both of these documents have been attached at appendices 1 and 2 respectively.

5.0   Summary of 2015/16

5.1   The internal Health and Safety incident reporting process has been reviewed and updated. This is now a more intuitive on-line form that records near misses as well as incidents. It has been rolled out to all staff and has been well received. Regular summary reports from the system are provided to senior management.

5.2   Quarterly audits of services and arrangements have been established by the Corporate Health & Safety Officer for 2016. These have been completed for Bereavement Services, and are programmed for Lone Working Arrangements, Waste & Recycling Service and Corporate Building Management.

5.3   A review of the Violence and Aggression policy has been carried out with Parking Services. This has identified a clear process for managing violent or aggressive incidents including post incident support for officers.

5.4   A Health & Safety Training Matrix has been produced and agreed by senior management team. This sets out the requirements for training at all level of the organisation.

5.5   The Designated Officers have all achieved the IOSH Managing Safely qualification and further training is taking place in November for new Designated Officers and other nominated employees.

5.6   Emergency First Aid at Work training is taking place in September for new first aiders required across the Council and as a refresher for current first aiders.

5.7   Conflict Management training is taking place in September for Leisure World duty managers as part of improvements for managing violent and aggressive behaviour by customers.

5.8   The Construction (Design and Maintenance) Regulations 2015 changes placed more responsibilities on clients. Therefore a 'client duties checklist' has been produced to assist employees managing construction projects

6.   Proposals

6.1   To review and endorse the revised Health & Safety policy for 2016/17 and consider and comment on the work undertaken during 2015/16.

7.   Strategic Plan Implications

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.   Equality, Diversity and Human Rights Implications

8.1   Whilst there are no direct equality, diversity or Human Rights implications from this report, the Health & Safety process recognises the requirements of the legislation and controls have been implemented, including the completion of Equality Impact Assessments, to mitigate any impact.

9.   Risk Management 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 effect services.

10.   Other Standard References

10.1   There are no direct Publicity, Financial, Consultation, Community Safety or Health and Safety implications as a result of this report.

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.

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.

All procedures are audited on an annual basis by the Health and Safety Officer. In addition, they also carry out a quarterly audit of all council premises. An action plan is then produced and handed to the Manager for that building/area. Reports on all audits are presented at the health and safety committee.

1.2 Review

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

- Changes in legislation

- Changes to work processes

- On the introduction of new equipment

- Where there are changes to personnel

- After an incident

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

3 Employee Consultation

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

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

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 on The Hub.

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 available within the Human Resources section on The Hub. Additional information is provided in the Disciplinary Rules and Procedures.

4.3 Smoking
The company prohibits smoking in all workplaces including company vehicles and client premises. More information for employees is contained within the Smoking Policy within the Human Resources section on The Hub. Local arrangements are explained during 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 which is published on The Hub and all employees are encouraged to report any concerns of stress.

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

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

4.5 Violence, Discrimination and Harassment

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

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 violet incident occurs we ask employees to complete our electronic incident report form so that we can monitor and investigate such incidents accordingly. Once investigated, the manager will then ensure that a suitable resolution is implemented in order to support the member of staff concerned.

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

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 members of staff who work remotely or are mobile, we operate a worker protection scheme, CRISYS.

There is detailed information on how the CRISYS system works and employees are encouraged to use this when working alone. There is also guidance for Managers on how to ensure that staff within their area are safe.

In addition, the Council also has a standard which details the process for working safely when alone. A generic Lone Working risk assessment has also been carried out. This is available on The Hub for Managers to use and make specific for their team.

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.

It is the Manager's responsibility to ensure that PPE is issued to all staff members who require it. They must also ensure that the person knows how to use and store this correctly as well as the procedure for reporting defects.

When defects are reported, the Manager needs to ensure that PPE is repaired or replaced before the employee needs 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.

5 Risk Control

5.1 Risk Assessment

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

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

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

$$\text{Eliminate} \longrightarrow \text{Reduce} \longrightarrow \text{Isolate} \longrightarrow \text{Control} \longrightarrow \text{PPE} \longrightarrow \text{Discipline}$$

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

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

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

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

5.2 Hot Work Permits

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

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

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

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 Co-ordinator.

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 The Hub as a guide for Managers needing to complete these for the tasks that workers carry out.

6 Induction and Training

6.1 Inductions
All new employees are given a company induction which includes the following:

- Health and safety information;

- Emergencies and fire arrangements;

- Welfare facilities and first aid;

- Accidents and hazard reporting;

- Risk assessments and training;

- Work prohibitions; and

- Personal protective equipment.

6.2 Training
Training for Health and Safety Co-ordinators is provided by the Health and Safety Officer.

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

6.3 Supervision
All new employees are supervised when they first join the Council. Ongoing supervision is then carried out by Managers and Supervisors as appropriate.

7 Accident and Incident Reporting and Investigation

As required under the Reporting of Incidents and Diseases and Dangerous Occurrences Regulations 2013 (as amended), once an accident has been reported we will:

- Provide first aid if qualified to do so

- Call the emergency services if required

- Ensure that the area is undisturbed to allow an investigation to be carried out

We operate an online reporting system which employees are encouraged to complete as soon as possible after the event and no more than 5 days after its occurrence.

If the injury is serious or fatal, then the HSE will be notified by telephone on: 0845 300 9923.

If the accident results in an over 7 day incapacitation (not including the day of the accident), the Health and Safety Officer will report this to the HSE using the correct form at www.hse.gov.uk/riddor

If the accident results in 3 days absent from work, we will keep a record of this, but are not obliged to report this to the HSE.

The Health and Safety Officer will monitor reported incidents to identify trends and report matters to SMT on a regular basis. Where relevant, we will implement an action plan to make necessary changes to prevent recurrence, review the risk assessments and control measures as appropriate.

We actively encourage all staff to report all near misses in the workplace as this will allow us to investigate and see where improvements can be made before future accidents occur.

8 Emergency Arrangements

8.1 Fire Procedures

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

A fire risk assessment has been carried out for all Council- owned premises. These are held at each site within the Fire Log Book. We carry out a review of these whenever any significant changes are made to building layouts or processes carried out in them. If neither occurs, they will be reviewed annually.

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

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

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

8.2 First Aid

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

The Health and Safety Co-ordinators for each site are responsible for monitoring and re-stocking first aid supplies. Employees are encouraged to inform them if stocks need replenishing.

9 Workplace Safety

Colchester Borough Council recognises our duty to ensure that the workplace is safe for our employees and anyone else who may visit our premises or use our services. This includes the equipment that we supply to employees as well as the environment in which they work.

9.1 Electrical Equipment

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

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

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

As required under the Health and Safety (Display Screen Equipment) Regulations 1992, we carry out a risk assessment for users of display screen equipment. A copy of this is published on The Hub along with a standard that explains the process.

When any new member of staff starts work at the Council, they are asked to carry out a DSE/Workstation assessment with their Supervisor/ Manager. If there are any further concerns, they are encouraged to discuss these with the Health and Safety Officer.

We encourage all users to take regular breaks, such as 5 minutes every 30 minutes or a 30 second micro break every 10 minutes.

