

# Public Document Pack



Neuadd y Sir / County Hall, Llandrindod, Powys, LD1 5LG

Os yn galw gofynnwch am - If calling please ask for  
Wyn Richards

Ffôn / Tel: 01597 826375

Ffôn Symudol / Mobile:

Llythyru Electronig / E-mail: wyn.richards@powys.gov.uk

## **GOVERNANCE AND AUDIT COMMITTEE Friday, 23rd June, 2023**

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The use of Welsh by participants is welcomed. If you wish to use Welsh please inform us by noon, two working days before the meeting

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### **S U P P L E M E N T A R Y P A C K**

<b>1.</b>	<b>ANNUAL GOVERNANCE STATEMENT ASSURANCE</b>
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To receive and consider the report of the Head of Transformation and Democratic Services.

(Pages 3 - 116)

<b>2.</b>	<b>CORPORATE COMPLAINTS ANNUAL REPORT</b>
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To receive and consider the report of the Cabinet Member for a Connected Powys.

(Pages 117 - 132)

<b>3.</b>	<b>SWAP - ANNUAL AUDIT OPINION REPORT 2022- 2023</b>
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To receive and consider the report of the Assistant Director (SWAP)

(Pages 133 - 154)

<b>4.</b>	<b>DEMAND IN CHILDREN'S SERVICES</b>
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To receive and consider an extract from the Strategic Risk Register.

(Pages 155 - 158)

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## Annual Governance Statement - April 2022 to March 2023

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## Executive Summary

This Annual Governance Statement (AGS) provides an account of the processes, systems and records the council has in place to demonstrate effectiveness of its governance arrangements. It principally covers the period April 2022 to March 2023 but may be subject to updates up to its date of publication.

Powys County Council's new administration finalised its ambitious five-year plan '[Stronger, Fairer, Greener](#)'. The key priorities of the plan are shown below.



The Authority has faced a challenging year, with a number of issues arising that have had a strong bearing on its governance landscape.

The Authority is currently operating with a high number of interim posts in place at the Executive and Senior Leadership level. An interim Chief Executive has been in place since April 2023 to cover the substantive CEO's absence due to sickness, and a number of other posts had already been made interim during the previous year as a result of staff leaving to take up positions with other organisations.

In May 2023, Full Council opted to continue to extend the existing interim arrangements for up to 12 months, following the decision that it would not be

appropriate for any permanent changes to be made to the leadership structure while no substantive Chief Executive is in post.

The following posts are included under this arrangement:

- Director of Social Services and Housing
- Director of Education and Children's Services
- Director of Corporate Services
- Head of Transformation and Democratic Services
- Head of Housing
- Head of Community Services
- Head of Commissioning and Partnerships

The substantive Chief Executive had already begun a review of the interim changes but due to her unexpected absence this has not been completed.

In early 2022, some COVID restrictions were still in place and even once these passed some services remained in business continuity while they dealt with the ongoing impacts. Adult Services returned to business continuity again over the winter and remained so until spring 2023 in order to support Powys Teaching Health Board with the increased numbers of delayed transfers of care and difficulties in providing domiciliary care and other services that would allow patients to return home.

A number of audit reports were received this year that made recommendations regarding the Authority's governance processes and the spirit in which those processes are being implemented and those that hold the potential for the most far-reaching impact are outlined briefly below.

In November 2022, the Audit Wales report *Follow-up Review of Arrangements for Corporate Safeguarding – Powys County Council* made the following recommendations:

R1 The Council needs to urgently assure itself that it has robust arrangements in place for corporate safeguarding and use appropriate mechanisms such as the governance and audit committee, scrutiny, the Corporate Safeguarding Group and internal audit to help it achieve that assurance.

R2 The Council should agree and implement a corporate safeguarding policy and ensure it is easily accessible and understandable to staff, members and other stakeholders, and that it is reviewed periodically to ensure it is kept up to date and embedded in the day-to-day workings of every service in the Council.

R3 The Council needs to urgently ensure that the Corporate Safeguarding Group is carrying out its responsibilities in accordance with the Group's own Terms of Reference 'to ensure that all members and staff fulfil their roles and responsibilities in helping to keep people safe from harm and abuse, acknowledging that safeguarding is everybody's business in every service within the Council'.

R4 The Council needs to publicise the roles and responsibilities of the lead officer and lead member for corporate safeguarding to strengthen corporate leadership and accountability.

R5 The Council should review the need for having two Disclosure and Barring Service policies. If it decides to keep the two policies, it should be clear as to the rationale why, and clear on the following matters, to avoid confusion:

- who the policies apply to
- ensure they are reviewed at the same time
- are consistent with each other
- that anyone using the policies is sighted that they are both current and up to date.

R6 The Council should produce central guidance on the recruitment of volunteers to help to ensure consistency across the Council.

R7 The Council should gather contractual monitoring information from across all Council Directorates to ensure they are all robustly monitoring and quickly addressing safeguarding-related actions.

R8 The Council should accelerate the rate of compliance with the completion of mandatory safeguarding training for staff and members so that 'all members and staff fulfil their roles and responsibilities in helping to keep people safe from harm and abuse'.

R9 The Council needs to clarify its expectations of contractors in respect of safeguarding training because there are currently discrepancies in the Council's approach.

R10 The Council should improve the quality of corporate safeguarding performance information that goes to Cabinet and scrutiny to facilitate improved oversight of corporate safeguarding.

R11 The Council should assure itself that all directorates are fully considering safeguarding risks, have suitable escalation and mitigation processes where necessary, and, where appropriate, ensure directorate risk registers reflect that consideration.<sup>1</sup>

Remedial actions planned or undertaken in response to these recommendations will be addressed below (primarily [here](#) under Principle F1) and/or reflected in the planned actions for the current year.

In May 2023, an Audit Wales Review of the PCC Planning Service found that it '[had] concerns about the fundamental strategic, operational and cultural weaknesses of the Council's Planning Service [and that] these weaknesses hinder its ability to consistently and sustainably support staff and Members to deliver an effective service that helps the Council achieve its corporate objectives'.<sup>2</sup>

Its recommendations were that:

The Council needs to assure itself that fundamental foundations are in place to enable it to sustainably deliver an effective service. This includes but is not limited to:

- a) [review the political and strategic intent for its planning enforcement responsibilities, clearly communicate this, and align resources to deliver the Council's chosen intent.](#)
- b) [develop a Planning Services Business Plan which underpins the Property, Planning and Public Protection Integrated Business Plan. It should clarify the planning service's links between the planning service and the Council's Corporate objectives, to focus the service's action on improvement, and set out effective](#)

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<sup>1</sup> [Powys County Council – Follow-up Review of Arrangements for Corporate Safeguarding \(audit.wales\)](#) pp.6-7.

<sup>2</sup> [Review of the Planning Service – Powys County Council \(audit.wales\)](#) pp. 4-5.

service monitoring arrangements, performance targets, workforce development and risk management arrangements.

c) safeguard the planning service's officers, senior managers and elected members by developing clear arrangements and protocols which set out how they engage directly with planning agents and applicants to ensure integrity, trust and confidence in the service.

d) establish regular and effective team meeting arrangements to improve communication within the planning service and provide a structured and consistent opportunity for officers to discuss planning and enforcement cases.

e) put transparent and consistent arrangements in place for the service to act cohesively as a team to discuss officers' differences of opinion on planning applications, to ensure all officers are professionally satisfied with the final planning decisions.

f) establish service standards and protocols and effectively communicate these to all officers to ensure consistent approaches e.g., how to deal with applications with missing information.

g) put in place formal staff learning opportunities to ensure a consistent, structured and proactive approach to support new officers in the role and provide continuous development opportunities for existing staff.

h) assure that the Planning Service has robust data quality arrangements to ensure that it reports accurate performance data so that staff, Members, Welsh Government and the public can place reliance on its integrity to make accurate and informed decisions.

i) identify and learn from good practice from other Local Planning Authorities when implementing service improvements.

The Planning Service has established a Working Group and Action Plan to address the recommendations. Remedial actions planned or undertaken in response to these recommendations is included here under the relevant principles and/or reflected in the planned actions for the 2023-24.



During 2022-23, work has been undertaken to strengthen and formalise the processes around the drafting of the Annual Governance Statement and these are covered in more detail [here](#).

The Financial Management Code actions - ? Green, ? Amber, ? Red.

Powys County Council follows a system of corporate governance that is consistent with the seven principles of the Chartered Institute of Public Finance and Accountancy (CIPFA) and Society of Local Authority Chief Executives (SOLACE) Framework Delivering Good Governance in Local Government (2016 Edition). This statement is structured around the seven core principles and provides an overview of how the Council has discharged its responsibilities during 2022/23 and sets out recommendations of suitable areas for development. We will implement and monitor the Governance issues identified for action in 2023/24 as part of our next annual review.

Based on the evidence set out in this annual governance statement, Powys County Council considers the overall level of assurance to be ?.

This is underpinned by the below assurance levels:

	Assurance Level 2021-22	Assurance Level 2022-23
Principle A: Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law	Substantial	
Principle B: Ensuring openness and comprehensive stakeholder engagement	Substantial	
Principle C: Defining outcomes in terms of sustainable, economic, social, and environmental benefits	Substantial	

Principle D: Determining the interventions necessary to optimise the achievement of the intended outcomes	Substantial	
Principle E: Developing the organisation's capacity, including the capability of its leadership and the individuals within it	Substantial	
Principle F: Managing risks and performance through robust internal control and strong public financial management	Substantial	
Principle G: Implementing good practices in transparency, reporting, and audit to deliver effective accountability	Reasonable	

#### Rubric for Assurance Levels

Level	Description
Substantial	We are able to offer substantial assurance that the Council's arrangements adequately reflect the principles of good governance as indicated in the CIPFA Governance Framework. Processes are in place and operating effectively and risks to effective governance are well managed.
Reasonable	We are able to offer reasonable assurance that the Council's arrangements adequately reflect the principles of good governance as indicated in the CIPFA Governance Framework. Generally, risks are well managed, but some processes could be improved.
Partial	We are able to offer partial assurance that the Council's arrangements adequately reflect the principles of good governance. Some key risks are not well managed, and

	processes require the introduction or improvement of internal controls to ensure effective governance.
None	We are not able to offer any assurance. The Council's arrangements were found to be inadequately controlled. Risks are not well managed, and processes require the introduction or improvement of internal controls to ensure effective governance.

#### Priority Levels for Actions

Level	Description
Critical	Failure to take action poses an immediate and severe risk
Potentially critical	Failure to take action may pose a significant risk at some point in the future
Necessary	Action is required to ensure that compliance is maintained
Recommended	Action would deliver best practice but is additional to normal standards of practice
Not urgent	May be addressed in the future but is not currently being considered – potentially aspirational

## Introduction

Powys County Council is responsible for ensuring that its business is conducted in accordance with the law and proper standards; that public money is safeguarded and properly accounted for; and is used economically, efficiently, and effectively. Powys County Council also has a duty under the Local Government and Elections (Wales) Act 2021 to make arrangements to secure continuous improvement in the way in which its functions are exercised.

In discharging this overall responsibility, Powys County Council is responsible for putting in place proper arrangements for the governance of its affairs, facilitating the effective exercise of its functions, which includes arrangements for the management of risk.

Powys County Council is the Administering Authority for the Powys Pension Fund (the Pension Fund). The governance arrangements detailed in this Self-Assessment Report apply to the council's responsibilities to the Pension Fund. There are further specific requirements for the Pension Fund which are:

- The Investment Strategy Statement
- Funding Strategy Statement
- A full Actuarial Valuation to be carried out every third year

Powys County Council's governance framework comprises the systems, processes, cultures and values, by which the Council is directed and controlled and through which it engages, leads and is accountable to residents and communities. It enables the Council to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of outcome-focused and cost-effective services.

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

The system of internal control is based on an ongoing process designed to identify and prioritise the risks to the achievement of Powys County Council's policies, aims and objectives. In addition, it assists in evaluating the likelihood of those risks being

realised and the impact should they be realised, and to manage them efficiently, effectively and economically.

The roles, responsibilities and processes that form the Authority’s governance framework and system of internal control may be viewed in our [Constitution](#). This framework sets out the context in which the following report has been developed.

Table 1. Progress against areas for further development identified in the 2021/22 AGS

BRAG (Blue, Red, Amber & Green) status definitions

	Action is complete
	Action is on track
	Action mainly on track with some minor issues
	Action not on track with major issues
	Action not started

Development Action (Completed actions are linked to further detail provided under each principle)	Supporting Actions	Lead/Deadline	BRAG	Mitigation/ Notes
Reintroduce face to face engagement, particularly with seldom-heard groups to maximise reach	Launched a new public participation strategy. Identified groups to engage with	John Evans	Green	
Continue to develop the	Forward work programme is	Catherine James	Green	

effectiveness of the Cabinet Work Programme	discussed regularly and forward looking in its approach			
FM Code action plan continues to strengthen our compliance and we aim to deliver outstanding actions and monitor it	The process has been established. Appendix (TBC) highlights delivery in year and continuing actions	Dan Paley	Blue	Review of the of the FM Code will be reported annually in the AGS.
Further develop the prominence of the Strategic Equality Plan, across the organisation	<ul style="list-style-type: none"> <li>• Developed new plan</li> <li>• Implemented new Plan</li> <li>• Alignment of objectives to all Service IBP's</li> <li>• Alignment to individual appraisal actions</li> <li>• Plan published</li> </ul>	Caroline Turner	Blue	
Work between Finance and Service areas to improve further understanding of outcome-based		Jane Thomas		

budgeting and look to implement further				
Review the MTFS principles with the new Cabinet and align to their manifesto and new CIP		Jane Thomas		
Develop the outcomes / benchmarking /VFM template and use within service reviews to support budget setting		Anne Phillips		
Asset review completed to support the future capital requirements and strategy		Neil Clutton		
Review performance measures used as part of the Corporate Improvement Plan to ensure there is a robustness as outlined in report	Measures reviewed and aligned to 3 objectives Corporate Report Cards. Supporting measure definition documents	Emma Palmer	Blue	

	created and collaborated on with Services.			
Continue to review the opportunities to embed Service Improvement Boards within business as usual	<ul style="list-style-type: none"> <li>Stepped down Social Services, Housing and Education Boards</li> <li>Continued with HTR and stepped up Planning</li> </ul>	Caroline Turner	Green	Interim CEO reviewing and suggesting next steps

### What we Know About our Governance Processes in 2022/23

The evidence and assurance levels provided in this document indicate Powys County Council's assessment of the effectiveness of its governance framework and supporting actions during 2022/23.

The Internal Audit Annual Report 2022/23 undertaken by SWAP provides a corroborative independent assessment of several areas relevant to the AGS and concludes that there is ? assurance and that [insert quote]. The overall findings of the audit report are summarised as follows:

[Image here]



Principle A: Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law

Powys County Council places a high value on upholding the highest standards in public office for both its Elected Members and its officers. The Authority holds a set of values that inform everything that it does, and it expects everyone who is engaged in our work, or who works alongside us, to endorse and exemplify these values and to aspire to be:

Professional - Whatever role we play in the Council; we act with professionalism and integrity  
Positive - We take a proactive attitude in all we do

Progressive - We take a proactive and responsible approach to planning for the future

Open - We keep each other informed, share knowledge and act with honesty and integrity  
Collaborative - We work constructively and willingly on joint initiatives

**A1. How do we evidence that we behave with integrity and demonstrate a strong commitment to ethical values?**

- I. During 2022-23 the Standards Committee met on 6 occasions.
- II. During 2022-23 the Standards Committee was informed of 5 complaints made against Elected Members to the Public Services Ombudsman for Wales during the previous financial period. Three are undergoing further investigation from the Ombudsman.
- III. During 2022-23, low-level complaints between Members or between officers and Members were dealt with under the Local Resolution Process.
- IV. The Governance and Audit Committee has met on 8 occasions over the past year (the Constitution allows for quarterly meetings but the workload has necessitated more frequent meetings). The Committee oversees the Authority's risk management process and ensures that it maintains effective internal controls, in particular around the audit process, ethics, conflict of interest and fraud control.
- V. A Policy Register was developed during 2022-23 that lists all corporate policies (excluding those pertaining to Schools and excluding guidance), last date of review and next due date of review. The list is stored in SharePoint and is accessible internally to designated officers. The system prompts review a year prior to deadline and follows up at 6 months prior to deadline. A warning notice is sent once the review date has passed. A Power BI dashboard provides oversight for the Executive Management Team. The system became live on the 18 April, 2023.
- VI. The introduction of the Ukraine Procurement Supply and Costs Cell created a cross service group to monitor and report the ongoing situation. The impact on the Pension Fund performance was monitored and the national commitment to disinvest from Russia was actioned. The Pension Fund, together with the other LGPS Pension Funds in Wales, moved quickly to ensure that Russian held investments were quickly dis-invested where possible and appropriate action taken to ensure no further investment took place.
- VII. The Authority's Integrated Impact Assessment (IIA) mechanism provides a structure methodology for considering potential impacts on residents, staff and the organisation during planning and the resultant documentation is instrumental in supporting policy development and decision making.