As the Council operates mobile 'hot desk' working, all employees are encouraged to take a few minutes at the start of each day to ensure that they have set their workstation up correctly.

The ongoing management of DSE and workstations is the responsibility of the employee and their Manager. If necessary the matter will be referred to Occupational Health. In addition, where employees have consulted a medical professional who has confirmed that there is a need for a formal assessment and potentially specially made equipment, this matter will be referred to the Health and Safety Officer.

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.

Generic risk assessments have been carried out for equipment used in the workplace which are published on The Hub as a guide for Managers to make specific to individual needs.

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

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

9.4 Noise and Vibration

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

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

9.5 Work at Height

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

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

9.6 Manual Handling

Employees are encouraged to avoid manual handling wherever possible by using lifting and carrying aids when moving goods. Where manual handling cannot be avoided employees should do this as a two person operation.

A generic manual handling risk assessment has been produced and is published on The Hub for use by Managers to update with the activities of their staff.

9.7 Housekeeping

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

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

10 Company Vehicles

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

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

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

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

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

11 Hazardous Substances

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

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

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

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

COSHH assessments are carried out for all hazardous substances used in the workplace. Assessments of typical hazardous substances are published on The Hub 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.

Health & Safety Policy 2016/17

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Contents

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1. INTRODUCTION

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

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

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

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

2. STATEMENT

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

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

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

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

All employees are required to follow this health and safety policy at all times and adhere to their own statutory requirements. We encourage any comments over health and safety in the workplace and will actively seek to rectify any areas of concern.
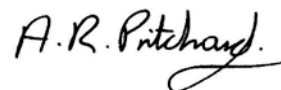
All contractors and others employed by Colchester Borough Council to perform work or provide service are required to maintain health and safety standards in accordance with this policy.

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

Councillor Paul Smith   Adrian Pritchard
Leader of the Council   Chief Executive

04 July 2016

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3. ORGANISATION

3.1 Organisation Structure

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                          │     Cabinet     │
                          └────────┬────────┘
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                          │ Chief Executive │
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Executive Director - Customer Operations & Partnerships	Chief Operating Officer - Delivery & Performance	Strategic Director - Commercial & Place

Head of Customer Services	Head of Professional Services	Head of Operational Services	Head of Community Services	Head of Commercial Services	Assistant Chief Executive and Head of Corporate & Financial Management

Strategic Governance

Corporate Health & Safety

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3.2 Organisation Health and Safety Responsibilities

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                          ┌─────────────────────┐
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                          ┌─────────────────────┐
                          │   Chief Executive   │
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                          │ Executive Directors │
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                          │   Heads of Service  │
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                          │   Group Managers    │
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  │ Corporate Health &│    │   Managers and      │    │  Health and Safety   │
  │  Safety Officer   │    │   Supervisors       │    │ Designated Officers  │
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                          │     Employees       │
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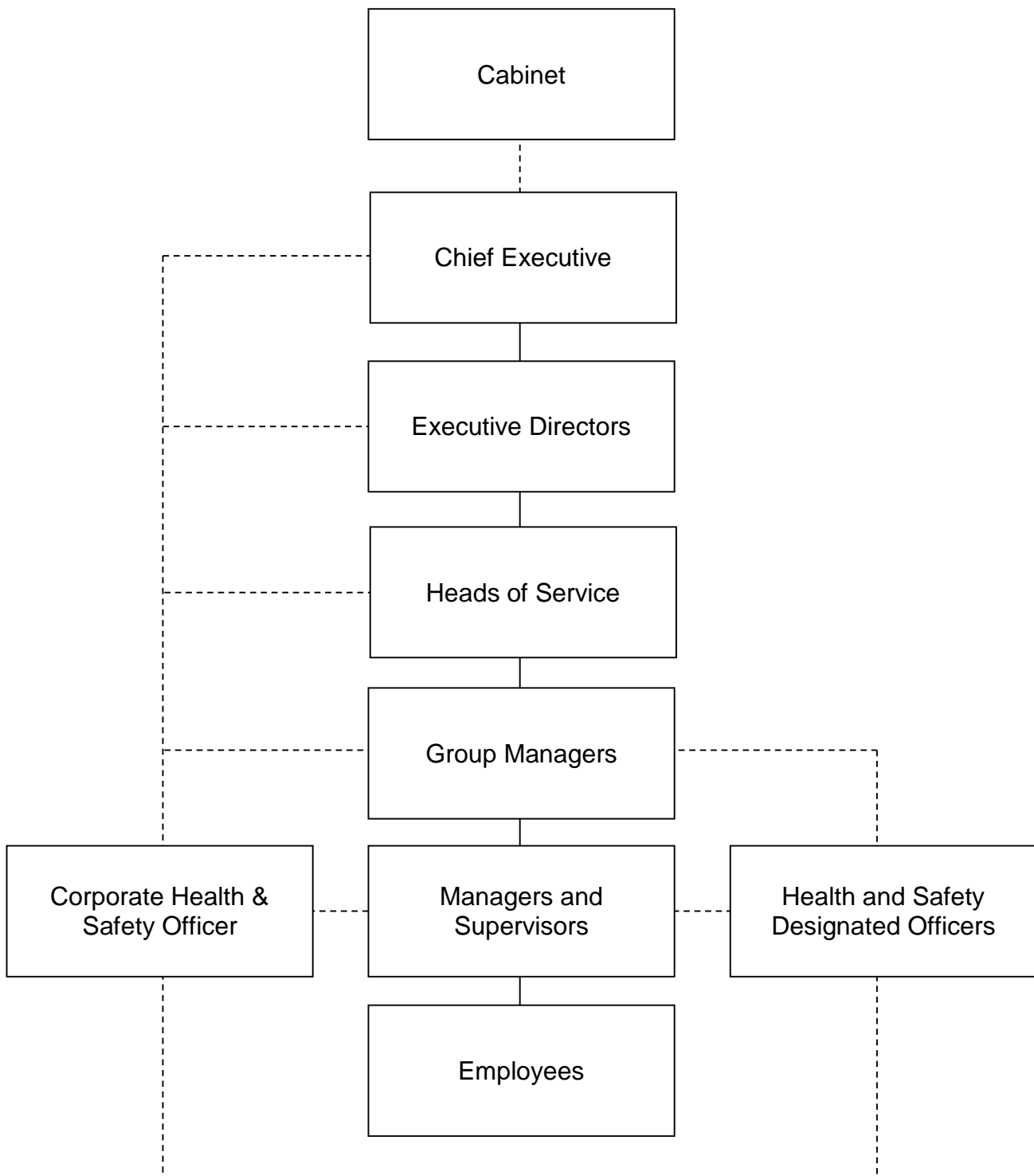
4. RESPONSIBILITIES

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 Councils' undertakings. Cabinet are jointly and severally the primary duty holders for health and safety across the Councils' 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.

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4.1 Chief Executive

1. Overall responsibility for health and safety throughout the Council.

2. Support other duty holders to fulfil their health and safety responsibilities.

3. Preparation of an effective health and safety policy statement, organisation for carrying out that policy, measures for ensuring that it is implemented and communicated to all employees.