## **A2. How do we ensure that our External Providers understand and uphold our ethical standards?**

- I. During 2022/23 the Council spent £? with external suppliers in revenue and capital expenditure and it has a responsibility to use this money in the most effective way to achieve its objectives and desired outcomes for residents. The Commissioning and Commercial Strategy aims to 'promote responsible procurement that supports the Council's social, economic and environment aims, including strategies to maximise the use of local suppliers, embed the use of apprentices and employment as a condition of contracts and incorporate supply chain management expectations on major contractors such as fair payment terms to subcontractors and ethical employment practices'.
- II. In 2021 the Authority recruited a Procurement Sustainability Officer to drive a coordinated, environmentally responsible procurement approach towards the sourcing of all goods, services and works.
- III. A new PCC procurement strategy was drafted during 2021 and this will be followed up with an action plan (currently in draft) and associated indicators to measure progress against the strategy.
- IV. This year, a permanent appointment was made to the post of Professional Lead for Procurement and Commercial Services, replacing a long standing interim.

## **A3. In what ways do we show that we respect the rule of law?**

- I. The Authority has robust Anti-Fraud and Corruption, Anti-Money Laundering, and Fraud Prosecutions and Sanctions Policies in place. During 2022/23, there were £?k of fraud income gains and recoverable overpayments of £?k.
- II. The Authority's Whistleblowing Policy was reviewed during 2022-23.
- III. The Authority strives to maintain compliance with the requirements of all acts of legislation that relate to its activities; most notably (but by no means limited to) the:
  - Human Rights Act 1998
  - Equality Act 2010 o Health and Safety at Work Act 2015

- Welsh Language Act 1993 o Well-being of Future Generations (Wales) Act 2015
  - Social Services and Wellbeing (Wales) Act 2014.
- IV. Changes in legal staffing over the last 12 months has been positive, leading to improvements in the overall provision of legal service to the Council.
- V. Execution of Electoral duties over the past year has included:
- The Authority administered local government elections for 174 community wards and 68 county seats (including newly introduced multi-member wards).
  - There were 179 county candidates and 1144 community candidates with more contested county seats than in previous years
  - There were 17,486 postal voters
  - Required 155 polling stations and 482 staff
  - The Authority implemented late WG regulations and introduced online nominations for the 1323 candidates
  - There was an 80% increase in 16-17 registrations from 2021 (engagement programme for local elections)
  - The Authority completed annual canvass with increased match rates and published register of electors
  - The Authority's Election Service was asked to speak at National Conference
  - The IERDS portal for Voter Certificate Authority went live in January without issue

#### Summary/Assurance

The Council is able to offer ? assurance that the Council's arrangements adequately reflect the principles of good governance as set out in Core Principle A: Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law. Processes are in place and operating effectively and risks to effective governance are well managed.

[Principle B: Ensuring openness and comprehensive stakeholder engagement](#)

PCC recognises the profound importance of engagement, consultation and coproduction with our residents, partners and the wider stakeholder landscape. The Council appreciates the rich and varied viewpoints that they are able to provide and values their involvement in the development of decisions and future service provision. While the Authority continues to engage its stakeholders through a variety of traditional methods which include focus groups and meetings, it is also investing in new digital tools such as online platforms, survey software and social media channels, to disseminate information and elicit wider response. Powys County Council is signed up to the National Principles for Public Engagement in Wales and strives to ensure that conversations with its stakeholders are meaningful, timely and appropriately resourced.

Actions that were identified for further development during 2022/23:

- Reintroduce face to face engagement, particularly with hard-to-reach groups to maximise reach

### **B1. Do we engage with others in an open way?**

- I. The Authority seeks the views of residents, business owners, visitors and stakeholders through its Have Your Say public consultation and engagement hub.
- II. During 2022-23, 37 (34 external and 3 internal) engagement and consultation activities were undertaken to engage residents and staff and these included:
  - a. Performance Feedback Ongoing Engagement Project
  - b. RPB Market Stability Report
  - c. Employment and Skills Survey
  - d. The future of our town centres – Brecon and Crickhowell
  - e. Staff recruitment and retention survey – Why Powys?
  - f. Corporate Plan Engagement

- III. Some committee meetings (including Cabinet meetings) are webcast and our committee agendas, minutes, and decisions are available to the public on the Council's [website](#).
- IV. The Pension Fund holds an annual Employer Meeting online to enable participating employers to meet and receive an annual update from the Fund (Actuarial, Investment, Governance, Administration, Legislation). In addition, the Pensions Section meets regularly with employers on an individual basis to provide training and deal with any concerns that the employers may have. Feedback from these sessions helps develop training and communications plans for group and individual employers.

## **B2. Do we engage widely with our stakeholders?**

- I. The Public Service Board (PSB) is a statutory strategic partnership established under the Well-being of Future Generations (Wales) Act 2015 to improve the economic, social, environmental, and cultural well-being of Wales. The most recent available [PSB annual report](#) highlights work that was completed during 2021-22 to deliver the objectives presented in [Towards 2040 – Our Well-Being Plan](#). There is no annual report available for 2022-23 as the time was set aside for the development of the new Wellbeing Plan and there was therefore no reporting requirement for that year.
- II. [The Powys Wellbeing Plan](#) was approved in June 2023 and sets out the way the Public Service Board wants Powys to look in the future. It contains 3 local objectives and 3 well-being steps to achieve those objectives. Prior to the drafting of the Wellbeing Plan, a public consultation was undertaken which ran from 27th January to 19th April 2023 and received 235 responses.
- III. The Authority works with its strategic partners through the Regional Partnership Board (RPB) to deliver integrated care services. The partnership's progress and key achievements for 2022-23 will be available in the RPB Annual Report (although this will not be available until late July/early August).
- IV. The Mid-Wales Corporate Joint Committee was established in 2022 to strengthen local democracy and accountability by integrating decision making with regards to regional transport, strategic development plans and the improvement of economic wellbeing. It comprises representatives for PCC,

Ceredigion County Council and the Bannau Brycheiniog, and will in due course, be responsible for the preparation of a number of documents that will provide additional governance for its areas of accountability. The Corporate Joint Committee Corporate Plan 2023 – 2027 is currently in draft for consultation.

- V. As a result of the local elections in May 2022, PCC's Scrutiny Committees have seen a large percentage of new members joining during the past year and have therefore to a large extent concentrated their efforts on member training and establishing a firm understanding of their responsibilities. In consequence, there has been little opportunity to develop engagement with external partners. The Committees are keen to remedy this and planned actions are in place to increase opportunities for engagement during 2023-24.
- VI. The MTFFS helps the Council to work more effectively with partners in other sectors and provides a strategy for the use of reserves to meet changes in resources, risks or unforeseen demands from year to year without impacting unduly on services or council.

### **B3. Do we engage with individual citizens and service users effectively?**

- I. During 2022-23, 34 external engagement and consultation activities were undertaken to engage residents and service users.
- II. In compliance with the Local Government and Elections (Wales) Act Part 3 Promoting Access to Local Government, PCC has made available its [Public Participation Strategy](#), to ensure that all our stakeholders, including residents, partners, and businesses, have opportunities to participate and engage with us and to influence future decisions and service provision across Powys.
- III. The Authority has a Consultation and Engagement Framework to provide guidance for services that are planning to engage with the people of Powys. A summary of the consultation and engagement activities undertaken by the Council during 2022/23 may be viewed at [Appendix A](#).
- IV. An Equalities Community of Practice Forum has been established to disseminate information, obtain feedback and facilitate engagement with staff.

The aims of the group are under review and it will be necessary to confirm that there is sufficient investment being made in the Authority's equality plans to ensure that the activities undertaken are meaningful and have impact.

- V. The Powys Older People's Forum Report was completed in March 2022. Supported by a Welsh Government grant, the report was commissioned to identify ways in which the Authority can potentially improve engagement with its older residents through the further development of its Older People's Forum.
- VI. A key opportunity identified by Adult Services during 2021-22 was the engagement of a number of residents (who are living with physical disability and/or sensory loss), in the co-production of a citizens' charter. This work has continued through 2022-23 and it is anticipated that the forum will be an effective, long-term facilitator of co-production. Members of both of these forums have been involved in shaping and designing of a range of services including the Adult Services Web page, the commissioning of disability supported living services, the Powys Teaching Health Board learning disability Health leaflet and budget efficiencies. Members co-developed the Terms of Reference for the forums and also co-chair meetings. The Forum has been instrumental in the discussion and consultation around key draft policies, e.g., the Easy Read Advocacy Policy.
- VII. In the past year, the Authority has put in place a Youth Participation officer who ensures that children and young people's voices are heard at the highest level, and more importantly, acted upon. Their work in the future will concentrate on ensuring that the voices of those children who find it difficult to participate are heard and work has already started on this through building relationships with children looked after and our unaccompanied asylum seekers on a 1:1 basis. Over the past 6 months, the Authority has been exploring the idea of forming a children and young people's Committee to provide additional assurance on issues relevant to this group and it is hoped that work to establish the feasibility and exact parameters of the undertaking will start in September.
- VIII. Residents are able to use the Authority's website to suggest topics for scrutiny to consider and to comment on items due to be considered during Scrutiny meetings.



- IX. The Governance and Audit Committee is Chaired by a lay member.
- X. The Council has a formal compliments and complaints procedure that enables complaints to be escalated and investigated independently of the service concerned. The Authority's [Complaints Policy](#) was reviewed in April 2022 and is available via the public website.
- XI. To ensure the impact of our services in the Welsh language is considered, all surveys now incorporate three standard questions to capture feedback on how our decisions impact the Welsh Language and how they could be changed to ensure a more positive outcome.

### Summary/Assurance

The Council is able to offer ? assurance that the Council's arrangements adequately reflect the principles of good governance as set out in Core Principle B: Ensuring openness and comprehensive stakeholder engagement.

### [Principle C: Defining outcomes in terms of sustainable, economic, social, and environmental benefits](#)

Powys County Council uses a variety of processes and tools to develop, maintain and review its plans and actions. It has a Corporate Planning Cycle in place to ensure that it reviews its objectives and strategies annually to confirm that they remain relevant and focussed on obtaining the right outcomes for residents and communities through the most appropriate and sustainable means available.

An outline of the arrangements currently employed by the Authority may be viewed here within the context of the PCC governance framework. Actions that were identified for further development during 2022/23:

- 

### **C1. How do we define our desired outcomes?**

- I. The Medium-Term Financial Strategy ties the current financial position to the desired future outcomes of the Council's vision and helps to chart a sustainable course between the two positions (see sub-principle [D3](#) for further detail).

- II. [The Corporate and Strategic Equality Plan](#) (CSEP) for 2023-27 was considered and approved by Council on 23 February 2023 and was implemented from 1 April 2023.
- III. In response to **Audit Wales Review of the PCC Planning Service** (recommendation a) review the political and strategic intent for its planning enforcement responsibilities, clearly communicate this, and align resources to deliver the Council's chosen intent), actions taken since the publication of the report include:
- a. A Statement of intent for the Planning Service has been, and will continue to be, clearly communicated by the Council.
  - b. Additional resource of two Enforcement Officers has been established.
  - c. The Planning, Taxi Licensing and Rights of Way Committee have expressed support for the importance and commitment of resources to planning enforcement.
  - d. The Service will undertake a review of planning enforcement policies and procedures. This review will ensure resources are appropriately aligned with enforcement priorities and investigate the potential to introduce a post determination/pre-implementation service to advised applicants on discharge of condition requirements.
  - e. The Property, Planning and Public Protection Integrated Business Plan has been strengthened and revised to include a stand-alone objective supporting planning enforcement. This will ensure that the Councils intent for planning enforcement is clearly identified, capable of being monitored, and appropriately resourced.
  - f. A broader Planning Service structure review is to be implemented to ensure the most appropriate alignment of resources to enable the Planning Service to sustainably deliver an effective planning service. During May 2023, the Head of Service has engaged and consulted with the Planning Service on potential structure options.
  - g. Additional technical training will be Implemented to ensure planners are able professionally undertake enforcement duties.

- IV. In response to **Audit Wales Review of the PCC Planning Service** (recommendation b) develop a Planning Services Business Plan which underpins the Property, Planning and Public Protection Integrated Business Plan [clarifying] the planning service's links between the planning service and the Council's Corporate objectives, to focus the service's action on improvement, and set out effective service monitoring arrangements, performance targets, workforce development and risk management arrangements), actions taken since the publication of the report include:
- a. The Planning Service will develop a business plan actioning the objectives identified within the Property, Planning and Public Protection Integrated Business Plan and the Planning Services contribution to a Stronger, Fairer and Greener Powys (golden thread) and this is already in draft.
- V. In March 2023, the Authority agreed a revised approach to performance that sets out the processes and methods used by the organisation to manage and assess performance, and which will in due course replace the previous [Performance Management and Quality Assurance Framework](#). In addition, a Corporate Scorecard will be adopted to detail progress against our objectives and measures.
- VI. The Wellbeing Assessment was published in March 2022 on behalf of the Powys Public Service Board and presents data and insights concerning the well-being of Powys residents. It fulfils PCC's obligations under the Well-being of Future Generations (Wales) Act 2015 by setting out how we will improve the well-being of its communities, against the seven national goals.
- VII. The Population Needs Assessment was published in March 2022 by the Regional Partnership Board in order to fulfil the requirements of the Social Services and Well-being (Wales) Act 2014 by providing a focused view of current and future health and social care needs in Powys.
- VIII. A Strategy for Climate change- Net positive Powys 2021-2030 was published in 2021 and details five key areas of change where climate action is needed to achieve the vision of Powys County Council being carbon neutral and climate resilient in 2030.

- IX. The Powys Nature Recovery Action plan focuses on safeguarding and enhancing the natural environment for residents and communities.
- X. Reporting templates and guidance are regularly updated to reflect organisational business planning and reporting requirements.
- XI. The Authority has agreed a Risk Appetite Statement (for further information see the section under principle [D3 below](#))

**C2. How do we ensure that any economic, social, and environmental benefits we make are sustainable?**

- I. The Council undertakes Integrated Impact Assessments for all significant service, financial or policy changes to ensure the implications are understood, to support effective decision making and to ensure legislative compliance.
- II. During 2021-22 the Council's Impact Assessment Process has been automated providing improvements through a consistent organisational approach and retention of records in a central repository. During 2022-23, reporting has been developed to understand the impacts of all decisions on a geospatial basis. This is currently being developed to further support the annual budget cycle.
- III. The CIPFA Financial Management Code (FM Code) sets out the standards of financial management expected for local authorities and is designed to support good practice and to assist local authorities in demonstrating their financial sustainability. The Council assessed its processes, procedures, and governance arrangements as of 31<sup>st</sup> March 2022, and identified the actions to be developed to strengthen its compliance with the Code. The list of actions can be viewed in [Appendix B](#).
- IV. The Council has a clear Treasury Management and Investment Strategy which is approved at Council each year and sets out the expected activities and appropriate strategies of the Treasury function in respect of borrowing and investments.
- V. The investment environment has experienced a turbulent 12 months due to the performance of the global economy. The Pension Fund has several risk

mitigation strategies (protection/diversification) to help manage this and the outlook is more positive, so strategy review may be appropriate if required.

## **VII. Annual Assurance and Risk Assessment from Audit Wales –**

**Recommendation** - In order to meet its net zero ambition, the Council needs to fully cost its intended action plan and ensure that it is aligned with its Medium Term Financial Strategy. To address this point the organisation will need to invest in training plus the development of action plans which can then be costed. One event has been held for Executive Management Team to raise understanding of requirements and a workshop to develop plans has been organised but the scope and scale required to address the climate emergency needs a whole organisation shift which could be linked with the re-design of services

### **Summary/Assurance**

The Council is able to offer ? assurance that the Council's arrangements adequately reflect the principles of good governance as set out in Core Principle C: Defining outcomes in terms of sustainable economic, social, and environmental benefits

[Principle D: Determining the interventions necessary to optimise the achievement of the intended outcomes](#)

Actions that were identified for further development during 2021/22:

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### **D1. How do we make decisions and consider possible consequences?**

- I. During 2022-23, it was proposed that changes might be made to the structure and remits of the Authority's Scrutiny Committees, however, following consultation with the Members it was decided not to proceed at this time.
- II. During spring 2022, all Powys County Council Services undertook a process of self-assessment to provide intelligence that they could use as the basis for their

annual performance presentation to the Cabinet and Executive Management Team. A self-assessment workbook was completed by each service to gather the required information and in addition to the panel presentations, the information provided was used to assist in fulfilling the Authority's obligations under Section 6 of the Local Government and Elections (Wales) Act 2021. Powys was the first Authority to submit its Annual Corporate Self-Assessment Report and received some very positive feedback from its early readers. During the following year, the Authority considered the feedback (both internal and external) and revised some elements of the process to reduce the work created for its services and to align the collection of information for self-assessment and the AGS. The new Corporate Safeguarding Audit Tool was also appended to the Self-Assessment Workbook.

- III. The Scrutiny Committees, Finance Panel and Governance and Audit Committee each completed an adapted version of the workbook to examine their working practice, set out their achievements and challenges, and consider future improvement planning. Further detail is included under [principle G3. How do we provide assurance and effective accountability for our actions?](#)

## **D2. How do we plan effective services, programmes and projects?**

I. The processes that Powys County Council used up to May 2023 to monitor and evaluate its performance against its objectives are set out in the Performance Management and Quality Assurance Framework. The PMQAF was retained during 2022/23 in line with the completion of Vision 2025 but consideration has also been given to the development of a new approach to business planning going into the new financial period. The new process is currently in draft and awaiting approval.

II. Services record and monitor their objectives and associated measures using an Integrated Business Plan (IBP)

III. Following concerns regarding the affordability of the capital programme, work was commissioned around governance, assurance, and project and business appraisals. A capital workstreams working group was established to progress this detailed work and a report was compiled at the end of the first phase of this work. In their 2022-23

Self-Assessment, Governance and Audit report that since it has been raised there have been improvements in governance arrangements and the way that the capital programme is being approached.

IV. Transformation Delivery Board meet and report on a monthly cycle and report externally on a quarterly basis.

V. Improvement Boards have a monthly meeting and reporting cycle.

### **D3. How do we ensure that our budgets and financial plans are sustainable?**

The Council is required under the Local Government Act 2003 to set a balanced budget for the forthcoming financial year. The Council's Medium Term Financial Strategy sets out how a balanced budget has been developed for 2023/24. There is no requirement to set out a balanced position beyond the next year but the five year strategy has been developed to enable longer term planning and transformation.

The MTFS sets out the:

- Financial, regulatory and policy drivers affecting the Council.
- Direction and approach that the Council will take in handling its finances.
- Plan for delivering a balanced budget for 2023-24, and indicative budgets for the following 4 years to March 2028.

This means the Council has an ongoing financial plan to:

- Enable service transformation within the funding levels available.
- Prepare for the challenges in setting a balanced budget in future years.
- Allow decision makers to consider the allocation of resources, helping to ensure they are directed towards delivering core responsibilities alongside corporate priorities.
- Understand the Council's financial resilience, helping to protect the Council's long term financial health and viability.
- Consider affordability in decision making. It is a live document so will change as estimates and assumptions are confirmed.

- Align revenue and capital to ensure that our limited resources are prioritised to achieve maximum effectiveness and based on securing outcomes that matter to our residents.

The MTFS includes all Council services activity funded by the revenue budget, the Housing Revenue Account, and the Capital programme. This information is presented in a 5-year budget model and a 5-year Capital Programme.

As part of setting the budget we undertake due diligence on our savings plans to ensure they can be delivered as expected so as not to create a financial burden when managing the revenue budget in year. We also increased our risk budget to £3m which is a recurrent budget that underpins service pressures that are managed at risk because they may not occur or the level of severity is uncertain.

Our reserves policy is reviewed each year and recently increased the general reserve level to 4% of net budget (excluding schools and the HRA), we have set up a number of specific reserves to buffer against specific service issues and the uncertainty of the pay awards in 2023-23.

The Council approved the MTFS for 2023/24 on 23<sup>rd</sup> February 2023.

### **Summary/Assurance**

The Council is able to offer **?** assurance that the Council's arrangements adequately reflect the principles of good governance as set out in Core Principle D: Determining the interventions necessary to optimise the achievement of the intended outcomes.

**Principle E: Developing the organisation's capacity, including the capability of its leadership and the individuals within it**

Actions that were identified for further development during 2021/22:

- The number of staff attaining digital core skills (bronze level) will reach 100%
- The percentage of our leaders who are digitally capable and reach the Gold Standard will



increase to 100% As a result of additional pressures placed on the workforce as a result of COVID-19 disruption, these actions were not achieved during 2021/22.

## **E1. How do we ensure that the organisation continues to improve?**

- I. The new Corporate and Strategic Equality Plan was published on the 23 February 2023 and sets out the Council's objectives for the administrative period.
- II. The Vision 2025 – End of Administration Programme Report was published in March 2022 and reviews Powys County Council's Vision 2025 Transformation Programme; outlining how and why the programme was established, what it set out to achieve, progress to date and lessons learned.
- III. Action plans are monitored through the Tracker and where it is identified that actions are not being implemented the Governance and Audit Committee requests the relevant Head of Service to attend and provide explanation.
- IV. While the Authority has a performance reporting mechanism in place, it is currently reviewing its performance management process. Services provide information on a quarterly basis but formal reporting has been moved to every other quarter to allow services to concentrate on self-assessment on the interleaving quarters.
- V. The first self-assessment was published in July 2022, considering a range of materials such as performance, risk, etc. in order to provide a holistic view of performance to shape future delivery.
- VI. Internal Audit reports with limited assurance are considered by the Governance and Audit Committee.
- VII. Improvements to the AGS process and an AGS framework have been in development during 2022-23 (for further detail see the relevant [section](#) below).
- VIII. In response to **Audit Wales Review of the PCC Planning Service** (recommendation i) identify and learn from good practice from other Local Planning Authorities when implementing service improvements, activities undertaken since the report was published include:

- a. Planning Service is attending regional and national planning groups, with the intention of identifying additional ways to:
  - Promote consistency.
  - Identify and promote best practice.
  - Promote benchmarking.
  - Promote networking.
  - Aid officer development.

## **E2. How do we develop the skills and knowledge of the leadership and workforce?**

- I. A New workforce plan is in place with a three year phased approach.
- II. In response to an Audit Wales recommendation that the Council should strengthen the performance management of its workforce<sup>3</sup>, the Head of Workforce and Organisational Development (WOD) has acted as chair of an all-Wales group of local authorities working to develop KPIs to support the improvement of measurement and reporting of workforce management in local government. To date, this group has agreed terms of reference and delivered an early draft suite of KPIs, which are now undergoing further development and review.
- III. The Leadership Behaviours Competency Framework has been developed and is ready to go to print so that it can be embedded and integrated in the Council's induction and training programmes.
- IV. Following the Line Manager Induction programmes, four Line Manager forums have been established and are regularly meeting as a means of peer support to staff, in particular with regards to managing remotely and implementing New Ways of Working protocols
- V. Training Needs analyses have been completed by each service area to ensure that the skills needs of the workforce are identified and supported.
- VI. A suite of learning and development opportunities has been identified for SLT
- VII. ILM 7 Leadership and Management and ILM 5 Coaching and Mentoring programmes have been offered to senior managers along with ILM

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<sup>3</sup> Springing Forward – Workforce Management Audit report (Audit Wales)

- Leadership and Management programmes from levels 2 – 5 being offered to the wider workforce via the Welsh Government apprenticeship programme
- VIII. Work has commenced on developing an electronic appraisal process which will providing robust performance reviews and identify CPD needs of the workforce and areas for improvement
- IX. Significant changes have been made to the Discipline and Grievance Policy and a complete refresh of guidance and toolkits for managers, with the introduction of an Informal Resolution Framework. Main changes improve the timeliness of investigations and procedures and move to a culture of supporting change and improvement rather than punishment and blame.
- X. Following the election in May 2022, a significant amount of training wa provided to all Councillors, including Cabinet and Scrutiny members, to provide them with information and skills to support their decision making. This is supported by an ongoing member’s development programme.
- XI. In response to **Audit Wales Review of the PCC Planning Service** (recommendation c) safeguard the planning service’s officers, senior managers, and elected members by developing clear arrangements and protocols which set out how they engage directly with planning agents and applicants to ensure integrity, trust and confidence in the service), actions taken since the publication of the report include:
- a. An operational protocol for Agent/Applicant interaction will be adopted by Planning Service and is currently in draft. The protocol will be communicated to relevant parties and published on the Councils website in due course.
  - b. A front-facing Development Management Guide and FAQ is in preparation.
- XII. In response to **Audit Wales Review of the PCC Planning Service** (recommendation d) establish regular and effective team meeting arrangements to improve communication within the planning service and provide a structured and consistent opportunity for officers to discuss planning and enforcement cases), actions taken since the publication of the report include:
- a. A schedule of new, regular meeting cycles has been implemented to ensure clear and effective communication exists between staff and

management and in particular to check on staff wellbeing, enable dynamic learning, regularly review workload to ensure workload is distributed efficiently, provide officers with the opportunity to highlight any workload issues promptly and provide a forum for best practice to be shared (appeal decisions for example).

- XIII. In response to **Audit Wales Review of the PCC Planning Service** (recommendation e) put transparent and consistent arrangements in place for the service to act cohesively as a team to discuss officers' differences of opinion on planning applications, to ensure all officers are professionally satisfied with the final planning decisions), actions taken since the publication of the report include:
- a. Weekly Development Management team meetings are now in place to enable discussion to take place regarding differences of opinion on planning applications, planning enforcement cases, planning policy and planning case law and to provide a learning and development environment for the team.
- XIV. In response to **Audit Wales Review of the PCC Planning Service** (recommendation f) establish service standards and protocols and effectively communicate these to all officers to ensure consistent approaches e.g., how to deal with applications with missing information), actions taken include:
- a. Guidance notes have been developed for specific steps required to process planning applications in order to promote best practice and ensure consistency of approach. The guidance notes are discussed at Development Management team meetings and at 1-2-1 meetings, when required. Guidance notes will be used as a training resource for staff induction.
- XV. In response to **Audit Wales Review of the PCC Planning Service** (recommendation g) put in place formal staff learning opportunities to ensure a consistent, structured and proactive approach to support new officers in the role and provide continuous development opportunities for existing staff), actions taken since the publication of the report include:
- a. The implementation of a Planning Working Group training programme is continuing that will ensure a consistent, structured and proactive

approach that supports officers, and provides continuous professional development.

- b. A mentor will be allocated to all new Planners.
- c. Development Management Officers are now required to attend the Council Offices 1-3 days a week (depending on experience) to establish and strengthen relationships, create a learning environment and promote consistency.
- d. A training matrix has been adopted by the Planning Service.
- e. Weekly Development Management teams meeting are being utilised as a training forum.

### **Summary/Assurance**

The Council is able to offer ? assurance that the Council's arrangements adequately reflect the principles of good governance as set out in Core Principle E: Developing the organisation's capacity, including the capability of its leadership and the individuals within it

## Principle F: Managing risks and performance through robust internal control and strong public financial management

The Council is continuously working to improve its management of risk. It aims to better identify, understand and manage the risks that may accompany its activities and to prepare for future challenges. Risk management is a supports organisational delivery and effective processes increase the likelihood of achieving objectives. The risks facing the organisation are constantly changing so not only does the Council prepare for what has been assessed as a potential risk but it also attempts to prepare and build resilience for the as yet unknown situations.

Actions that were identified for further development during 2022-23:

### **F1. How do we manage risk?**

A description of the risk management arrangements currently employed by the Authority may be viewed here within the context of the PCC governance framework. In addition, consideration of risk forms an integral part of quarterly performance reviews held with Portfolio Holders, Directors and Heads of Service. The Governance and Audit Committee has a key role in monitoring and challenging the Council's risk register. The committee are asked to review the reports considered by Cabinet and the arrangements in place to ensure that there is an appropriate understanding and management of risk and that these and the actions in place to mitigate the risks are monitored and regularly reviewed.

- I. Following previous action in 2021 to extend the remit of the Audit Committee to include oversight of Governance, the function of the Governance and Audit Committee continues to develop in providing assurance around the processes employed by the council and supporting finance officers in their decision making.
- II. Risk is considered quarterly but during 2021 Q3 reporting was suspended as a result of the pandemic.
- III. A Commercial Performance and Risk Board was established during December 2022, that builds on the work of the Ukraine Costs and Risk Cell.

The Board's activity includes greater focus on establishing a clear procurement pipeline as this will aid improved planning of future procurements and will also help to prepare the council for the future as publishing a procurement pipeline will be a legal requirement under the new UK and Welsh Procurement legislation expected to come into force in FY23/24.

- IV. In December 2022, the Authority introduced a new Financial Risk Management regime of Council's suppliers. This includes working with services to address suppliers with a poor financial risk status identified by Dunn & Bradstreet reporting and agree mitigations.
- V. In response to concerns raised by Audit Wales in its Follow-up Review of Arrangements for Corporate Safeguarding – Powys County Council report, a number of actions have been taken by the Council to address the report's recommendations and strengthen the Council's safeguarding arrangements:
- A Safeguarding Audit Tool has been developed and integrated into the Annual Service Self-Assessment Workbook to ensure that all services are aware of and in compliance with safeguarding policy and procedures.
  - A safeguarding information page has been created within the staff intranet to provide centralised resources which include:
    - Guidance to the responsibilities of staff and councillors
    - Contact details for reporting safeguarding concerns
    - The Council's Corporate Safeguarding Policy including a summary of the policy
    - Governance information
  - The Council has reviewed the need to have two Disclosure and Barring Service policies and from January 2023 onwards has ensured that one comprehensive policy has been in place.
  - A policy to provide central guidance on the recruitment of volunteers is currently under development and following the normal governance processes should be in place by May 2023.
- VI. The risk appetite definition for the Council is the amount and type of planned risk we are willing to take to meet strategic objectives and deliver services.

Risk appetite can and will vary across levels of service, based on a number of factors including knowledge, understanding, and past experience. Risk appetite will change over time and can also vary between different types of risks and events. The Authority's Risk Appetite Statement was agreed by Cabinet on the 7<sup>th</sup> March 2023 and will be included into future Risk Policy and Guidance that is due to be reviewed by Cabinet on the 11<sup>th</sup> July 2023. The Risk Appetite Statement is to be reviewed annually, while the Risk Policy and Guidance is reviewed at 3 yearly intervals, following the release of new risk management legislation or following audit review.

- VII. A Tree Management Strategy is in development with a formal adoption expected during 2023/24.
- VIII. Heads of Service and Executive Directors attend Governance and Audit Committee to discuss their specific risks and mitigations when requested.

## **F2. How do we ensure that our systems for managing risk are fit for purpose?**

During 2022-23, the ways in which we have ensured that our systems are fit for purpose have included:

- I. The Risk Management Policy and Guidance has been reviewed in draft during 2022 and is intended to go to Cabinet for sign off by the 11 July 2023.

## **F3. How do we manage data?**

- I. The Corporate Information Governance Group (CIGG) met 3 times during 2022-23. The meetings are chaired by the Senior Information Risk Owner (SIRO) and would normally take place quarterly.
- II. Additionally, 7 Corporate Information Operational Group Governance (CIOG) meetings have taken place, involving representatives of the Information Asset Owners (IAOs), to discuss and monitor IG matters and measurements and to carry out work activities as directed by the CIGG. These meetings take place every 6 weeks.



- III. The Council has in place an Information Governance framework made up of the policies, groups, training, processes and agreements that are currently in place. The areas of control covered by the framework include:
- Management of Information Governance
  - Information Risk Management
  - Information Assurance (including confidentiality, integrity, and availability)
  - Information Compliance (e.g., Data Protection and access to information legislation)
  - Information Quality Assurance
  - Records Management (irrespective of medium)
  - Information Sharing
- IV. The actions required to fulfil the requirements of the IG Framework are set out in the Information Management, Assurance, and Governance (IMAG) Plan and reviewed at two-yearly intervals. The 2021-2023 IMAG plan was agreed by the Corporate Information Governance Group (CIGG) in March 2021. It was agreed that due to the pressure on Directors and Heads of Service at that time, revised planning for 2023 – 2025 should be delayed until June 2023. As of the 31<sup>st</sup> March 2023 there were 61 elements to the plan and 31 had been completed (51%), including:
- the implementation of a revised publication scheme and revised web pages, explaining to the public what information is available from the Council
  - A Cyber Security Incident response exercise being undertaken.
  - Publication of a policy regarding the Council's use of special category personal data.
  - Revision of the Council's policy on Regulation of Investigatory Powers. (RIPA)
- 23 were in progress and still within the revised timescales for the 23-25 plan (38%) and 7 were out of timescales (11%).
- V. The compliance rate for the authority's mandatory staff Cyber Security and GDPR training ranged from 71% - 76.8% (target 95%) over the year and was 74.8% in March 2023.
- VI. 38 recommendations for improved compliance with Data protection legislation have been received from the Information Commissioner (*April to Feb 2023*),

33 of which had been implemented as of April 2023. 1 outstanding recommendation will form part of the forthcoming work on Information management. Some recommendations are service specific and others at an organisational level. This information will be used to develop the annual improvement plan.

- VII. In response to **Audit Wales Review of the PCC Planning Service** (recommendation h) assure that the Planning Service has robust data quality arrangements to ensure that it reports accurate performance data so that staff, Members, Welsh Government and the public can place reliance on its integrity to make accurate and informed decisions), actions taken since the report was published include:
- a. Protocol for inputting planning enforcement data into Planning ICT system (Idox) has been developed and communicated to the Development Management team.
- VIII. Regulations of Investigatory Powers (RIPA) Inspection; recommendations received included the need to revise the Council’s RIPA policy (completed), RIPA training (completed), correct recording of authorisations required (completed through training, and policy), undertaking of a review, retention, and destruction activity (not yet completed as of April 2023).
- IX. Given the amount of personal data handled by Service Areas, it is realistic to acknowledge that human errors will occur and may result in a personal data breach. The Council has robust reporting and management processes in place, which continue to ensure swift containment action, informed identification of information risks and mitigation, and supports relevant reporting obligations, to both the regulator and data subjects.
- X. During 2022/23, there were 267 information security incidents and 5 personal data breaches reported to the ICO (2% of information security incidents). The table below provides details of incidents and personal data breaches, and comparison data from last year.