4. Ensure that this health and safety policy is reviewed, at least every three years or when circumstances otherwise dictate.

5. Ensure that health and safety is given an appropriately high priority and is not compromised, so putting employees or other persons at risk to their health and safety.

6. Ensure that the Executive Directors are aware of the health and safety policy and understand their responsibilities for effective health and safety management.

7. Ensure that the Executive Directors implement the policy through effective local arrangements and suitable monitoring arrangements.

8. Ensure that adequate financial and other resources are available to meet statutory duties and requirements of this health and safety policy.

9. Ensure that the Council has appointed a competent Corporate Health and Safety Officer for the purpose of advising on meeting its statutory duties and for advising and monitoring on health and safety.

10. Fulfil the responsibilities of the Executive Directors if services are under their direct management.

11. Set a personal example at all times with respect to health and safety.

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4.2 Executive Director (with Responsibility for Health and Safety)

1. Support other duty holders to fulfil their health and safety responsibilities.

2. Accountable to the Chief Executive for health and safety within all Services.

3. Ensure that their Heads of Service 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.

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4.3 Executive 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 Heads of Service 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.

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4.4 Heads of Service

1. Support other duty holders to fulfil their health and safety responsibilities.

2. Accountable to the Chief Executive or Executive Director (as appropriate) for health and safety within their Services.

3. Ensure that their Group Managers are aware of the health and safety policy and understand their responsibilities for effective health and safety management.

4. Support the development, modification and delivery of a health and safety management system and ensure local process compliance.

5. Support and promote health and safety continuous improvement programmes.

6. Monitor and review health and safety processes and performance in their Services, and include appropriate health and safety actions within relevant strategies and business plans.

7. Ensure that there is sufficient financial or other resource for effective health and safety management and identify any short falls in resources that may impact health and safety.

8. Identify health and safety training needs for their Service and ensure this follows the health and safety training matrix and is in line with the Council and legislative requirements.

9. Ensure that their Group Managers have suitable and sufficient risk assessments in place to eliminate or control and reduce risks to acceptable levels including those required under relevant statutory provisions and ensure these are supported by method statements where required.

10. Ensure that for any premises under their direct control and management, adequate arrangements are in place for fire safety management and supported by a suitable and sufficient fire risk assessment completed by a competent person.

11. Ensure there is a process to employ competent contractors with the correct skills, knowledge, attitude, training and experience.

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

13. Support the carrying out of regular health and safety audits and inspections and ensure the outcomes of these are completed within the agreed timescales.

14. Ensure that if any serious health and safety occurrence or failure in health and safety occurs, the relevant person/s are held accountable for any deficiency in fulfilling their responsibilities under the health and safety policy and will be required to demonstrate to the Executive Management Team, remedial actions have been implemented to prevent a similar reoccurrence.

15. Set a personal example at all times with respect to health and safety.

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4.5 Group Managers

1. Support other duty holders to fulfil their health and safety responsibilities.

2. Accountable to the Heads of Service 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 to Group Managers, 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.

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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 arrangements are in place which require that health and safety aspects are specifically included and considered in contracts and that all contractors employed are competent. Monitor and review contractors' health and safety processes and performance.

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4.6 Managers and Supervisors

1. Support other duty holders to fulfil their health and safety responsibilities.

2. Accountable to their Group Manager for health and safety within their Services.

3. Read, understand and implement the requirements of the health and safety policy and health and safety management system.

4. Support and promote health and safety continuous improvement programmes and regularly communicate with employees on health and safety issues.

5. Monitor and review health and safety processes and performance in their areas, teams and premises and ensure regular health and safety audits and inspections are carried out and outcomes of these are completed within the agreed timescales.

6. Ensure that the requirements of risk assessments and method statements are implemented, in place during work and communicated to all employees within their team.

7. Ensure that all employees within their group have appropriate information, instruction and training that follows the health and safety training matrix and is in line with Council and legislative requirements.

8. Not to put any person at an unacceptable risk during the course of work and stop work where any new hazards are identified until the risk has been assessed and controlled and if required reduced to an acceptable level.

9. Ensure that all plant, vehicles and equipment are adequately maintained so it is safe for use and any defective plant, vehicles and equipment is withdraw from use immediately.

10. Ensure that all employees within their team have the correct level of personal protective equipment as identified by risk assessments and that it is maintained or replaced when necessary.

11. Receive, review and remedy any concerns in respect to health and safety. When concerns cannot be resolved at a local level, they shall be referred to the Group Manager and if still unresolved to the Corporate Health and Safety Officer.

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4.7 Corporate Health and Safety Officer

1. Support other duty holders to fulfil their health and safety responsibilities.

2. Review, develop and communicate the health and safety policy and management system in conjunction with other responsible duty holders.

3. Provide competent advice in relation to all health and safety matters and ensure duty holders are kept up-to-date on all relevant health and safety issues.

4. Ensure own competence is maintained through continual professional development.

5. Identify key health and safety training needs and advise on methods of implementation and delivery.

6. Provide a pro-active resource for the development and delivery of health and safety inspections and audits on an agreed programme basis.

7. Provide a reactive resource for the reporting, recording and investigating of accidents and incidents and provide statistical information to the health and safety committee.

8. Provide corporate safety initiatives and ensure there is a continual improvement programme for effective health and safety management and advise on the implementation of programmes.

9. Attend health and safety committee meetings and other relevant health and safety groups and provide guidance and advice where required.

10. Review the performance of health and safety within the Council as a whole, in conjunction with the Executive Management Team.

11. Provide a report to the Executive Management Team on a regular basis which details health and safety performance and update the Executive Director with health and safety responsibilities on all significant health and safety matters.

12. Ensure there is a continual improvement programme for effective health and safety management.

13. Provide a useful and relevant information service, with documents to assist others with their duties and ensure information is updated on a regular basis.

14. Communicate with and provide support, direction and guidance to Health and Safety Designated Officers and ensure they provide support on health and safety matters to duty holders within their area of remit in accordance with their responsibilities.

15. Support duty holders with enforcement agency requests for information, visits and inspections and if required, be the primary point of communication with relevant enforcement agencies.

16. Set a personal example at all times with respect to health and safety.

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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 are there to support and assist Managers with meeting their obligations.

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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.

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5. DOCUMENT INFORMATION

Title :	Health and Safety Policy
Status :	Final
Version :	5 - August 2016
Consultation :	SMT, Health and Safety Committee, Unison
Approved By :	SMT
Approval Date :	
EQIA :	Yes - web link is shown here
Review Frequency :	Every three years or if change occurs
Next Review :	August 2019

5.1 Document Control

Date	Version	Description	Sections Affected	Approved by
September 2015	1	Initial draft	All	
April 2016	2	Updated draft. Moved arrangements to separate document.	All except 1 & 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 & Executive Director

	Governance and Audit Committee	**Item**
		11

11 October 2016

Report of	**Monitoring Officer**	**Author**	**Andrew Weavers** ☎ 282213
Title	**Review of the Council's Ethical Governance Policies**		
Wards affected	Not applicable		

> **This report requests the Committee to review the Council's updated Ethical Governance policies**

1. Decision(s) Required

1.1 To review the following revised policies:

- Anti-Fraud and Corruption
- Whistleblowing
- Anti-Money Laundering
- Covert Surveillance
- Corporate Information Security
- Data Protection

and to recommend to Council that they be approved for inclusion in the Council's Policy Framework.