	2021/2022	2022/2023
Numbers of reported incidents	263	267

Number of personal data breaches <sup>4</sup>	149	166
Number of incidents reported to the ICO	11	5
Number of notifications to data subjects	0	2
Number of separate complaints made to the ICO over personal data breaches	4	0
Number of DPA breaches occurring externally	90	116
Number of DPA breaches occurring internally	57	45
Number of DPA breaches involving special category data	43	42
Number of DPA breaches contained	126	131

- XI. There has been an increase of 1.5% in the numbers of information security incidents reported but an increase of 11% of those identified as a personal data breach. However there has been a decrease of personal data breaches reported to the ICO, and no complaints received directly from the ICO. Two personal data breaches reported to the Information Commissioner are being questioned in more detail before a decision is made on any potential regulatory action.
- XII. The ICO has provided 24 recommendations within their decision notices. At this time, 22 have been implemented, and 2 are still in progress. 3 recommendations are still open from previous years and will form part of wider pieces of IMAG planned activities.
- XIII. In May 2022, Bob's Business, a consulting firm engaged to carry out Phishing simulation and training activities across Welsh local authorities, reported that as a result of their work with PCC staff, the vulnerability of the Council to phishing attacks had been reduced from 13.2% to 6.8%, a decrease of 48.5%. The report also stated that PCC had the '3rd lowest opening baseline, and 5th lowest closing baseline phishing rate of all Welsh Government organisations'. Phishing remains one of the biggest Cyber Security threats to any organisation and is the root cause of most Cyber Security incidents so further training and awareness will be continued during 2023.

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<sup>4</sup> using the definition of a personal data breach within the UKGDPR. A personal data breach is a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to, personal data transmitted, stored or otherwise processed in connection with the provision of a public electronic communications service.

- XIV. One of the Council's major suppliers was affected by a cyber security Incident which caused them to take some of their applications offline for a considerable length of time this year, resulting in loss of access to systems by Council staff. As a result, work is underway to embed a supplier security assessment process and to look into strengthening supplier contracts in regard to Security Protocols.
- XV. Quarterly Cyber Resilience reports are presented to the Executive Management team, highlighting achievements, plans, issues and risks over the previous quarter.
- XVI. In January 2023 the Council began the process to recertify their Cyber Essentials Plus and IASME Gold accreditations for the 4th year. As Cyber Essentials certification run on a 3-year renewal cycle, the 4th year is a more intense review.

#### **F4. How do we ensure that we manage public money well?**

- I. SWAP Fraud Risk Assessment
- II. In March 2023, Cabinet reviewed and approved the [Housing Revenue Account \(HRA\) Thirty Year Financial Business Plan 2023-24](#). The Economy, Residents and Communities Scrutiny Committee and Tenants Scrutiny Panel provided feedback that found the HRA Business Plan to be robust and thorough but expressed concerns at how the Council could meet the raising level of demand. The Scrutiny Committee's recommendations were accepted and a response provided that indicated that the Cabinet considered the target to build 311 new homes by 2027/28 to be realistic and achievable but would be prepared to look again at increasing this target in twelve to eighteen months.
- III. PCC promote and develop a strong "antifraud" culture, raise awareness and provide information on its counter-fraud work. This includes regular reporting to S151 Officer and G&A committee, a fraud awareness e-learning tool for all staff, delivering mandatory fraud training to Officers and Members, and undertaking proactive fraud detection work and investigations. SWAP Audit and CAFT will work with managers and policy makers to ensure new and existing systems, procedures and policy initiatives consider any fraud risks

and that anti-fraud controls are built in. Fraud trends will be monitored and Fraud Risk is recorded on the Risk Register, maintained and routinely updated to identify areas of new or existing fraud exposure meaning that preventive and detective measures can then be taken.

IV. The Authority's Financial Services ensures that its workforce are suitably trained and encourages continuing professional development for members of staff, including:

- Junior staff are encouraged to complete AAT (a 3 year course) alongside work experience, generally after a number of years they progress to accountancy technician posts. We always have staff undertaking professional accountancy qualifications (3 year course) to be ready to step into Finance Business Partner roles and more senior roles including that of Section 151 officer.
- 2 staff in I&A proposed for ILM5 this year and one member of staff in final stage of IRRV tech, and two further officers mid-way through the IRRV tech qualification.
- Pensions have two staff who have recently joined the team and will commence their professional pension qualifications in September 2023. The remaining 12 already have at least one professional pension qualification or are working towards one. Training is continuous and encouraged. One team member achieved CIPP Foundation Degree Year Two and one achieved Foundation Degree Year 3. \$ staff are ongoing towards the CIPP Foundation Certificate in Pensions Administration.
  
- Commercial Services - Officers' training needs are identified through the Appraisal process and subject to available funding. Training undertaken by the team includes:
  - 3 Officers have undertaken CIPS Diploma (Level 6 qualification) 1 complete, 2 WIP. (Welsh Gov funded)
  - 1 Officer is undertaking ILM7 training & 2 officers at ILM4. (Welsh Gov funded)

- 10 Officers have completed the Government Commercial College Contract Management Foundation Training (2 outstanding as focused on ILM training) (Cabinet Office funded).
  - 3 Officers have undertaken CIPFA Tender Evaluation Strategy Training.
- V. Commercial Services have introduced a monthly Commercial Dashboard to highlight and promote performance management on Commercial activity across the Council. This provides a clear picture of commercial performance throughout the Authority and any actions underway to manage supply chain risks.
- VI. Members of the Audit Committee and other Council Members underwent training in November 2021 and February 2022 for treasury management. No finance and budget training was carried out last year but Members were, as usual, given the opportunity to attend seminars on the budget during the latter part of 2021.
- VII. The Authority's Finance service continues to be significantly impacted administering the numerous schemes in place to support individuals, businesses and specific groups, in particular with regards to the cost of living crisis (in particular, the Cost of Living Scheme, Discretionary Cost of Living scheme, and Winter Fuel payments).
- VIII. The annual Budget Survey was undertaken in ? to provide insight into resident opinion regarding PCC's funding priorities.
- IX. A Procurement Strategy has been endorsed by EMT and Cabinet and an action plan incorporating the strategy, Climate Change, and our IBP commitments has been drafted and will be communicated in April.
- X. A [School Meal Debt Audit](#) undertaken in March 2023 reached the following conclusions:

Assurance opinion: Reasonable (Low) - There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.

#### Risks Reviewed:

1. A lack of policies and procedural guidance results in school meal debt accumulating and not being collected or monitored – Priority: High
2. Free school meals are offered incorrectly resulting in financial loss to the authority – Priority: Medium

#### Recommendations:

1. School Meal Debt chasing process review in line with new cashless system including checking of debts for FSM pupils.
2. Policy and process reviewed and implemented around School Meal Debt Write off.
3. Staff Debt be claimed back through salaries and included in the updated policy including staff leaver debt.
4. Process for debts transferring to the new cashless system, monitoring of debts and recovery of debts post- transfer.

#### Actions identified:

Policy and process to be updated

Staff debt claimed back through their salaries

### **F5. How do we manage our physical assets?**

I. A Strategic Asset Management Review is underway to ensure that the Council has a robust and affordable Capital and Treasury Management Strategy

#### **Summary/Assurance**

The Council is able to offer **?** assurance that the Council's arrangements adequately reflect the principles of good governance as set out in Core Principle F: Managing risks and performance through robust internal control and strong public financial management.

Principle G: Implementing good practices in transparency, reporting, and audit to deliver effective accountability

Actions that were identified for further development during 2022/23:

- 

**G1. How do we ensure that we are open and accountable with our stakeholders?**

- I. The Council's Constitution sets out how the Council operates and the process for policy and decision making. Within this framework, decisions are taken by Council, Cabinet, individual Cabinet Members and Officers. Certain specific decisions are taken by the Planning, Taxi Licensing and Rights of Way Committee, The Licensing Act 2003 Committee, Pensions and Investment Committee and the Employment and Appeals Committee.
- II. The Authority's compliments and complaints procedure allows complaints to be escalated and investigated independently of the service concerned. Work is being undertaken to redevelop the Corporate Complaints system to:
  - Enable the recording of extracted learning from the complaint by the Investigation Officers (estimated completion early Summer 2023).



- Enable the recording of recommendations, and the implementation of such to prevent similar complaints (estimated completion Autumn 2023).
  - Develop new reporting mechanisms for Service Areas.
- III. During the period 2022-23, the following response rates were recorded for requests for information:
- a. 1093 requests for information were dealt with across the three legislations (a slight decrease by 16 from last year's figure).
  - b. Freedom of Information requests compliance 84% (this figure has remained at 84% since 2020-2021).
  - c. Environmental Information Regulations compliance 84% (a fall from 90% in 2021-2022).
  - d. GDPR compliance was 57% in 2022/23 ( this was 63% in 2021/22).
  - e. 92% of non-compliance was a result of service area delay (potential compliance rate without service area delay is 98.60%).
- IV. The deterioration in compliance rates for FOI and EIR requests can be attributed to:
- An increased number of instances where delays were experienced in obtaining information to enable a response to the FOI /EIR request to be issued.
  - Information Compliance Officers carrying out more IG related activities as part of their role.
  - The efforts taken to ensure the number of SARs outstanding are managed even if not responded to within timescales and that backlogs don't build.
- V. Some information requests, in particular Subject Access Requests, have been complex or lengthy resulting in levels of non-compliance with statutory timescales. 68 requests received, with 61% compliance rate. (ICO target 90%).

- VI. The Authority's [Publication Scheme](#) became available in March 2023 with a remit to make information readily available at minimum inconvenience and cost to the public.
- VII. The Budget Books and Statement of Accounts for 2022/23 has been published to the Council's public website.
- VIII. 80% of Powys County Council's national strategic planning and performance monitoring statutory deliverables met the submission deadline.
- IX. During 2022/23, 37 engagement and consultation activities were undertaken to engage residents and staff.

**G2. How do we reflect good practice in our reporting?**

I. An Annual Governance Statement Framework has been drafted and the AGS process has been revised to strengthen and formalise the process underpinning the drafting and authorisation of the report. Changes made to the process were agreed on the 20<sup>th</sup> January 2023 and include:

- The mechanism for obtaining the relevant information from services has been formally aligned with that of the Corporate Self-Assessment in order to maximise value and ensure a more comprehensive representation of service activity in the AGS.
- The draft AGS Framework describes the Key evidence sources (both existing and aspirational for future development) that underpin the report annually.
- Responsible officers have been assigned to have oversight for specific areas of governance and provide their assessment of assurance for the Authority's performance in the following areas:

<b>Responsible Officer</b>	<b>Area of Assurance</b>
Monitoring Officer	Operating within the rule of the law and constitutional arrangements including the member code of conduct
Head of Workforce and Organisation Development	Human resources arrangements and policies
Section 151 Officer	Finance matters

Health and Safety Manager	Health and Safety matters
Lead on Procurement	Procurement
Senior Information Risk Owner	Information Governance and Complaints
Director of Corporate Services	Policy, Strategy and Resources
Director of Social Services and Housing	Safeguarding

- A rubric, (shown below), has been adopted to support the Executive Management Team and Responsible Officers in assessing the levels of assurance to be recorded:

	None	Partial	Reasonable	Substantial
Controls	Significant concerns regarding adequacy of controls in place	Many controls are in place but coverage is inconsistent/unclear	Controls are not in place to cover some risks	Controls in place
Review	No cyclical review is taking place	Cyclical review is taking place in most areas but not all. Level of detail is inconsistent.	Assurance is not cyclically performed in all areas/not sufficiently detailed	Detailed cyclical review
Governance evidence	The evidence presented does not reduce risks	The evidence presented reduces risks to an agreed (but not necessarily desired) level	The evidence presented reduces risks to an acceptable level	The evidence presented reduces risks to a low level
Risk	Key risks are not adequately mitigated	Key risks are adequately Mitigated	Risk is adequately Mitigated	Risk is adequately Mitigated
Policy	Significant gaps exist in policy	Policies in some areas are not in place, not appropriate/fit for purpose	Policies are generally in place as required but not communicated	Policies in Place and Communicated
Automation of Controls	Significant concerns exist regarding efficacy of manual controls	Concerns exist regarding efficacy of manual controls	Manual controls are present, work well but are not automated	ICT Tools are being used to automate controls and report red flagged transactions
Business Planning	Business Planning not monitored	Business Planning monitored but inconsistent	Business Planning monitored adequately	Business Planning closely monitored

### **G3. How do we provide assurance and effective accountability for our actions?**

- I. In addition to the self-assessment undertaken yearly by the Authority's services, the Scrutiny Committees and Governance and Audit Committee also complete an annual Self-Assessment Workbook to evaluate their performance and progress during the previous financial year. Following Self-Assessment, an action plan has been developed by each of the committees to shape improvement work over the coming year.
  
- II. A recurrent theme raised by the Scrutiny Committees during the Self-Assessment process was that of the quantity of information submitted for their attention and the difficulty of adequately digesting large reports. In response, a covering Pro Forma has been introduced to be completed by Service Areas for committee guidance.

- III. The Scrutiny Committees felt that in general, their work had been slow to gain momentum last year, largely as a result of the change in membership following the local elections in May 2022. New members have required training and in some cases were new to their position as both an Elected Member and as a Committee Member.
- IV. The Governance and Audit Committee felt that its work started slowly early in the year (influenced by pressure and capacity on democratic services) but that the pace has increased and that by the end of the financial year it was making an impact. There was some feeling that the nature of hybrid meetings may possibly be hindering the progress of the committee. Challenge offered to officers has increased, raising awareness of governance and therefore starting to have improved impact. Future actions planned by the Governance and Audit Committee include:
- Engagement with the Public and consideration of ways in which the Committee might achieve this
  - Quarterly feedback to be received from a representative on the Finance Panel (this is already programmed into the Forward Work Programme)
  - Committee Press Releases with consideration given to possible press release topics as part of the post-meeting reflection
  - Committee to have a pro-forma document for every report submitted to clarify purpose of report and role of the Committee
  - Scoring and Prioritisation of possible items for inclusion on the work programme
- V. The Finance Panel has undergone a change in composition since May 2022; it is politically balanced and now includes a member of the Governance and Audit Committee. A Pro Forma has been devised to enable high level feedback to G&A. Formal reports of observations and Recommendations are forwarded to Cabinet, with Cabinet having a 2-month timeframe to respond to Panel with Accept, Reject or Partially Accept. Future actions planned by the Finance Panel include:
- Panel to focus more on FRM/MTFS

- Development of a Recommendations Tracker for the Committee
- Panel to receive high level benchmarking data to compare with other local authorities
- Panel to receive training from CIPFA / Data Cymru regarding benchmarking information
- Panel to review Well-Being data resource information
- CIPFA Reports on Council delivery to be considered by Panel for information purposes
- Training for Panel on benchmarking/Budget Planning and delivery outcomes/Statutory Services, legislation and governance; what discretion is permitted and where?
- Improve Work Programme including mapping previous matters considered by the Panel

VI. During 2022-23, the Learning and Skills Scrutiny Committee has gained a number of new Members with no previous experience to provide perspective; it was noted that new members may not feel sufficiently well-informed to contribute and find it easier to speak up in a pre-meeting. Initial meetings were dominated by revisiting decisions made by the previous Administration and as a result the Committee felt that it had made a slow start. Attendance at meetings has been raised as a concern by the Chair, with regards to the political environment, as there has not been representation present from all groups. Relationships with officers are considered to be very good, with officers described as 'exceptional, responsive and willing to explain'. Future actions planned by the Learning and Skills Committee include:

- Pre-meetings to be held 2-3 days before each meeting to allow time for follow-up request for information and clarification with relevant Officers
- Meetings will be held on a set day/time, to allow better time management for members

- Working Groups are to be considered by the Committee to carry out in-depth analysis and scrutiny
- Forward Work Programme will be reviewed at 6 weekly meetings which are scheduled throughout the year by Director of Education

VII. The Health and Care Scrutiny Committee has a new committee of new members (following the 2022 election) and the Chair felt it would be worthwhile to have a series of Member Development sessions and budget familiarisation sessions for both service areas; Member development for the committee has paid off and questions have been to a challenging and robust standard. The Committee has a new Vice Chair who brings good experience and knowledge of the public sector, financial acumen and knowledge of services for young people. Committee attendance over the past year has been of concern to the Chair who has raised this with group leaders. While there has been a new Management structure put in place for the senior leadership team and a new interim head of Children's services. Engagement with scrutiny has however remained consistent and good. Future actions planned by the Health and Care Committee include:

- Briefing notes for Members on areas of service to assist Member understanding
- Further training for Members on questioning skills
- Use of pre-meetings prior to the meeting
- Regular meetings to be established between the Chair and new heads of Service
- Chair to discuss shadowing of officers with Director
- Committee will consider interaction with partners as part of work programming

VIII. Following commencement of the Audit Wales review of the Planning Service in March 2022, a Service Improvement Board was established in advance of the report in order to respond and provide support to the recommendations.

IX. Audit Wales reports received by G&A during 2022-23:

- Quarterly Programme updates
- Audit Plans
- Springing Forward Workforce Management
- Corporate Safeguarding

X. No regulatory reports were received by Finance Panel this year.

### Summary/Assurance

The Council is able to offer ? assurance that the Council's arrangements adequately reflect the principles of good governance as set out in Core Principle G:  
Implementing good practices in transparency, reporting, and audit to deliver effective accountability

<b>Responsible Officer</b>	<b>Area of Assurance</b>	<b>Assurance Level</b>	<b>Comments</b>
Monitoring Officer	Operating within the rule of the law and constitutional arrangements including the member code of conduct		
Head of Workforce and Organisation Development	Human resources arrangements and policies	Reasonable	
Section 151 Officer	Finance matters		
Health and Safety Manager	Health and Safety matters	Reasonable	
Lead on Procurement	Procurement	Reasonable	We can offer reasonable assurance; we have contract procedure rules in place (section 17 of council constitution).



			This year we have established Commercial performance and risk board made up of officers from across the council, providing oversight and assurance, and future improvements will be agreed and monitored by the board.
Senior Information Risk Owner	Information Governance and Complaints	Partial <sup>5</sup>	We can offer partial assurance that the council's arrangements adequately reflect the principles of good information governance. Some key risks are not well managed, and processes require the introduction or improvement of internal controls, and resources to ensure effective governance, but plans for future improvement are in place and are monitored by CIGG.
Director of Corporate Services	Policy, Strategy and Resources	Substantial	We can offer substantial assurance, we have a new corporate plan in place, 'Stronger, Fairer, Greener' and have established a new repository for corporate policies, trackers monitoring Audit recommendations and questions to Cabinet, as well as corporate oversight.

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<sup>5</sup> This assurance level was provided as part of the Authority's Information Governance Annual Report 2022-23 and reflects a judgement made on the basis of that report. It does not necessarily reflect the criteria shown in the rubric provided at G2 but is based on criteria specific to the IG Annual Report.

Director of Social Services and Housing	Safeguarding	Reasonable	We can offer reasonable assurance, significant progress has been made in improving corporate safeguarding governance, policies and procedures during the last 12 months. There are areas where improvements can be made, and these actions have been captured and are being regularly monitored and scrutinised by the corporate safeguarding board. Activity reports are provided to Cabinet, Health and Care scrutiny committee and Governance and Audit.
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Governance issues identified for action during 2023/24

Following on from both the Self-Assessment and Annual Governance Statement, the below action plans have been identified surrounding governance. These have been prioritised using the below matrix:

Level	Description
Critical	Failure to take action poses an immediate and severe risk
Potentially critical	Failure to take action may pose a significant risk at some point in the future
Necessary	Action is required to ensure that compliance is maintained
Recommended	Action would deliver best practice but is additional to normal standards of practice
Not urgent	May be addressed in the future but is not currently being considered – potentially aspirational

Issue	Priority	Responsible Officer

Certification of the Annual Governance Statement 2021-2022

Signed on behalf of Powys County Council:

Chief Executive

Leader of the Council

Date:

Date:

## Appendix A: Consultation and Engagement Powys County Council Engagement Reporting 2022-23

(The below figures include both English and Welsh hub sites/engagement projects)

### Powys County Council Engagement Reporting 2022-23

(The below figures include both English and Welsh hub sites/engagement projects)

#### EXTERNAL ENGAGEMENT

Quarter	External PCC Surveys	External Visitors	External Engaged Participants <sup>6</sup>	Have opportunities to have their say and participate in decision-making <sup>7</sup>	Speak positively about the Council <sup>8</sup>	New Membership of Powys People's Panel (22/23 starting figure is 2,814)
1	6	2,925	751	6%	16%	451
2	11	10,591	1,766	21%	21%	194
3	11	7,721	1,467	14%	17%	488
4	7	2,820	447	0%	0%	542

<sup>6</sup> Number of people who have engaged (taken part) in external engagement and consultation activities

<sup>7</sup> % of people (responding to our ongoing engagement project) that are satisfied or very satisfied that they have opportunities to have their say and participate in the Council's decision-making processes

<sup>8</sup> % of people (responding to our ongoing engagement project) that speak positively about the Council (with or without being asked)

<b>TOTAL</b>	<b>34</b>	<b>24,057</b>	<b>4,431</b>	<b>Average: 10.25%</b>	<b>Average: 13.5%</b>	<b>1,675</b>
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**INTERNAL ONLY ENGAGEMENT**

<b>Quarter</b>	<b>Internal PCC Surveys</b>	<b>Internal Visitors</b>	<b>Internal Engaged Participants</b>
1	1	278	163
2	0	0	0
3	2	655	400
4	0	0	0
<b>TOTAL</b>	<b>3</b>	<b>933</b>	<b>563</b>

**Breakdown of engagement projects by quarter:**

**QUARTER 1**

<b>Internal or External</b>	<b>Name of project</b>	<b>Date</b>	<b>Background</b>	<b>Number of responses</b>	<b>Outcome/Latest update</b>
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External	Performance Feedback Ongoing Engagement Project	01/04/22 to 30/06/22	<p>Welsh Government requires councils to keep under review the extent to which they are fulfilling the ‘performance requirements’, that is, the extent to which:</p> <ul style="list-style-type: none"> <li>• they are exercising its functions effectively</li> <li>• they are using resources economically, efficiently, and effectively</li> <li>• the governance is effective for securing the above.</li> </ul> <p>To fulfil this requirement an ongoing engagement exercise was proposed to (and approved by) Cabinet to gather views from the local community which will be reported on quarterly and included as part of the council’s performance self-assessment work.</p>	<p><b>Up to 30/06/22:</b></p> <ul style="list-style-type: none"> <li>• 70 survey responses</li> <li>• 5 questions asked</li> <li>• 26 ideas submitted</li> <li>• 6% are satisfied or very satisfied that they have opportunities to have their say and participate in the Council’s decision-making processes</li> </ul>	<p>Quarterly data included with engagement information in cabinet report:</p> <ul style="list-style-type: none"> <li>• % of people that are satisfied or very satisfied that they have opportunities to have their say and participate in the Council’s decision-making processes</li> <li>• % of people that speak positively about the Council (with or without being asked)</li> </ul> <p>Full report including verbatim open comments, ideas and Q&amp;A is also sent with the high-level figures.</p>
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				<ul style="list-style-type: none"> <li>16% speak positively about the Council (with or without being asked)</li> </ul>	
<b>External</b>	<b>RPB Market Stability Report</b>	22/04/22 to 31/05/22	An Regional Partnership Board Exercise to support the development of a Powys Market Stability Report (MSR) on the sufficiency and stability of non-regulated provision in Powys e.g. 'step down' and prevention services, of which Powys' third sector is a major provider.	12 responses	The Powys Regional Partnership Board (RPB) have prepared the <a href="#">Powys Market Stability Report</a> as required by the Social Services and Wellbeing (Wales) Act 2014 in July 2022.
<b>External</b>	<b>The Development of Community Hubs in Powys Libraries -</b>	23/05/22 to 30/06/22	Powys Library Service research into how they could support residents to access digital technology and services, through the development of community	401 responses	Report of findings compiled and sent to UKCRF Digital Hub Project Officer

	<b>Access to Services and Digital Exclusion Survey</b>		<p>hubs providing support and space to work remotely.</p> <p>This survey was to assess how easy or difficult it is for people to access key services and information and whether we can make things easier by developing “digital inclusion hubs” based in local libraries.</p>		
<b>External</b>	<b>The Development of Community Hubs in Powys Libraries - Digital Hub Workspaces Survey</b>	23/05/22 to 30/06/22	<p>Powys Library Service research into how they could support residents to access digital technology and services, through the development of community hubs providing support and space to work remotely.</p> <p>This survey was to look into the possibility of developing workspaces within public libraries aimed at people who might</p>	111 responses	Report of findings compiled and sent to UKCRF Digital Hub Project Officer



			currently be working from home or those considering starting a small business.		
<b>Internal</b>	<b>Governor Questionnaire 2022</b>	06/06/22 to 30/06/22	School Governors and Clerks to the Governors were invited to complete an online survey, asking for their views on training, briefing sessions, and the Governors' Bulletin.	<b>163 responses</b>	Report of findings compiled and sent to Principal Officer – Governor Support
<b>External</b>	<b>Shared Prosperity Fund</b>	10/06/22 to 19/06/22	The UKSPF is the main source of funding being made available to replace the European Regional Development Fund and European Social Fund that are no longer available following the UK's withdrawal from the European Union, though it is not a direct like-for-like replacement. The UKSPF is a 3 year fund, that is predominantly revenue.	176 responses	Ceredigion and Powys were required to work together to develop a Regional Investment Plan for submission to UK Government by 1 August 2022.  The report was presented to both Ceredigion and Powys County Council's Cabinets where members approved the governance and management

			<p>This consultation invited the views of everyone with an interest in helping to decide how the UK SPF should be used over the next three years.</p>		<p>arrangements for the Mid Wales allocation of the fund. Confirmation has since been received from UK Government that the investment plan has been approved.</p> <p>More information, including the Plan, can be found on the Mid Wales Regional Investment Plan for the UK Shared Prosperity Fund 2022-25 page on our website <a href="#">Mid Wales Regional Investment Plan</a>.</p>
<b>External</b>	<b>Sport Powys – It’s your move</b>	26/06/22 to 09/09/22		1,128 responses	Report of findings compiled and sent to Physical Activity Engagement and Project Support Officer

**QUARTER 2**

Internal or External	Name of project	Date	Background	Number of responses	Outcome/Latest update
<b>External</b>	<b>Performance Feedback Ongoing Engagement Project</b>	01/07/22 to 30/09/22	<p>Welsh Government requires councils to keep under review the extent to which they are fulfilling the 'performance requirements', that is, the extent to which:</p> <ul style="list-style-type: none"> <li>• they are exercising its functions effectively</li> <li>• they are using resources economically, efficiently, and effectively</li> </ul>	<p><b>Up to 30/09/22:</b></p> <ul style="list-style-type: none"> <li>• 100 survey responses</li> <li>• 11 questions asked</li> <li>• 14 ideas submitted</li> <li>• 21% are satisfied or very satisfied that they have opportunities to have their say and participate in the Council's decision-</li> </ul>	<p>Quarterly data included with engagement information in cabinet report:</p> <ul style="list-style-type: none"> <li>• % of people that are satisfied or very satisfied that they have opportunities to have their say and participate in the Council's decision-making processes</li> <li>• % of people that speak positively about the Council (with or without being asked)</li> </ul> <p>Full report including verbatim open comments, ideas and Q&amp;A is also sent with the high-level figures.</p>

			<ul style="list-style-type: none"> <li>the governance is effective for securing the above.</li> </ul> <p>To fulfil this requirement an ongoing engagement exercise was proposed to (and approved by) Cabinet to gather views from the local community which will be reported on quarterly and included as part of the council's performance self-assessment work.</p>	<p>making processes</p> <ul style="list-style-type: none"> <li>21% speak positively about the Council (with or without being asked)</li> </ul>	
<b>External</b>	<b>Hackney Carriage Tariffs</b>	08/07/22 to 22/07/22	Powys County Council proposed an increase in the tariffs after receiving requests from the county's Hackney	Unknown (Hosted a link on our engagement hub to the	Any objections during the 14day period were asked to be sent directly to the Licensing Team Manager

			<p>Carriage Vehicle operators.</p> <p>A consultation exercise was held with Powys Licensed Taxi Drivers back in the Spring, with 31 out of the 33 responses in favour of increased tariffs.</p> <p>Currently, the Powys two-mile tariff equates to £5.40, but the proposal is to increase the tariff to £6.</p>	<p>corresponding <a href="#">media release</a>)</p>	
<b>External</b>	<b>Employment and Skills Survey</b>	25/07/22 to 09/09/22	<p>Regional Skills Partnerships (RSPs) were developing new 3-year Employment and Skills Plans (2022-25) which were likely to be</p>	68 responses	<p>A Grow - Define - Deliver Together engagement event was hosted by the Mid Wales Regional Skills Partnership in March 2023 where the Mid Wales Regional Skills Partnership Employment and Skills Plan 2022-2025 was officially launched.</p>

			launched in the Autumn. Information gathered through this survey, and our wider engagement with stakeholders, was used to help inform respective Employment and Skills Plans		You can view the Employment and Skills plan on the Growing Mid Wales website: <a href="http://www.growingmid.wales/midwalesskillspartnership">www.growingmid.wales/midwalesskillspartnership</a>
<b>External</b>	<b>Royal Welsh Show Week Safety Measures</b>	08/08/22 to 31/08/22	Residents of Builth Wells and visitors to the Royal Welsh Show were asked to take part in a survey and give their views on the safety measures that were in place.	206 responses	Report of findings compiled and shared with the Builth Wells Events Safety Group
<b>External</b>	<b>Machynlleth Street Trees Consultation</b>	15/08/22 to 16/09/22	An engagement exercise to gauge local opinion of proposals to improve the conditions of the street trees along	138 responses	Following the engagement exercise and the subsequent removal of some of the existing trees, works to begin improving the conditions of the remaining and the planned new street trees

			Heol Maengwyn (A489), Penrallt St and Pentrehedyn St (A487), and the additional planting of a further 12 trees within Machynlleth town centre		along Heol Maengwyn (A489), Penrallt St and Pentrehedyn St (A487) began on 6 March 2023. Work will also include improving the street surfaces and the planting conditions of the remaining trees as well as creating underground planting pits for the 27 new trees which will be planted in the autumn.
<b>External</b>	<b>The future of our town centres - Brecon</b>	22/08/22 to 16/10/22	Working together with Amey Consulting and LDA Design, Powys County Council were keen to hear the thoughts, experiences and concerns of local people, businesses and visitors on how they use the town centres and how they could be improved.	Unknown (Hosted a link on our engagement hub to a third-party survey)	A drop-in session for the final phase of the consultation aimed at improving the public spaces within Brecon town centre, took place on Wednesday 2 November, at Y Gaer, Brecon.  Along with representatives from the council, Amey Consulting and LDA Design, Accessibility Powys will also attended to ensure everyone was able to effectively take part in this final part of the consultation and that every consideration was made to ensure future plans for the town are accessible to all, especially those with mobility issues.

			In Brecon the focus is on improving pedestrian priority and experience, improving connections and biodiversity and creating a safe, accessible public areas that enhances the unique qualities of the town along the length of the High Street; including the Struet, High Street Superior, High Street Inferior and the Bulwark.		
<b>External</b>	<b>The future of our town centres - Crickhowell</b>	22/08/22 to 16/10/22	Working together with Amey Consulting and LDA Design, Powys County Council were keen to hear the thoughts, experiences	Unknown (Hosted a link on our engagement hub to a third-party survey)	A drop-in event was held in Crickhowell was very well attended, with some excellent feedback gained for the consultation process regarding the future of Crickhowell town centre.



			<p>and concerns of local people, businesses and visitors on how they use the town centres and how they could be improved.</p> <p>In Crickhowell, the focus is on improving pedestrian priority and experience, considering drainage issues, and enhancing identity along the length of the High Street.</p>		
<b>External</b>	<b>Electric Vehicle Charging Points</b>	26/08/22 to 16/10/22	The survey was conducted by Atkins on behalf of the Council to directly inform the development of the Council's Electric	21 responses	Report of findings compiled and shared with Senior Consultant – Atkins

			Vehicle Charging Strategy. The aim of this strategy is to provide direction in the deployment of charging infrastructure across the county. This will enable the adoption of electric vehicles for residents and visitors, whilst ensuring the most efficient deployment of on-street infrastructure.		
<b>External</b>	<b>LDP Plan</b>	05/09/22 to 10/10/22	A framework to assess potential development sites has been prepared, called the Candidate Sites Assessment Methodology, which will be used to help	Unknown (Hosted a link on our engagement hub to a third-party survey)	In November 2022, the council will call for potential development sites, as well as sites which can be utilised for other needs such as green infrastructure, which will be collectively known as Candidate Sites, to be submitted for consideration.

			determine which sites are most suitable for development.		The framework will be used to consider whether these Candidate Sites are in an appropriate location, are likely to come forward within the next 15 years and are likely to be viable.
<b>External</b>	<b>Draft Public Participation Strategy</b>	21/09/22 to 18/12/22	<p>The Local Government and Elections (Wales) Act 2021 requires all local authorities to prepare a Public Participation Strategy setting out how they will encourage local people to participate in decision-making.</p> <p>Our drafted strategy (which has been prepared in accordance with Welsh Government guidance) sets out the vision for public</p>	119 responses	<p>In February 2023, the <a href="#">Democratic Services Committee considered the consultation report</a>, and the updated strategy document, and gave the go-ahead for it to be published.</p> <p>The strategy is available online here: <a href="https://www.haveyoursaypowys.wales/hub-page/pps2023">https://www.haveyoursaypowys.wales/hub-page/pps2023</a></p>

			participation over the next three years.		
<b>External</b>	<b>Assessing the viability of establishing Welsh-medium provision in Dolau, near Llandrindod</b>	29/09/22 to 06/10/22	Powys County Council has investigated the viability of establishing Welsh-medium education in the current Llanfihangel Rhydithon C.P. School building in Dolau near Llandrindod Wells.		Based on the findings of the work, the advice of officers is that establishing Welsh-medium provision in Dolau is not viable.  The viability study and the questionnaire findings were reviewed by the Welsh Medium Education Forum (WMEF) on Monday, 12th December and by the council's Learning and Skills Scrutiny Committee on Wednesday, December 14 before being considered by Cabinet on Tuesday, 20th December.