2. Background

2.1 The Council is committed to maintaining the highest standards of governance including the elimination of fraud and corruption and to ensuring that all activities are conducted ethically, honestly, openly and accountably so as to protect public safety and public money.

2.2 A varied range of policies and procedures form the Corporate Governance framework and a selection of these relate to Ethical Governance - those specifically regarding conduct and integrity.

2.3 The Ethical Governance policies set out the standards of conduct and integrity that it expects from staff, elected members, suppliers, partners, volunteers and the public. Breaches of the policies will be pursued and procedures have been introduced to enable any person to raise genuine concerns they may have about the conduct of anybody acting for or on behalf of the Council.

2.4 At its meeting on 21 October 2015 full Council adopted a statement of intent in relation to both Ethical and Corporate Governance which gave a high organisational commitment to zero tolerance of fraud, corruption and bribery. The Ethical Governance policies were also adopted as part of the Council's policy framework.

3.   Review of Ethical Governance Policies

3.1   The Anti-Fraud and Corruption, Whistleblowing, Anti-Money Laundering, Covert Surveillance, Corporate Information Security and Data Protection policies were last reviewed by this Committee at its meeting on 13 October 2015.

3.2   These policies have been reviewed to ensure that they remain fit for purpose and no changes are proposed to the policies.

3.3   The Covert Surveillance Policy has been updated with links to revised national guidance on its use. The Council has not sought any authorisations for the use of covert surveillance in the past year.

3.4   The Monitoring Officer writes an annually to both Members and Officers reminding them of their obligations regarding the Anti-Fraud and Corruption and Whisteblowing policies.

4.   Strategic Plan References

4.1   The manner in which the Council governs its business is an underpinning mechanism in the Council's Strategic Plan aims to set out the direction and future potential for our Borough.

5.   Publicity Considerations

5.1   Amendments to the Council's ethical governance polices will be included in the Constitution and will be published on the Council's website.

6.   Financial, Equality, Diversity and Human Rights, Consultation, Community Safety, Health and Safety and Risk Management Implications

6.1   None.

The Ethical Governance policies can be found by clicking here or by following the pathway www.colchester.gov.uk /Your Council/ Committees, Agendas and Minutes/Committees /Council/ 02 November 2016

	Governance Committee	**Item**
		14

11 October 2016

Report of	**Monitoring Officer**	**Author**	**Andrew Weavers**
			☎ 282213
Title	**Review of Local Code of Corporate Governance**		
Wards affected	Not applicable		

> **This report requests the Committee to review the updated Local Code of Corporate Governance**

1. Decision(s) Required

1.1 To review the updated Local Code of Corporate Governance for 2016/17 and to recommend to Council that it be approved for inclusion in the Council's policy framework.

2. Background

2.1 In 2007 CIPFA (The Chartered Institute of Public Finance and Accountancy) and SOLACE (The Society of Local Authority Chief Executives) issued "Delivering Good Governance in Local Authorities", a guide to ensuring that local authorities are appropriately governed. This was updated in December 2012.

2.2 Governance is defined as the systems and processes, and cultures and values, by which an organisation is directed and controlled and through which it accounts to, engages with and, where appropriate, leads their communities. It is about how Colchester Borough Council ensures that it is doing the right things, in the right way, for the right people, in a timely, inclusive, open and accountable manner

2.3 The Council strives to meet the highest standards of corporate governance to help ensure it meets its objectives. Members and Officers are responsible for putting in place proper arrangements for the governance of the Council's affairs and the stewardship of the resources at its disposal.

2.4 Therefore a Local Code of Corporate Governance has been developed to ensure that the Council complies with the principles set out in the CIPFA/SOLACE guidance. The Local Code is reviewed annually, to ensure that the Council is still satisfying the principles, and forms part of the Council's Policy Framework.

2.5 The guidance identifies six Core Principles against which local authorities should review their existing corporate governance arrangements and develop and maintain a local code of governance. The principles are;

- Focusing on the purpose of the Council and outcomes for the community and creating and implementing a vision for the local area;
- Members and officers working together to achieve a common purpose with clearly defined functions and roles;
- Promoting values for the authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour;

- Taking informed and transparent decisions which are subject to effective scrutiny and managing risk;
- Developing the capacity and capability of members and officers to be effective; and
- Engaging with local people and other stakeholders to ensure robust public accountability.

2.6 The six core principles each have a number of supporting principles, which in turn have a range of specific requirements that apply across the range of Council business.

2.7 The Local Code, and the Councils compliance with the principles, have been reviewed, and attached at Appendix 1 is the updated Local Code of Corporate Governance for 2016/17. This sets out the six principles and elaborates on how the Council is meeting them, what source documents or processes evidence this and in addition highlights any further or ongoing work. This in turn links into the Council's Annual Governance Statement.

2.8 There have been no significant changes to the code following the review, and it is considered still fit for purpose.

3.   Strategic Plan References

3.1 The manner in which the Council governs its business is an underpinning mechanism in the Council's Strategic Plan aims to set out the direction and future potential for our Borough.

4.   Publicity Considerations

4.1 The Local Code of Corporate Governance will be included in the Constitution and will be published on the Council's website.

5.   Financial, Equality, Diversity and Human Rights, Consultation, Community Safety, Health and Safety and Risk Management Implications

5.1 None.

Code of Corporate Governance 2016/17

A guide to the Council's compliance with the six principles of Corporate Governance. Draft for Committee approval

October 2016

Contents   Page

THE PRINCIPLES OF CORPORATE GOVERNANCE

Core Principle 1   *Focusing on the purpose of the Council and outcomes for the community and creating and implementing a vision for the local area.*

Core Principle 2   *Members and officers working together to achieve a common purpose with clearly defined functions and roles.*

Core Principle 3   *Promoting values for the authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour.*

Core Principle 4   *Taking informed and transparent decisions which are subject to effective scrutiny and managing risk.*

Core Principle 5   *Developing the capacity and capability of members and officers to be effective.*

Core Principle 6   *Engaging with local people and other stakeholders to ensure robust public accountability.*

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CODE OF CORPORATE GOVERNANCE

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INTRODUCTION

"Governance is about how local government bodies ensure that they are doing the right things, in the right way for everyone, in a timely, inclusive, open, honest and accountable manner.

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

Delivering Good Governance in Local Authorities (CIPFA/SOLACE 2007)

The CIPFA/SOLACE guidance "Delivering Good Governance in Local Authorities" identified six Core Principles against which local authorities should review their existing corporate governance arrangements and develop and maintain a local code of governance. These principles are:

1. *Focusing on the purpose of the Council and outcomes for the community and creating and implementing a vision for the local area*
2. *Members and officers working together to achieve a common purpose with clearly defined functions and roles*
3. *Promoting values for the authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour*
4. *Taking informed and transparent decisions which are subject to effective scrutiny and managing risk*
5. *Developing the capacity and capability of members and officers to be effective*
6. *Engaging with local people and other stakeholders to ensure robust public accountability.*

This Code of Governance has been prepared in accordance with the Guidance and will be reviewed by the Governance Committee on an annual basis.