**QUARTER 3**

Internal or External	Name of project	Date	Background	Number of responses	Outcome/Latest update
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External	<b>Performance Feedback Ongoing Engagement Project</b>	01/10/22 to 31/12/22	<p>Welsh Government requires councils to keep under review the extent to which they are fulfilling the 'performance requirements', that is, the extent to which:</p> <ul style="list-style-type: none"> <li>• they are exercising its functions effectively</li> <li>• they are using resources economically, efficiently, and effectively</li> <li>• the governance is effective for securing the above.</li> </ul>	<p><b>Up to 31/12/22:</b></p> <ul style="list-style-type: none"> <li>• 89 survey responses</li> <li>• 13 questions asked</li> <li>• 9 ideas submitted</li> <li>• 14% are satisfied or very satisfied that they have opportunities to have their say and participate in the Council's decision-making processes</li> <li>• 17% speak positively about the Council (with or without being asked)</li> </ul>	<p>Quarterly data included with engagement information in cabinet report:</p> <ul style="list-style-type: none"> <li>• % of people that are satisfied or very satisfied that they have opportunities to have their say and participate in the Council's decision-making processes</li> <li>• % of people that speak positively about the Council (with or without being asked)</li> </ul> <p>Full report including verbatim open comments, ideas and Q&amp;A is also sent with the high-level figures.</p>
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			To fulfil this requirement an ongoing engagement exercise was proposed to (and approved by) Cabinet to gather views from the local community which will be reported on quarterly and included as part of the council's performance self-assessment work.		
<b>External</b>	<b>Home to School Transport</b>	12/10/22 to 01/12/22	The consultation was published on Powys County Council's main website and all schools, governing bodies, and local members were informed.	Unknown (Hosted a link on our engagement hub to a third-party survey)	Survey and reporting undertaken by the Transforming Education Team

<b>External</b>	<b>Area review of education in the Crickhowell catchment</b>	13/10/22 to 10/11/22	An area review of education in the Crickhowell catchment to identify how education will be delivered in the catchment in the future.	228 responses	After the 4 week survey period ended, the Council prepared a report outlining the feedback received, and will develop a paper on the preferred way forward for the catchment, which will be considered by the Council's Cabinet early in 2023. <a href="#">Crickhowell education catchment area completed</a> <a href="#">Crickhowell Area Review Engagement Report</a>
<b>Internal</b>	<b>Staff recruitment and retention survey – Why Powys?</b>	27/10/22 to 13/11/22	Personal staff experiences can help us better understand what is important, as well as help us celebrate the things we do well or to help us reflect on the	385 responses	Results from the survey will be used to inform future work such as the workforce strategy, improving our recruitment and retention, as well as better embedding your values in our work.

			things we can improve on.		
<b>External</b>	<b>Your Big Ideas for Powys</b>	27/10/22 to 13/11/22	A joint PSB/RPB partnership engagement to help to decide on the big issues that partner organisations in Powys should focus on over the next five years. One simple question: “What is your top priority for improving the wellbeing, care and support of people in Powys over the next five years and beyond?”	62 responses	The feedback will help Partners develop the draft Well-being Plan and Area Plan.



<b>Internal</b>	<b>School Funding Formula Review</b>	22/11/22 to 13/12/22	In order to ensure that the Powys Scheme for Financing Schools (the Scheme) and the Schools Funding Formulae remain fit for purpose and continue to meet the needs of Powys County Council and its Schools, both the Scheme and the formulae need to be reviewed periodically. This would include reviewing the underlying principles, educational model and the cost of delivery. The Council	15 responses	January 2023 - Cabinet considered changes to the School Funding Formula for mainstream Secondary, All-age and Special Schools, the pupil movement policy and revisions to the Powys Scheme for Financing Schools. The proposals had been developed by the Formula Review Group which comprised a range of stakeholders, including headteachers and chairs of governors from each school sector, along with Council officers.  <a href="#">More detailed information on Cabinet decision can be found online.</a>
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			<p>will commit to consider:</p> <ul style="list-style-type: none"><li>• Educational changes, including the full implications of the new national curriculum, developments in digital learning and local education policy.</li><li>• Financial changes such as cost pressures, procurement initiatives, “invest to save” strategies etc.</li><li>• Demographic changes, in the</li></ul>		
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			<p>number of pupils, their distribution and characteristics.</p> <ul style="list-style-type: none"><li>• Structural changes relating to the organisation of school provision or in the functions delegated to schools.</li><li>• Legislative changes, particularly those affecting direct school provision and/or the education of children with additional needs.</li></ul>		
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			<p>The Schools' Budget Forum has an important role to play in advising the local authority in this matter.</p> <p>The Council must consult with all its schools on any proposed changes arising from these reviews.</p> <p>The proposals will apply to primary schools and the primary phase of all-age schools only.</p> <p>Work on reviewing the formulae for secondary schools and special schools is</p>		
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			ongoing and will align with the progression of the Strategy for Transforming Education in Powys 2020-2030.		
<b>External</b>	<b>Canals, Communities and Wellbeing Project</b>	24/11/22 to 11/01/23	<p>The focus of the Canals, Communities and Wellbeing project is to develop connections, within a corridor of 5km, along each side of the Montgomery and Monmouthshire and Brecon Canals.</p> <p>The project will be looking to increase opportunities for public access,</p>	91 responses	Report of findings compiled and shared with Project Manager

			recreation, and rural active travel, to support enhanced wellbeing.		
<b>External</b>	<b>Corporate Plan Engagement</b>	28/11/22 to 23/12/22	<p>Following the election in May, the Council needs to produce a new Corporate and Strategic Equality Plan to help the residents of Powys achieve their well-being goals. To achieve our vision, we have set the objectives below that are the core aims of the plan:</p> <ul style="list-style-type: none"> <li>We will improve people's</li> </ul>	<p>Total responses: 614 including:</p> <ul style="list-style-type: none"> <li>452 survey responses</li> <li>149 Padlet posts</li> <li>8 social media comments</li> <li>5 emails to <a href="mailto:haveyoursay@powys.gov.uk">haveyoursay@powys.gov.uk</a></li> </ul>	<p><a href="#">February 2023</a>: The Leader, the Cabinet Member for a Connected Powys and the Deputy Leader and Cabinet Member for a Fairer Powys presented the Council's new Corporate and Strategic Equality Plan: Stronger, Fairer, Greener (2023-2027). The plan was approved for publication, with implementation from 1st April 2023 considering the recommendations provided in Appendix A, based upon engagement and scrutiny activity.</p> <p><a href="#">Consultation Report</a></p>

			<p>awareness of services, and how to access them, so that they can make informed choices.</p> <ul style="list-style-type: none"><li>• We will provide good quality, sustainable employment, and training opportunities, whilst pursuing real living wage employer accreditation.</li><li>• We will work to tackle poverty and inequality to support the</li></ul>		<p>The Corporate and Strategic Equality Plan 2023-2027 is now available at <a href="https://en.powys.gov.uk/ourvision">https://en.powys.gov.uk/ourvision</a> A video introduction to the plan is <a href="#">available here.</a></p>
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			well-being of the people of Powys.		
<b>External</b>	<b>Welsh Medium Plans for Ysgol y Cribarth</b>	19/12/22 to 06/02/23	<p>Powys County Council consulted on a proposal to establish a Welsh-medium stream at Ysgol y Cribarth. The proposal was as follows:</p> <ul style="list-style-type: none"> <li>• To make a regulated alteration to formally establish a Welsh-medium stream at Ysgol y Cribarth from September 2023.</li> </ul>	53 responses	<p>Powys County Council has now published a Statutory Notice in order to proceed with the proposal.</p> <p>More information can be found <a href="#">online</a>, including the <a href="#">consultation report</a></p>
<b>External</b>	<b>Montgomery Canal - Community</b>	19/12/22 to 31/01/22	Powys County Council's Levelling up funded project to	Unknown	Survey and reporting undertaken by Miller Research, External



	<b>Survey of the Canal</b>		rejuvenate the local canal network in Montgomeryshire by opening up previously un-navigable sections of the canal to increase its appeal and attract more tourists to the region.	(Hosted a link on our engagement hub to a third-party survey)	Consultants working on behalf of the Canal and River Trust and PCC
<b>External</b>	<b>Montgomery Canal – Visitor Survey</b>	19/12/22 to 31/01/22	Powys County Council’s Levelling up funded project to rejuvenate the local canal network in Montgomeryshire by opening up previously un-navigable sections of the canal to increase its appeal	Unknown (Hosted a link on our engagement hub to a third-party survey)	Survey and reporting undertaken by Miller Research, External Consultants working on behalf of the Canal and River Trust and PCC

			and attract more tourists to the region.		
<b>External</b>	<b>Y Lanfa - User survey of the Y Lanfa building, cottages and adjoining space</b>	19/12/22 to 31/01/22	Powys County Council's Levelling up funded project to rejuvenate the local canal network in Montgomeryshire by opening up previously un-navigable sections of the canal to increase its appeal and attract more tourists to the region. The enhancement of the Y Lanfa building, its wharf and the associated listed Canal side cottages	Unknown (Hosted a link on our engagement hub to a third-party survey)	Survey and reporting undertaken by Miller Research, External Consultants working on behalf of the Canal and River Trust and PCC

			forms part of the overall project.		
<b>External</b>	<b>Budget Survey</b>	21/12/22 to 05/01/23	The budget survey happens every year and allows us to understand what our residents, businesses and communities feel is important and should be prioritised in the coming years.	75 responses	<a href="#">Consultation Report</a>  <a href="#">February 2023</a> : Council considered the draft Medium-Term Financial Strategy 2023-2028, the draft 2023-24 Budget and the Capital Programme for 2023-2028. The budget was proposed by County Councillor D Thomas, the Cabinet Member for Finance and Corporate Transformation, and seconded by the Leader County Councillor J Gibson-Watt.

**QUARTER 4**

Internal or External	Name of project	Date	Background	Number of responses	Outcome/Latest update
External	Performance Feedback Ongoing Engagement Project	04/01/22 ongoing...	<p>Welsh Government requires councils to keep under review the extent to which they are fulfilling the 'performance requirements', that is, the extent to which:</p> <ul style="list-style-type: none"> <li>• they are exercising its functions effectively</li> <li>• they are using resources economically, efficiently, and effectively</li> <li>• the governance is effective for securing the above.</li> </ul> <p>To fulfil this requirement an ongoing engagement exercise was proposed to (and approved by) Cabinet to gather views</p>	<p><b>Up to 31/03/23:</b></p> <ul style="list-style-type: none"> <li>• 3 survey responses</li> <li>• 4 questions asked</li> <li>• 4 idea submitted</li> <li>• 0% are satisfied or very satisfied that they have opportunities to have their say and participate in the Council's decision-</li> </ul>	<p>Quarterly data included with engagement information in cabinet report:</p> <ul style="list-style-type: none"> <li>• % of people that are satisfied or very satisfied that they have opportunities to have their say and participate in the Council's decision-making processes</li> <li>• % of people that speak positively about the Council (with or without being asked)</li> </ul> <p>Full report including verbatim open comments, ideas and Q&amp;A is also sent with the high-level figures.</p>

			from the local community which will be reported on quarterly and included as part of the council's performance self-assessment work.	making processes <ul style="list-style-type: none"> <li>• 0% speak positively about the Council (with or without being asked)</li> </ul>	
<b>External</b>	<b>Powys Well-being Plan Consultation</b>	27/01/23 to 19/04/23	<p>Powys Public Service Board needs to produce a new Well-being Plan to help the residents of Powys achieve their well-being goals. To achieve our ambition of a "Fair, Healthy and Sustainable Powys", we have set the objectives below that are the core aims of the plan:</p> <ul style="list-style-type: none"> <li>• People in Powys will live happy, healthy, and safe lives</li> </ul>	235 responses	<p>The new Powys Well-being Plan has been published on the Council's website on Wednesday 14 June:</p> <p><a href="https://en.powys.gov.uk/sustainability">https://en.powys.gov.uk/sustainability</a></p>

			<ul style="list-style-type: none"> <li>• Powys is a county of sustainable places and communities</li> <li>• An increasingly effective Public Service for the people of Powys</li> </ul> <p>The purpose of this engagement is to seek general feedback on the new plan objectives and the draft Well-being plan, to ensure we are prioritising the right things as a Public Service Board.</p>		
<b>External</b>	<b>Machynlleth Library and Ysgol Bro Hyddgen New Building Development</b>	01/02/23 to 28/02/23	Powys County Council has been working on plans to build a new school for Ysgol Bro Hyddgen since 2017, but the project faced an unforeseen delay due to the collapse of the main contractor, Dawnus Construction Ltd.	200 responses	<p><a href="#">Consultation Report</a></p> <p><b>Decision:</b> That the school project continues without the inclusion of the town library – this will enable the project to move on to the procurement stage with a clear scope and critical path.</p>

			<p>A new Strategic Outline Case/Outline Business Case was prepared by the council and approved by Welsh Government in January 2023 for a new 540-place all-age school at Ysgol Bro Hyddgen's secondary school site to replace the current primary and secondary school buildings. When built, the replacement building will incorporate early years facilities, areas for primary, secondary and post-16 education, a community room, an additional learning needs centre, wellbeing areas as well as external areas and a 3G pitch.</p> <p>The design could also include a space for a public library if</p>		<p>Given the significant financial pressures facing the Council, that further consideration is given to the provision of the most cost-effective library service within the town of Machynlleth.</p>
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			required. This would be subject to the outcome of this public engagement.		
<b>External</b>	<b>20mph School Journeys Survey</b>	03/02/23 to 17/02/23	Powys County Council and sustainable transport charity Sustrans are working to encourage and enable more active travel to and from Pengloddfa school, Newtown. Walking, wheeling, and cycling are great for our health and save us money. Active travel also reduces emissions that damage our climate and health.	70 responses	Report of findings compiled and shared with Sustrans Cymru Project Officer, Healthier Places, Mid Wales
<b>External</b>	<b>20mph Newtown Cycle Study - Canal Road/Cambrian Way</b>	03/02/23 to 03/03/23	Powys County Council and sustainable transport charity Sustrans are working to help people choose cycling. It's a quick, easy, ultra-low-cost way to get around and is great for our health and environment.	15 responses	Report of findings compiled and shared with Sustrans Cymru Project Officer, Healthier Places, Mid Wales



			<p>From September 2023, most roads in built-up areas of Wales will have a 20mph (miles per hour) speed limit. We want to see if the 20mph limit might encourage people who live here to cycle more. This will include the area of Canal Road/Cambrian Way. This survey was only for people in this area.</p>		
<b>External</b>	<b>20mph Newtown Cycle Study - Lon Cerddyn, Trehafren</b>	03/02/23 to 03/03/23	<p>Powys County Council and sustainable transport charity Sustrans are working to help people choose cycling. It's a quick, easy, ultra-low-cost way to get around and is great for our health and environment.</p> <p>From September 2023, most roads in built-up areas of Wales will have a 20mph (miles per</p>	5 responses	Report of findings compiled and shared with Sustrans Cymru Project Officer, Healthier Places, Mid Wales

			hour) speed limit. We want to see if the 20mph limit might encourage people who live here to cycle more. This will include the area of Lon Cerddyn, Trehafren. This survey was only for people in this area.		
<b>External</b>	<b>Plans for new school unveiled - Brynlllywarch Hall School</b>	22/02/23 to 14/03/23	Powys County Council is to build a new £9.1m school for Brynlllywarch Hall School as part of its Transforming Education programme. The school, located in Kerry near Newtown, provides education for pupils from 8 to 19-year-olds, with a wide range of complex emotional, behavioural and social difficulties. The pre-application consultation for the proposed development allows interested parties to comment	Unknown (Hosted a link on our engagement hub to a third-party survey)	The council and its construction partner ISG Construction also showcased the plans at two drop-in events on the following days: <ul style="list-style-type: none"> <li>• Tuesday 28 February</li> <li>• Tuesday 7 March</li> </ul> The drop-in events will be open to the whole school community as well as members of the public.

			on the plans before a planning application is submitted.		
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## Appendix B: 2022-23 Financial Management Code Actions

The CIPFA Financial Management Code (FM Code) sets out the standards of financial management expected for local authorities and is designed to support good practice and to assist local authorities in demonstrating their financial sustainability. The Council assessed its processes, procedures, and governance arrangements and identified the following actions to be developed at 31<sup>st</sup> March 2022 to strengthen its compliance with the Code. The sections below monitor progress against these actions and whether they have been fully delivered. A separate table identifies future actions recognised in year to be delivered through 2023-24.

### Section 1 – The Responsibilities of the Chief Finance Officer and leadership team

#### a.) The leadership team can demonstrate that the services provided by the authority provide value for money

Action 31 <sup>st</sup> March 2022	Owner	2022-23 Progress
Integrated Business Plans (IBP) pilots will utilise benchmarking and Value for Money (VFM)	Senior Leadership Team (SLT)	Delivered
Develop examples of good practice and share for learning.	Transformation & Change	Further action required
To review Welsh Government models and adapt for PCC use where appropriate.	Transformation & Change	Further action required
Develop scrutiny skills to actively challenge and assess VFM analysis.	Scrutiny	Partially delivered but further action required

Action 31 <sup>st</sup> March 2023	Owner
Wider benchmarking and Value for Money review work, approaches that allow comparison on a like for like basis.	Senior Leadership Team (SLT)

Review IBP template - fit for purpose and link to the CESP	Senior Leadership Team (SLT)
Implement new procurement structure	Financial Services
Review how we develop social value and climate analysis alongside VFM.	Adult Social Care

**b.) The authority complies with the CIPFA Statement on the Role of the Chief Finance Officer in Local Government**

<b>Action 31<sup>st</sup> March 2022</b>	<b>Owner</b>	<b>2022-23 Progress</b>
Include financial section in Individual Performance Review guidance (IPRs) for budget holders to highlight capability gaps.	Workforce & Organisational Development	Further action required
Survey and feedback from stakeholders to take place more widely.	Financial Services	Partially delivered but further action required

<b>Action 31<sup>st</sup> March 2023</b>	<b>Owner</b>
Review the support to schools and cluster model to assist recruitment to cluster roles.	Financial Services
Develop the apprenticeship scheme to support succession planning	Workforce & Organisational Development
Implement new procurement structure	Financial Services
Improve training delivery and materials to internal stakeholders	Financial Services

## Section 2 - Governance and financial management style

**c.) The leadership team demonstrates in its actions and behaviours responsibility for governance and internal control.**

<b>Action 31<sup>st</sup> March 2022</b>	<b>Owner</b>	<b>2022-23 Progress</b>
Improve the effectiveness of Internal control, more SLT involvement with Audit plan and review.	SLT	Partially delivered but further action required
EMT self-assessment	EMT	Further action required

<b>Action 31<sup>st</sup> March 2023</b>	<b>Owner</b>
SWAP to undertake a governance review.	SWAP

**d.) The authority applies the CIPFA/SOLACE Delivering Good Governance in Local Government: Framework (2016)**

No outstanding actions identified

**e.) The financial management style of the authority supports financial sustainability**

<b>Action 31<sup>st</sup> March 2022</b>	<b>Owner</b>	<b>2022-23 Progress</b>
Framework in place but gaps in terms of collaboration links, addressing silos.	EMT	Further action required
Improve level of involvement relating to appropriate finance input into the development of strategic and operational plans.	SLT	Delivered
Improve the scheme of delegation and the understanding of who the primary decision makers are.	SLT	Further action required
Survey to gain feedback on satisfaction of service.	Financial Services	Further action required

<b>Action 31<sup>st</sup> March 2023</b>	<b>Owner</b>
Improve dashboards through Business Intelligence	Financial Services/ Business Intelligence

### **Section 3 - Medium and Long Term Financial Management**

#### **f.) The authority has carried out a credible and transparent financial resilience assessment**

No outstanding actions identified

**g.) The authority understands its prospects for financial sustainability in the longer term and has reported this clearly to members**

<b>Action 31<sup>st</sup> March 2022</b>	<b>Owner</b>	<b>2022-23 Progress</b>
Welsh Government engagement regarding rural analysis and increased cost of services	EMT/Cabinet	Delivered
Ability for achieving long term financial sustainability – impact on short term decisions – how to better plan for the medium term	EMT/Cabinet	Delivered
IBP Pilots that will focus on Outcome Based Budgets activity	SLT	Deprioritised

<b>Action 31<sup>st</sup> March 2023</b>	<b>Owner</b>
Delivery of Stronger, Fairer, Greener Projects	EMT/Cabinet

**h.) The Authority complies with the CIPFA Prudential Code for Capital Finance in Local Authorities**

No outstanding actions identified

**i.) The authority has a rolling multi-year medium-term financial plan consistent with sustainable service plans**

<b>Action 31<sup>st</sup> March 2022</b>	<b>Owner</b>	<b>2022-23 Progress</b>
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Develop cost drivers and benchmarking through Outcome Based Budgets	Financial Services	Deprioritised
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#### Section 4 - The annual budget

**j.) The authority complies with its statutory obligations in respect of the budget setting process**

No outstanding actions identified

**k.) The budget report includes a statement by the chief finance officer on the robustness of the estimates and a statement of the adequacy of the proposed financial reserves**

No outstanding actions identified

#### Section 5 – Stakeholder engagement and business cases

**l.) The authority has engaged where appropriate with key stakeholders in developing its long-term financial strategy, medium-term financial plan and annual budget.**

Action 31 <sup>st</sup> March 2022	Owner	2022-23 Progress
Key stakeholders, wider member engagement and stronger use of scrutiny	Cabinet	Delivered
Limited consultation with wider membership due to covid and being in business continuity and plan to engage more broadly this year and in future years	Cabinet	Delivered

<b>Action 31<sup>st</sup> March 2023</b>	<b>Owner</b>
Development of 3 year balanced budgets	EMT/Cabinet
Budget survey linked to new corporate plan and priorities	EMT/ Financial Services

**m.)The authority uses an appropriate documented option appraisal methodology to demonstrate the value for money of its decisions**

<b>Action 31<sup>st</sup> March 2022</b>	<b>Owner</b>	<b>2022-23 Progress</b>
Work still to be done to develop use of business cases and cabinet to review and consider affordability early in the process	SLT	Delivered
Project management and transformation management training available	SLT	Delivered
Need a stronger risk framework around tenders and allowing bids to be taken forward – strengthen guidance	SLT/Financial Services	Further action required

### **Section 6 – Monitoring financial performance**

**n.) The leadership team acts using reports, enabling it to identify and correct emerging risks to its budget strategy and financial sustainability**

<b>Action 31<sup>st</sup> March 2022</b>	<b>Owner</b>	<b>2022-23 Progress</b>
Development and clarification of the mechanisms in place to report the performance of the authority's	EMT/SLT	Further action required.

significant delivery partnerships such as contract monitoring data.		
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**o.) The leadership team monitors the elements of its balance sheet which pose a significant risk to its financial sustainability**

<b>Action</b>	<b>Owner</b>	<b>2022-23 Action</b>
Redesign the debt recovery process to ensure that it is fit for purpose, failure demand removed which will allow the staff to prioritise key debt collection activities	Financial Services	Partially delivered but further action required.
Move from the current manual debt collection work to an automated stage driven system that will free up staff time to focus on collection rather than administration	Financial Services	Partial delivered but further action required.
Improve the collection process by strengthening our ability to measure debt performance better in the debt recovery lifecycle.	Financial Services	Further action required.

<b>Action 31<sup>st</sup> March 2023</b>	<b>Owner</b>
Develop use of ratios and KPIs in Head of Service reports	Financial Services

**Section 7 – External financial reporting**

**p.) The chief finance officer has personal responsibility for ensuring that the statutory accounts provided to the local authority comply with the Code of Practice on Local Authority Accounting in the United Kingdom**

No outstanding actions identified

**q.) The presentation of the final outturn figures and variations from budget allow the leadership team to make strategic financial decisions**

No outstanding actions identified

# CYNGOR SIR POWYS COUNTY COUNCIL.

## CABINET EXECUTIVE

Date

**REPORT AUTHOR:** County Councillor Cllr David Thomas  
Portfolio Holder for Finance

**REPORT TITLE:** Annual Governance Statement Revised Process

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**REPORT FOR:** Information

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### 1. Purpose

- 1.1 This report describes a number of changes proposed to strengthen and formalise the process underpinning the drafting and authorisation of the Authority's Annual Governance statement.
- 1.2 The revised process is presented here for the attention and agreement of the Committee.

### 2. Background

- 2.1 The Authority is required to produce an Annual Governance Statement (AGS) each year alongside its statement of accounts, in fulfilment of its obligations under the Accounts and Audit (Wales) Regulations 2014 (6).
- 2.2 The AGS provides an account of the processes, systems and records that the council has in place in order to demonstrate the effectiveness of its governance arrangements during the financial year. It is structured around the seven principles of the Chartered Institute of Public Finance and Accountancy (CIPFA) and Society of Local Authority Chief Executives (SOLACE) Framework Delivering Good Governance in Local Government (2016 Edition).
- 2.3 Overall ownership of the AGS sits with Finance, however, authorship of the document has historically resided with other services; previously with Democratic Services and for the 2021/22 report with the Strategic Planning, Policy and Performance team (SPPP). The most recent AGS was developed in tandem with the Annual Corporate Self-Assessment Report as the two documents jointly provide a holistic overview of the Authority's performance in the previous year.
- 2.4 Much of the evidence required to draft the 2021/22 AGS was collected via the Self-Assessment process and this proved to be an effective (if largely unplanned) route for the gathering of the necessary information. Historically, there has not been a formal process in place to gather this evidence efficiently

### 3 Advice

It is proposed:

3.1 That the mechanisms for obtaining the necessary information from the services should be formally aligned with those of the Corporate Self-Assessment to maximise value and ensure a more comprehensive representation of service activity in the AGS.

3.2 That overall ownership of the AGS remains with Finance and authorship of the AGS remains with SPPP going forward.

3.3 That final approval continues to be provided by the Governance and Audit Committee.

3.4 It is proposed that the AGS should, going forward, adhere to the timeline indicated below in order to best align with its dependencies and deadlines.

Milestone	Notes	Date
Circulation of Self-Assessment/Safeguarding/AGS workbooks to services and Scrutiny Committees	<ul style="list-style-type: none"> <li>Workbook will be similar to last year's template but revised and updated as necessary and will include additional questions to collect AGS information</li> <li>No template for presentation this year to avoid confusion and this will avoid any need to separate Self-Assessment/AGS responses</li> </ul>	By the end of January 2023
AGS Framework (draft)	Initial draft for comments	February/March
Communications	Communications put out to raise the profile of the AGS and encourage services to submit relevant evidence	February – April
Executive Management Team provide Assurance levels	A rubric to be developed to support decision-making around assurance levels	Early June
Governance and Audit Committee for review		23 <sup>rd</sup> June
Draft Statement of Accounts	Sign off S151 Officer	By 30 <sup>th</sup> June
Draft AGS complete	Sign Off Leader/ Chief Executive	By 30 <sup>th</sup> June
Submission of draft AGS to Audit Wales		By 30 <sup>th</sup> June
Audit Wales recommendations received, and any required amendments made		July – November*
Cabinet		August – November*
Governance and Audit Committee Sign-off	Alongside the annual accounts	By 24 <sup>th</sup> November (29 <sup>th</sup> September if Audit Wales/PCC resource allows)
Publication of AGS		By 30 <sup>th</sup> November*
Publication of Statement of Accounts		By 30 <sup>th</sup> November*

\* TBC in due course

3.5 That responsible officers are assigned to have oversight for specific areas of governance and provide their assessment of assurance for the Authority's performance in the following areas:

<b>Responsible Officer</b>	<b>Area of Assurance</b>
Monitoring Officer	Operating within the rule of the law and constitutional arrangements including the member code of conduct
Head of Workforce and Organisation Development	Human resources arrangements and policies
Section 151 Officer	Finance matters
Health and Safety Manager	Health and Safety matters
Lead on Procurement	Procurement
Head of Economy and Digital Services	Information Governance and Complaints
Director of Corporate Services	Policy, Strategy and Resources
Director of Social Services and Housing	Safeguarding

3.6 That a rubric, similar in outline to that shown below (although still liable to alteration), is adopted to support the Executive Management Team and Responsible Officers in assessing the levels of assurance to be recorded:

3.7 The criteria shown in the first column of the rubric are the primary characteristics that form the landscape of an assessment of governance performance. The evidence presented by the AGS supporting each Cipfa principle can be assessed against these characteristics to compare where the Authority's governance performance is placed using the scales shown (rows). The colour of the cells indicate how the sum of the combined criteria relevant to that principle may support the choice of a particular assurance level.

3.7 The rubric is not intended to be prescriptive but would provide a focus for discussion and assist in maintaining consistency between different years and potential changes of responsible Officers.

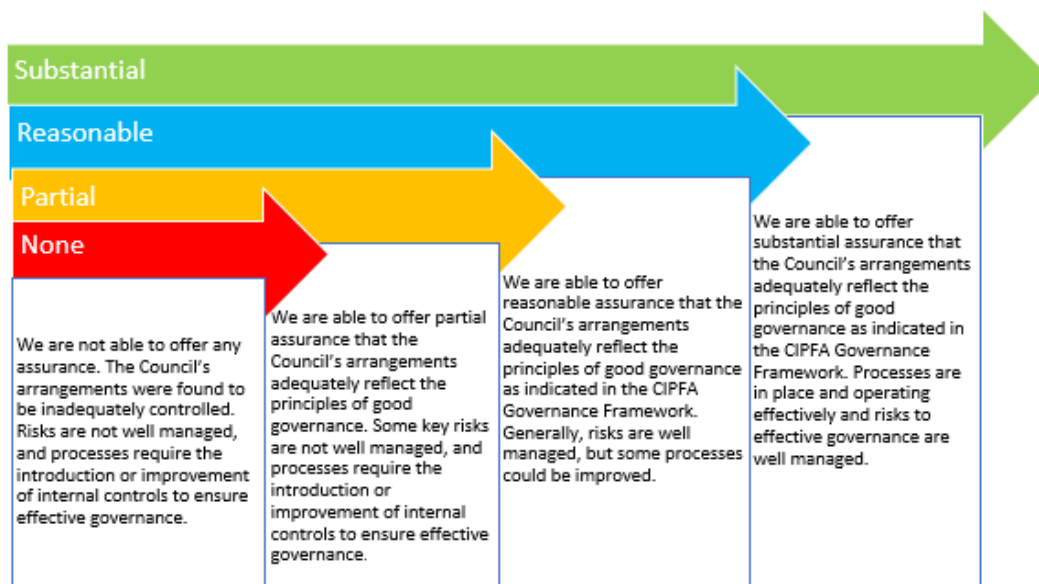
3.8 The colours shown in the key do not represent a RAG rating system but rather reflect the relative significance that might be apportioned to the criteria attainment levels. E.g., some attainment levels appearing in the 'reasonable' column may be assumed to support an assurance level of 'reasonable' but where, for instance, controls are only judged to cover some risks, this would indicate that a judgement of 'partial' should be considered for that criterion. In other words, a failure to meet a particular standard of performance may have a widely variable level of impact on governance assurance levels, dependent on the criterion that is being assessed.

Key:

None	
Partial	
Reasonable	
Substantial	

	None	Partial	Reasonable	Substantial
Controls	Significant concerns regarding adequacy of controls in place	Many controls are in place but coverage is inconsistent/unclear	Controls are not in place to cover some risks	Controls in place
Review	No cyclical review is taking place	Cyclical review is taking place in most areas but not all. Level of detail is inconsistent.	Assurance is not cyclically performed in all areas/not sufficiently detailed	Detailed cyclical review
Governance evidence	The evidence presented does not reduce risks	The evidence presented reduces risks to an agreed (but not necessarily desired) level	The evidence presented reduces risks to an acceptable level	The evidence presented reduces risks to a low level
Risk	Key risks are not adequately mitigated	Key risks are adequately Mitigated	Risk is adequately Mitigated	Risk is adequately Mitigated
Policy	Significant gaps exist in policy	Policies in some areas are not in place, not appropriate/fit for purpose	Policies are generally in place as required but not communicated	Policies in Place and Communicated
Automation of Controls	Significant concerns exist regarding efficacy of manual controls	Concerns exist regarding efficacy of manual controls	Manual controls are present, work well but are not automated	ICT Tools are being used to automate controls and report red flagged transactions
Business Planning	Business Planning not monitored	Business Planning monitored but inconsistent	Business Planning monitored adequately	Business Planning closely monitored

3.9 The levels of assurance are defined as follows:





3.10. That the Committee approve the above amendments to the current process.

**4. Resource Implications**

4.1.1 The Deputy Head of Finance notes the report and confirms that the Annual Governance Statement will continue to be completed and presented alongside the Statement of Accounts each year, with officers in Finance and SPPP working together to gather evidence alongside the annual self-assessment process to deliver within the timetable set out. The need to have a clear framework for establishing the level of assurance will be improved by the use of the Rubric approach.

**5. Legal implications**

(State here any legal implications and confirmation that the report has been approved by the Monitoring Officer)

5.1

**6. Data Protection**

N/A

**7. Comment from local member(s)**

7.1 The proposed changes outlined in this report refer to corporate reporting processes and therefore will therefore have equal (no) effect on any specific electoral wards.