Additionally authorities are required to prepare and publish an Annual Governance Statement in accordance with this framework under Regulation 4(2) of the Accounts and Audit (Amendment) (England) Regulations 2011. The Annual Governance Statement is a key corporate document. The Chief Executive and the Leader of the Council have joint responsibility as signatories for its accuracy and completeness.

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PRINCIPLE ONE

Core Principle 1 – Focusing on the purpose of the Council and outcomes for the community and creating and implementing a vision for the local area

Our aims in relation to focusing on the purpose of the Council and outcomes for the community and creating and implementing a vision for the local area are to:

1.1   Exercise strategic leadership by developing and clearly communicating the authority's purpose, vision and its intended outcome for citizens and service users
1.2   Ensure users receive a high quality service whether directly, or in partnership, or by commissioning
1.3   Ensure that the authority makes best use of resources and that tax payers and service users receive excellent value for money

In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
1.1.1 Develop and promote the Council's purpose and vision	Strategic Plan 2015-18 Service Plans Communications Strategy Council website – www.colchester.gov.uk Local Research and Statistics data on website The Constitution and its committees, panels and Trading Board Peer Challenge action plan Core values of 'customer, business and culture' with identified attitudes and behaviours Strategic Plan Action Plan	Customer Demand and Research project work
1.1.2 Review on a regular basis the Council's vision for the local area and its impact on the authority's governance arrangements	Strategic Plan 2015-18 Medium Term Financial Strategy and Capital Programme Local Code of Corporate Governance Annual Governance Statement and Assurance Framework Risk Register	Local Code of Corporate Governance updated as required by CIPFA Guidance Updated Strategic Plan Action Plan

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
1.1.3 Ensure that partnerships are underpinned by a common vision of their work that is understood and agreed by all parties	Strategic Plan 2015-18 Partnership Strategy Partnership Register Partners were key contributors in the Peer Challenge.	Community Hub at Colchester library brings a range of partners together to provide customer-facing services. Also the Essex County Council Relationship Manager role.
1.1.4 Publish an annual report on a timely basis to communicate the authority's activities and achievements, its financial position and performance	Strategic Plan actions and monitoring of delivery Statement of Accounts Council's website www.colchester.gov.uk "Council Awards and Accreditations" and " Performance and Improvement" – sections on the Council's website Performance Management Board Communications Strategy	A webpage has been set up to bring all annual reports into one central place on the Council's website for improved transparency
1.2.1 Decide how the quality of service for users is to be measured and make sure that the information needed to review service quality effectively and regularly is available	Performance reporting to Senior Management , Scrutiny Panel and the Cabinet Consultation – "Consultations, Research and Statistics" section on website Mosaic and Touchstone customer research tools Annual Monitoring Report External Audit annual audit letter and recommendations	'Customers and Partnerships' strand of Senior Management Team meetings – this meeting aims to ensure we are focused on our customers and looking for partnership opportunities

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In order to achieve our aims we have/will:	Source documents/processes	Further work ongoing
1.2.2 Put in place effective arrangements to identify and deal with failure in service delivery	Performance reporting and performance indicators Complaints Procedure Internal Audit Process and annual work programme Chief Operating Officer Performance Management Board External Auditor's annual audit letter and recommendations The Constitution and its committees, panels and Trading Board Risk Management Strategy Ethical Governance Policies Annual Governance Statement Action Plan	Performance Management Board addresses and manages performance and financial issues and meets monthly. Preparation for Budget Group is also managed here.
1.3.1 Decide how value for money is to be measured and make sure that the authority or partnership has the information needed to review value for money and performance effectively. Measure the environmental impact of policies, plans and decisions.	Performance Reporting Performance Management Board Environmental Sustainability Strategy and Action Plan External Auditor's annual audit letter and recommendations Statement of Accounts Report templates – financial considerations Monitoring of commercial performance by the Trading Board Sustainability assessments for Local Development Framework	Building a sustainable commercial services arm for the Council Establishment of Revolving Investment Fund Committee

PRINCIPLE TWO

Core Principle 2 – Members and Officers working together to achieve a common purpose with clearly defined functions and roles

Our aims in relation to Members and Officers working together to achieve a common purpose with clearly defined functions and roles are to:

2.1   Ensure effective leadership throughout the authority and being clear about executive and non-executive functions and of the roles and responsibilities of the scrutiny function

2.2   Ensure that a constructive working relationship exists between authority members and officers and the responsibilities of members and officers are carried out to a high standard

2.3   Ensure relationships between the authority, its partners and the public are clear so that each knows what to expect of the other

In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
2.1.1 Set out a clear statement of the respective roles and responsibilities of the executive and of the executive's members individually and the authority's approach towards putting this into practice	Constitution (Cabinet terms of reference) Record of decisions and supporting materials Member/Officer Protocol Member Training and Development Senior officer training Member role profiles Committee and Councillor area on the Council website	The Constitution will continue to be reviewed on a rolling basis.
2.1.2 Set out a clear statement of the respective roles and responsibilities of other authority members, members generally and of senior officers	Constitution (Statutory Officer positions, Terms of Reference for Committees, Member roles) Protocols on planning, the representational role of Members, Chairmen, Officer/Members Schemes of Delegation Conditions of Employment Member role profiles Website and its Datashare section	.

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
2.2.2 Make the chief executive or equivalent responsible and accountable to the authority for all aspects of operational management	Development of the Committee and Councillor area on the Council website provides more complete and easily accessible information about Councillors and the Council's decision making processes. Chief Executive designated Head of Paid Service Constitution (Head of Paid Service responsibilities) Conditions of Employment Schemes of Delegation Job Accountability Statement /Person Specification Signature on Annual Governance Statement	The Constitution will continue to be reviewed on a rolling basis. Support for this from Chief Operating Officer
2.2.3 Develop protocols to ensure that the leader and chief executive (or equivalent) negotiate their respective roles early in the relationship and that a shared understanding of roles and objectives is maintained	Constitution Member/Officer Protocol Regular 1:2:1's	The Constitution will continue to be reviewed on a rolling basis. Effective transfer of responsibilities to new Leader of the Council.
2.2.4 Make a senior officer (usually the section 151 officer) responsible to the authority for ensuring that appropriate advice is given on all financial matters, for keeping proper financial records and accounts, and for maintaining an effective system of internal financial control	Strategic Finance Manager is the Council's Chief Financial Officer (S151 Officer). Constitution Job Accountability Statement / Person Specification S151 Officer Protocol Report template includes financial implications before report considered by Members Officer Pay Policy agreed by Full Council	

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
2.2.5 Make a senior officer (other than the responsible financial officer) responsible to the authority for ensuring that agreed procedures are followed and that all applicable statutes, regulations are complied with (usually the Monitoring Officer)	Strategic Governance Manager is the Council's Monitoring Officer Monitoring Officer Protocol Report template requires that Legal Services are consulted before a report is considered by Members	
2.3.1 Develop protocols to ensure effective communication between members and officers in their respective roles	Member / Officer Protocol Planning Procedures Code of Practice Outside Bodies advice given to Members Member and Officer Codes of Conduct	Portfolio Holder briefings
2.3.2 Set out the terms and conditions for remuneration of members and officers and an effective structure for managing the process including an effective remuneration panel (if applicable)	Pay and conditions policies and practices Independent Remuneration Panel Terms of Reference and Reports Regular liaison meeting with Unison Officer Pay Policy agreed by Full Council	
2.3.3 Ensure that effective mechanisms exist to monitor service delivery	Performance reporting and performance indicators Complaints Procedure Heads of Service monitoring Service Plans Performance Management Board Performance management system Scrutiny Panel Trading Board Annual Governance Statements for the Council, Colchester and Ipswich Museums Service and North Essex Parking Partnership	Customers and Partnerships' strand of Senior Management Team meetings Customer insight work Datashare brings key performance and related data into one place on the website

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
2.3.4 Ensure that the organisation's vision, strategic plans, priorities and targets are developed through robust mechanisms, and in consultation with the local community and other key stakeholders, and that they are clearly articulated and disseminated	Strategic Plan underpinned by a review of all existing consultation work. Medium Term Financial Strategy Performance reporting and indicators Council Website Communications Strategy E-Courier and e-newsletters Trading Board Customer insight groups Fundamental Service Reviews	Strategic Plan for 2015 onwards. The development of this plan included focus groups with a representative sample of the local community, facilitated by an independent research company Establishment of Revolving Investment Fund Committee
2.3.5 When working in partnership ensure that members are clear about their roles and responsibilities both individually and collectively in relation to the partnership and to the authority	Constitution Individual Partnership Agreements Service Level Agreements Advice given to Members in relation to outside bodies Partnership Strategy Partnership Register	Community Hub at Colchester library brings a range of partners together to provide customer-facing services. Also the Essex County Council Relationship Manager role. Scrutiny Panel work programme includes review of partnership arrangements, with presentations from partners at Scrutiny
2.3.6 When working in partnership: • ensure that there is clarity about the legal status of the partnership • ensure that representatives or organisations both understand and make clear to all other partners the extent of their authority to bind their organisation to partner decisions.	Constitution Individual Partnership Agreements Service Level Agreements Advice given to Members in relation to outside bodies Partnership Strategy Partnership Register	Customers and Partnerships' strand of Senior Management Team meetings

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PRINCIPLE THREE

Core Principle 3 – Promoting values for the authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour

Our aims in relation to promoting values for the authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour are to:

3.1   Ensuring authority members and officers exercise leadership by behaving in ways that exemplify high standards of conduct and effective governance

3.2   Ensuring that organisational values are put into practice and are effective

In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
3.1.1 Ensure that the authority's leadership sets a tone for the organisation by creating a climate of openness, support and respect	Constitution Chief Executive's and Leader's blog on the Council's intranet Performance reporting Governance Committee has an overall view of conduct issues established by its terms of reference Member and Officer Codes of Conduct Member/Officer Protocol Whistleblowing Policy Anti-Fraud and Corruption Policy Freedom of Information Policy statement and publication scheme Monitoring Officer and S151 Officer Protocols Localism Act Member conduct regime Annual review of Ethical Governance policies Peer Challenge	Staff survey and taking action on its findings Leadership Development Programme led by Executive Management Team Social media Datashare on the Council's website and on www.data.gov.uk supports the importance of openness and transparency Employee Assistance Programme introduced Leader's Listening Sessions introduced

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
3.1.1 continued	Planning Procedures Code of Practice Officer Register of Gifts and Hospitality Officer voluntary register of interests Members' Register of Interests Website and intranet Corporate Roadshows by Chief Executive for staff Portfolio Holder monthly sessions with senior officers "Corporate Governance" section on the Council's website bringing all relevant information together under one heading	
3.1.2 Ensure that standards of conduct and personal behaviour expected of members and staff, of work between members and staff and between the authority, its partners and the community are defined and communicated through codes of conduct and protocols	Member and Officer Codes of Conduct Performance management system Complaints procedures Anti-fraud and Corruption Policy Member/Officer Protocols Induction for new Members and staff Member Development Programme Member Personal Development Plans Officer training on Member/ officer relationship Whistleblowing Policy Information and Communication Technology (ICT) Security Policy Safeguarding Policy Hub (intranet) Annual review of Ethical Governance policies	Review of all HR Policies is underway Embedding the Council's core values of 'customer, business and culture' with identified attitudes and behaviours. The revised Job Accountability Statement/Person Specification template highlights the core values to applicants, and the revised staff appraisal scheme now makes how you conduct yourself against the values, attitudes and behaviours to be equally important to achieving the SMART objectives that apply to the role

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
3.1.3 Put in place arrangements to ensure that members and employees of the authority are not influenced by prejudice, bias or conflicts of interest in dealing with different stakeholders and put in place appropriate processes to ensure that they continue to operate in practice	Member and Officer Codes of Conduct Equality and Diversity training for Members and Officers Financial Procedure Rules, Contract Procedure Rules Ethical Governance policies Registers of Interests (Officers and Members) Services and processes are underpinned by Equality Impact Assessments Equality Objectives Officer induction and training Annual review of Ethical Governance Policies	
3.2.1 Develop and maintain shared values including leadership values both for the organisation and staff reflecting public expectations and communicate these with members, staff, the community and partners	Member and Officer Codes of Conduct Strategic Plan, objectives and priorities in place and shared Performance reporting Strategic Plan Action Plan – progress is reported to scrutiny on a half yearly basis	People Strategy actions Implementation of Fundamental Service Review of Customer Contact.
3.2.2 Put in place arrangements to ensure that procedures and operations are designed in conformity with appropriate ethical standards, and monitor their continuing effectiveness in practice	Contract Procedure Rules Ethical Governance Policies Member and Officer Codes of Conduct Monitoring of the above takes place by the Governance Committee ICT Security Policy Annual reporting to Governance Committee	

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
3.2.3 Develop and maintain an effective Standards Committee	Member conduct issues (standards) within remit of Governance Committee Agenda and Minutes Terms of Reference Regular meetings Work programme	Annual review of the Localism Act arrangements by the Governance Committee.
3.2.4 Use the organisation's shared values to act as a guide for decision making and as a basis for developing positive and trusting relationships within the authority	Member and Officer Codes of Conduct Strategic Plan, objectives and priorities in place and being shared Performance Appraisals Portfolio Holder briefing with Senior Managers Policy Framework	Embedding the core values with their underpinning attitudes and behaviours
3.2.5 In pursuing the vision of a partnership, agree a set of values against which decision making and actions can be judged. Such values must be demonstrated by partners' behaviour both individually and collectively	Values agreed with each partner Partnership Register Partnership Strategy	Annual report to Cabinet on Members' appointments to outside bodies, including feedback on outcomes, issues and engagement Scrutiny Panel work programme includes review of partnership arrangements, with presentations from partners at Scrutiny

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PRINCIPLE FOUR

Core Principle 4 – Taking informed and transparent decisions which are subject to effective scrutiny and managing risk

Our aims in taking informed and transparent decisions which are subject to effective scrutiny and managing risk are to:

4.1   Being rigorous and transparent about how decisions are taken and listening and acting on the outcomes of constructive scrutiny
4.2   Having good quality information, advice and support to ensure that services are delivered effectively and are what the community wants/needs
4.3   Ensuring that an effective risk management system is in place
4.4   Using their legal powers to the full benefit of the citizens and communities in their areas

In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
4.1.1. Develop and maintain an effective scrutiny function which encourages constructive challenge and enhances the organisation's performance overall and of any organisation for which it is responsible	Scrutiny is supported by robust evidence and data analysis Agenda and Minutes Scrutiny Panel Work programme Successful outcome of reviews Ownership of work programme Training for scrutiny chairman Scrutiny of partners and joint projects	Scrutiny Panel work programme includes review of partnership arrangements, with presentations from partners at Scrutiny Taking issues and developments to the Trading Board as appropriate Joint Scrutiny Chairman's meeting
4.1.2 Develop and maintain open and effective mechanisms for documenting evidence for decisions and recording the criteria, rationale and considerations on which decisions are based	The Constitution and its committees, panels and Trading Board Decision making protocols Record of decisions and supporting materials Report template Decision list published (members) Recordings of meetings on the website Website ,	

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
4.1.3 Put in place arrangements to safeguard members and employees against conflicts of interest and put in place appropriate processes to ensure that they continue to operate in practice	Member and Officer Codes of Conduct Member and Officer Registers of Interests Declaration of Interests at meetings Code of Conduct guidance and training provided to Members and Officers Planning procedures Code of Practice Governance Committee have responsibility for these issues Monitoring Officer reports on these issues Politically restricted posts Ethical Governance Policies, and annual review	
4.1.4 Develop and maintain an effective Audit Committee (or equivalent) which is independent or make other appropriate arrangements for the discharge of the functions of such a committee	Audit issues within remit of Governance Committee Member Development Programme Agenda and Minutes The Constitution	Continue to review Member training programme with specific reference to audit and governance
4.1.5 Put in place effective transparent and accessible arrangements for dealing with complaints	Complaints procedure "Help us get it right" on website with full details Annual letter from Local Government Ombudsman Customer insight work	
4.2.1 Ensure that those making decisions whether for the authority or partnership are provided with information that is fit for the purpose – relevant, timely and gives clear explanations of technical issues and their implications	Council's Website Report templates dealing with key aspects Report by Head of Service with necessary technical expertise included Training and professional development Equality Impact Assessments Clear and well understood decision making processes with published timelines.	Datashare Projects carried out by the Council's Customer Demand and Research Team Customer insight work

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
4.2.2 Ensure that professional advice on matters that have legal or financial implications is available and recorded well in advance of decision making and used appropriately	Report template requires that consultation is undertaken with legal and financial functions before report considered by Members Record of decision making and supporting materials S151 and Monitoring Officer Protocols Equality Impact Assessments Clear and well understood decision making processes with published timelines.	Introduction of Account Managers and Business Partners for Corporate and Financial Management services, including legal and financial matters
4.3.1 Ensure that risk management is embedded into the culture of the organisation, with members and managers at all levels recognising that risk management is part of their job	Risk Management Strategy - Policy Framework Corporate Risk Manager Corporate/service planning Cabinet Member with accountability for risk management Half yearly reporting to Governance Committee Performance Management Board quarterly risk review Risk Registers- Strategic, Operational and Project Risk and Control self-assessment completed by all managers Training for Members and Officers Hub area for Risk Management Corporate Governance Team, bringing together the co-ordination of governance processes.	Embedding of risk management processes into projects, with a review of what constitutes a significant project Integrating operational, strategic and project risks into the risk reporting process to senior management

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
4.4.1 Actively recognise the limits of lawful activity placed on them by, for example the ultra vires doctrine but also strive to utilise powers to the full benefit of their communities	Constitution Monitoring Officer Report templates Equality Impact Assessments Equality Objectives	
4.4.2 Recognise the limits of lawful action and observe both the specific requirements of legislation and the general responsibilities placed on local authorities by public law	Availability of professional legal advice Knowledge of current and forthcoming legislation and regulations Monitoring Officer Protocol S151 Officer Protocol Report templates Constitution Equality Impact Assessments Equality Objectives	Introduction of Account Managers and Business Partners for Corporate and Financial Management services, including legal and financial matters
4.4.3 Observe all specific legislative requirements placed upon them, as well as the requirements of general law, and in particular to integrate the key principles of good administrative law – rationality, legality and natural justice into their procedures and decision making processes	Availability of professional legal advice Knowledge of current and forthcoming legislation and regulations Monitoring Officer Protocol S151 Officer Protocol Procedure Rules Report template Constitution Format for quasi-judicial committees "Have Your Say" processes Planning Procedure Code of Practice Equality Impact Assessments Equality Objectives Datashare	Introduction of Account Managers and Business Partners for Corporate and Financial Management services, including legal and financial matters

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PRINCIPLE FIVE

Core Principle 5 – Developing the capacity and capability of Members and Officers to be effective

Our aims in relation to developing the capacity and capability of Members and Officers to be effective are:

5.1   Making sure that Members and Officers have the skills, knowledge, experience and resources they need to perform well in their roles
5.2   Developing the capability of people with governance responsibilities and evaluating their performance as an individual and as a group
5.3   Encouraging new talent for membership of the authority so that best use can be made of individuals' skills and resources in balancing continuity and renewal

In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
5.1.1 Provide induction programmes tailored to individual needs and opportunities for Members and Officers to update their knowledge on a regular basis	Member training and development Member training records on the website Member and Officer Induction programmes Refresher courses Briefings Appraisals for officers People Strategy Personal Development Plans Learning and Development Strategy Charter Status for Elected member development	Member skills development Learning and Development Day in October 2016 for staff – highlighting training and e-learning opportunities Investigating possibilities of e-induction options for new starters when developing refreshed intranet
5.1.2 Ensure that the statutory officers have the skills, resources and support necessary to perform effectively in their roles and that these roles are properly understood throughout the organisation	Appraisals Personal Development Plans Training and development Induction Monitoring Officer and S151 Officer Protocols Employee Policies Learning and Development Strategy/Annual Learning and Development Plan	Talent Management/Career Track for staff Future Leader programme

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
5.2.1 Assess the skills required by Members and Officers and make a commitment to develop those skills to enable roles to be carried out effectively	Appraisals for officers SMART objectives Personal Development Plans for officers Member training and development People Strategy Learning and Development Strategy/Annual Learning and Development Plan Charter Status for Elected Member Development	Member skills development Developing the training records on the Member Information System Talent Management/Career Track for staff
5.2.2 Develop skills on a continuing basis to improve performance including the ability to scrutinise and challenge and to recognise when outside expert advice is needed	Appraisals for officers Personal Development Plans for officers Member training and development Member scrutiny training People Strategy Colchester Learning Managers Vine HR and East Of England Local Government Association – meetings, best practice and briefings Peer Challenge and action plan Charter Status for Elected Member Development	Member skills development Talent Management/Career Track for staff Learning and Development – commercial skills
5.2.3 Ensure that effective arrangements are in place for reviewing the performance of the authority as a whole and of individual members and agreeing an action plan which might for example aim to address any training or development needs	Performance reporting and indicators Performance and Improvement Framework Performance management and appraisals – staff SMART objectives People Strategy Peer Challenge and action plan Annual Audit Letter Members Personal Development Plans Annual Training Plan Local Government Ombudsman Annual Letter	

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
5.3.1 Ensure that effective arrangements designed to encourage individuals from all sections of the community to engage with, contribute to and participate in the work of the authority	Equality Impact Assessments on services and policies Consultations, Research and Statistics on website Voluntary Sector Grants programme Public meetings Equality Objectives Strategic Plan Consultation Local Development Framework consultation Community development work Consultations Customer insight work Research and Engagement Team projects Have Your Say! processes Appointment of Independent Persons	Community Enabling Strategy Community Budgets Use of social media
5.3.2 Ensure that career structures are in place for Members and Officers to encourage participation and development	People Strategy Internal Recruitment Process Internal Secondments Personal Development Plans for officers Personal Development Plans for members Talent Management/Career Track for staff Member skills development Staff structure charts	Talent Management/Career Track - the SMT Talent Panel now meets to consider critical roles; moderate career track paths; confirm Future Leader or Future Potential assessments; and then consider those on the Future Leader career track and manage their development Future Leader Programme Staff Recognition Scheme

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PRINCIPLE SIX

Core Principle 6 – Engaging with local people and other stakeholders to ensure robust public accountability

Our aims in relation to engaging with local people and other stakeholders to ensure robust public accountability are to:

6.1   Exercise leadership through a robust scrutiny function which engages effectively with local people and all local institutional stakeholders, including partnerships, and develops constructive accountability relationships
6.2   Take an active and planned approach to dialogue with and accountability to the public to ensure effective and appropriate service delivery whether directly, in partnership or by commissioning
6.3   Make best use of human resources by taking an active and planned approach to meet responsibility to staff

In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
6.1.1 Make clear to themselves, all staff and the community, to whom they are accountable and for what	Constitution Community Enabling Strategy Stakeholder identification Targets and Performance Monitoring Website and intranet Consultation Strategy Communications Strategy Datashare section on the Council's website brings together all information required under statutory codes such as including the 'Local Government Transparency Code 2015'to make this easily accessible	A key part of the Government's Transparency agenda is to bring information together into one searchable website - www.data.gov.uk to provide clarity on these issues. The information on the Datashare section of the Council's website is now also being published on www.data.gov.uk Community Budgets 2016-17 (replaced Locality Budgets) have been brought in with clearer guidelines and all spend/activity transparently available on the Council's website.

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
6.1.2 Consider those institutional stakeholders to whom they are accountable and assess the effectiveness of the relationships and any changes required	Stakeholder identification Statutory provisions Stakeholder surveys Consultation Strategy Communications Strategy Partnership Strategy and Register Scrutiny Panel and the Crime and Disorder Committee Work Programme Datashare	Ongoing review of Freedom of Information requests to see if there are items which could be put onto the website or Datashare, so that a repeat request would not be needed as the item had been made freely available. Examples have been business rate and public funeral information now published as a matter of routine.
6.1.3 Produce an annual report on scrutiny function activity	Annual Scrutiny Report	
6.2.1 Ensure that clear channels of communication are in place with all sections of the community and other stakeholders including monitoring arrangements to ensure that they operate effectively	Communications Strategy Websites and E-Courier Equality Impact Assessments Safeguarding Policies E-newsletters Datashare, Freedom of Information and Data Protection section of the website	Social media
6.2.2 Hold meetings in public unless there are good reasons for confidentiality	Constitution Access to Information Rules Compliance with Localism Act access to information regulations	Trading Board annual report
6.2.3 Ensure arrangements are in place to enable the authority to engage with all sections of the community effectively. These arrangements should recognise that different sections of the community have different priorities and establish explicit processes for dealing with these competing demands	Strategic Plan 2015-18 Website - "Consultations, Research and Statistics" section Consultation strategy Communications strategy Community development work Equality Objectives and Equality Impact Assessments Budget Consultation Meeting E-newsletters	implementation plan FOR Fundamental Service Review of Customer Contact Community Enabling Strategy

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
6.2.4 Establish a clear policy on the types of issues they will meaningfully consult on or engage with the public and service users including a feedback mechanism for those consultees to demonstrate what has changed as a result	Statement of Community Involvement Customer insight project team and its work Partnership framework Communication strategy Consultation Strategy Budget Consultation - meeting and online Strategic Plan consultation Website - "Consultations, Research and Statistics" section Cabinet and Council – progress of questions raised by the public	
6.2.5 On an annual basis, publish a performance plan giving information on the authority's vision, strategy, plans and financial statements as well as information about its outcomes, achievements and the satisfaction of service users in the previous period	Statement of Accounts Strategic Plan 2015-18 Website www.colchester.gov.uk Performance Reporting and Performance Indicators Council website has "Performance and Improvement", "Council Awards and Achievements" and "Council and Democracy" sections	Strategic Plan Action Plan – progress is reported to Scrutiny and Cabinet on a half-yearly basis Trading Board annual report A webpage has been set up to bring all annual reports into one central place on the Council's website for improved transparency

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In order to achieve our aims we have/will:	Source documents/Processes	Further work ongoing
6.2.6 Ensure that the authority as a whole is open and accessible to the community, service users and its staff and ensure that it has made a commitment to openness and transparency in all its dealings, including partnerships subject only to the need to preserve confidentiality in those specific circumstances where it is proper and appropriate to do so	Constitution Customer service standards Voluntary Sector Compact "Have Your Say" at meetings Freedom of Information Act Publication Scheme Member and Officer Codes of Conduct Ethical Governance Policies Monitoring Officer Protocol Communications Policy Data Protection Policy ICT Security Policy Council website Datashare, Freedom of Information and Data Protection section of the website National Fraud Initiative - Fair Processing Notice Egress Switch Secure Email Encryption	Community Hub at Colchester library brings a range of partners together to provide customer-facing services for customers of the Council and other organisations. This town centre location is easy to access for those who do not wish to self-serve or would like some assistance to do so online. It is open plan with a Welcome Zone where staff work with customers, but also includes areas where confidential discussions can be carried out if needed or appropriate Compliance project to meet 2016 update for security checks on staff who process official/sensitive information using the Public Sector Network or who need a secure .GCSX e-mail address
6.3.1 Develop and maintain a clear policy on how staff and their representatives are consulted and involved in decision making	Investors in People Facilities and Recognition Agreement with UNISON Internal Communications Strategy Fundamental Service Reviews and other operational reviews include consultation and involvement arrangements as part of the process/staff communications	Staff survey and taking action on its findings Staff suggestion boxes

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