**8. Impact Assessment**

8.1 Not applicable

**9. Recommendation**

9.1 That the Committee approve the amendments and additions contained in this report.

Contact Officer:

Tel:

Email:

Head of Service: Catherine James

Corporate Director: Emma Palmer

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<b>1.</b>	<b>ANNUAL GOVERNANCE STATEMENT PROCESS FOR 2022-23 AND ONWARDS</b>
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**Documents Considered:**

- Report of the Cabinet Member for Finance and Corporate Transformation

**Issues Discussed:**

- The paper was provided at the request of the Committee following some uncertainty about the sequencing of clearance and decision making.
- The report describes several proposed changes to strengthen and formalise the process for the drafting and authorisation of the Council's Annual Governance Statement.
- The Committee was asked to approve the revised process.
- It was suggested that the method of obtaining information from services should be aligned with the corporate self assessment process timelines, that formal ownership of the document remains with the Finance Service, the authorship with the Transformation and Democratic Service and final approval remains with the Governance and Audit Committee.
- It was also recommended that the amended timeline be adopted.
- The report also contained a rubric which was an evaluation scoring guide to assess the levels of assurance.

**Outcomes:**

- That the amendments to the Annual Governance Statement process be approved.

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**CYNGOR SIR POWYS COUNTY COUNCIL.****CABINET EXECUTIVE****Date: TBC****REPORT AUTHOR: County Councillor Jake Berriman, Cabinet Member for a Connected Powys.****REPORT TITLE: Corporate Complaints Annual report November 2020 – October 2022**

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**REPORT FOR: Information**

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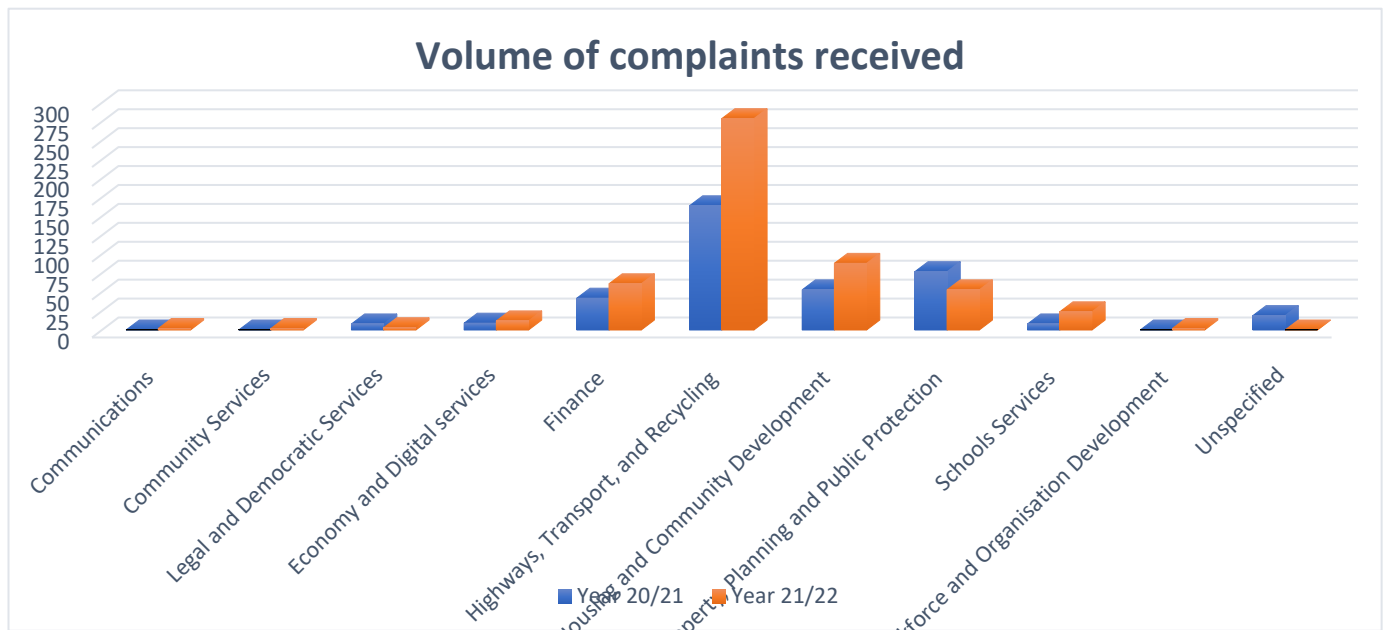
**1. Purpose.**

- 1.1 To brief Cabinet on the corporate complaints made to the Council from 1<sup>st</sup> November 2020 to 31<sup>st</sup> October 2022. The management and monitoring of which aligns to the corporate plan of Stronger, Fairer, Greener, specifically objective 1.

**2. Background.**

- 2.1 The Local Government (Wales) Measure 2011 (Section 81) as amended by Section 115 of the Local Government and Elections (Wales) Act 2021 requires that a local authority's Governance and Audit Committee make reports and recommendations in relation to the authority's ability to handle complaints effectively.
- 2.2 This report covers the two reporting years of,
- 1<sup>st</sup> November 2020 to 31<sup>st</sup> October 2021
  - 1<sup>st</sup> November 2021 to 31<sup>st</sup> October 2022
- 2.3 Due to the Covid-19 pandemic impacting Council working practices from March 2020 then these annual reports have been delayed and as such this report covers a 2-year period.
- 2.4 The information provided refers to corporate complaints and does not include those complaints made in relation to Social Care or Information Rights regimes, which are provided as standalone reports, due to the different legislative obligations.
- 2.5 Complaints are managed on the basis of being a stage 1 or stage 2 complaint, as detailed within the Powys County Council Concerns and Complaints policy.
- 2.6 Currently the outcome of a complaint is reported upon as being upheld or not upheld, with any information as to "lessons learnt" being captured within the response, and so not easily reported upon. As such this report has been delayed allowing time to extract lessons learnt from Heads of Services directly.

### 3. Volumes of complaints received.



3.1 Further detail as to the breakdown of complaints and the Council's policy are available at the following appendices.

- Appendix 1 – Complaints received by month.
- Appendix 2 – Complaints completed.
- Appendix 3 - Complaint outcome.
- Appendix 4 - Breakdown of complaints by service area.
- Appendix 5 – Corporate Complaints policy.

### 4 Complaints received 1st November 2020 to 31st October 2021.

4.1 For this year 380 complaints were received; these figures are broken down into

- Stage 1 = 292 and
- Stage 2 = 98.
- 91% of stage 1 complaints were completed within timescales. (265 out of 292)
- 74% of stage 2 complaints were completed within timescales. (77 out of 104)

4.2 The figures above relate to complaints marked as completed within the 12-month period and will include complaints received in the previous 12-month period.

4.3 Of the complaints received this year the following outcomes are recorded.

- 47% of complaints completed were recorded as upheld. (179 out of 380)
- 43% of complaints completed were recorded as not upheld. (162 out of 380)
- 8% of complaints completed were recorded as partially upheld. (29 out of 380)

4.4 10 complaints were recorded as investigation not merited, discontinued or no outcome recorded.

### 5 1st November 2021 to 31st October 2022 (as at 30/03/2023).

5.1 For this year 526 complaints were received; these figures are broken down into

- Stage 1 = 418 and
- Stage 2 = 108.

- 92%% of stage 1 complaints were completed within timescales. (361 out of 394)
- 85 % of stage 2 complaints were completed within timescales. (86 out of 101)

5.2 Of the complaints received this year the following outcomes are recorded.

- 63% of complaints completed were recorded as upheld. (334 out of 526)
- 33% of complaints completed were recorded as not upheld. (176 out of 526)

5.3 Due to Public Services Ombudsman for Wales policy change from September 2021, there is no longer an option for partially upheld, as such complaints are now recorded as either upheld or not upheld.

5.4 There are currently 3 complaints recorded as being still outstanding for this period. All for Highways, Transport and Recycling.

## **6 Lessons learnt from complaints.**

6.1 Council learning from the complaints investigated is currently not recorded, liaising with Heads of Service has identified several trends, such as

- needing to review or improve processes,
- training required,
- resources available,
- communication issues such as clarity, time taken, tone and content,
- lack of information provided, and
- customer expectations.

6.2 Further development of the Complaints process and system is underway and will incorporate the capturing of the

- Lessons learnt.
- Recommendations made to prevent further similar complaints.
- The implementation of those recommendations.

6.3 The aim is to complete this work within quarter 3 of 2023-2023.

## **7 Monitoring.**

7.1 In addition to system messages warning of impending due dates, Customer Services staff also undertake limited monitoring of complaints, such as reminding Investigation Officers that their response is due soon, or that they are overdue.

7.2 The individual service area is responsible for monitoring the timeliness and quality of their responses.

7.3 Customer Services make the quarterly returns on corporate and social care complaints to the Public Services Ombudsman.

## **8 Conclusion.**

8.1 There has been a 38% increase in complaints 1st November 2021 to 31st October 2022 against 1st November 2020 to 31st October 2021.

8.2 Complaints in respect of housing maintenance that were previously addressed by HOWPS, are now included within the corporate complaints data. However, these do

not account for the increase in isolation. Whilst Housing and Community Development saw a 66% increase in the number of complaints, other service areas also saw significant increases.

- Highways, Transport and Recycling = 75% increase.
- Schools Services = 162% increase.

8.3 In the majority, complaints made to the Council are managed effectively and in line with Council policy.

## **9 Moving forward.**

9.1 Whilst it is not currently possible to report upon lessons learnt, work is being undertaken to redevelop the Corporate Complaints system to

- Enable the recording of that learnt from the complaint by the Investigation Officers, by early summer 2023.
- Enable the recording of recommendations, and the implementation of such to prevent similar complaints by early Autumn 2023.
- Develop new reporting mechanisms for Service Areas.

## **10 Resource Implications**

10.1 The administration of the Council's corporate complaints is undertaken by several staff within the customer services team, in addition to other customer services duties. The staffing costs of their proportionate duties spent on the administration of corporate complaints is approximately £30,804 per annum. No exact recordings are maintained as to time spent on these duties.

10.2 Additional resources are utilised by other teams in support of the corporate complaints system and reporting functionalities, again no exact recordings are maintained as to time spent on these duties.

10.3 The cost of managing and responding to complaints is met from existing service budgets and are undertaken as part of officer's general duties. No records are made to enable the reporting of specific costs to handle these complaints.

10.4 The changes required to the Complaints System to enable the recording of lessons learnt, and the implementation of recommendations will utilise approximately £1,727 of Digital Transformation funding. However, whilst the changes being made won't realise financial savings, they will enable greater understanding of the services being delivered, and improve those services for the public, and as such this work is aligned to the corporate objective of customer access to services.

10.4 The Head of Finance (Section 151 Officer) notes the report.

## **11. Legal implications**

11.1 Legal: the recommendations can be accepted from a legal point of view.

11.2 The Head of Legal Services and the Monitoring Officer has commented as follows: "I note the legal comment and have nothing to add to the report".

## **12. Data Protection**



12.1 The Data Protection Officer is the author of this report and has nothing further to add.

**13. Comment from local member(s).**

13.1 *(comments from Scrutiny to be inserted.)*

**14. Integrated Impact Assessment.**

14.1 NA

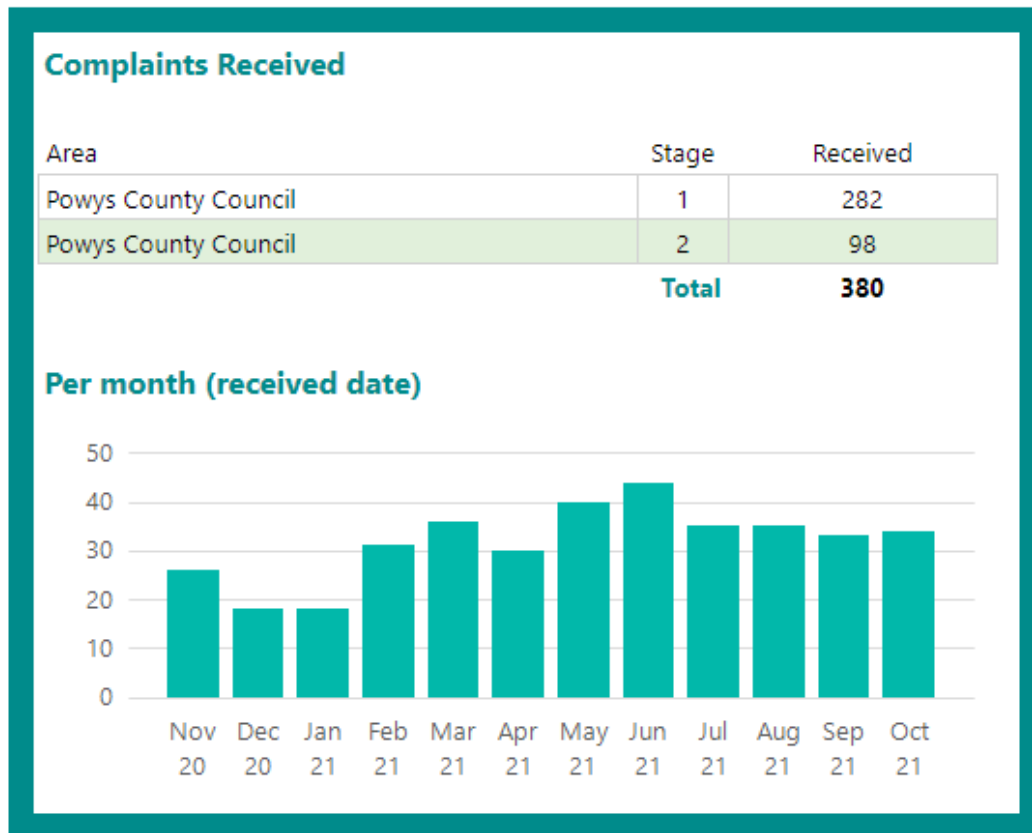
**15. Recommendation.**

15.1 Cabinet notes the contents of the report and the increase of corporate complaints from November 2020 – October 2022.

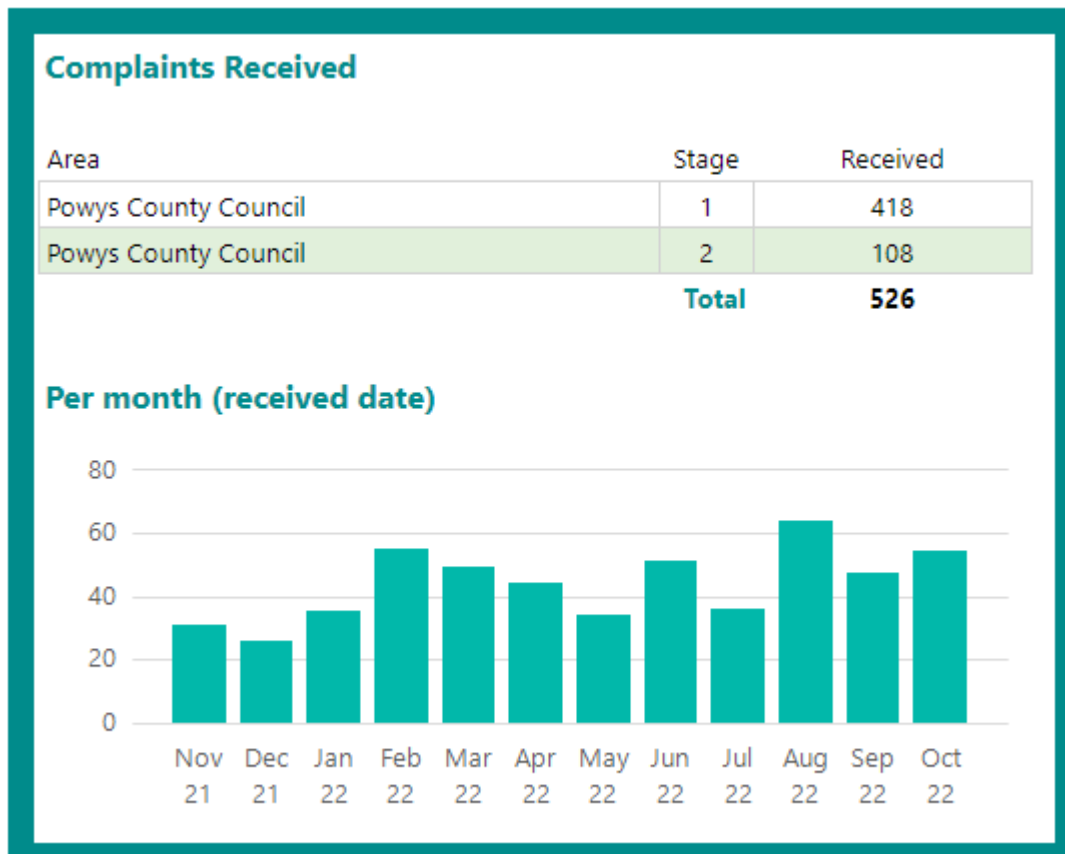
Contact Officer: Helen Dolman
Tel: 015697 826400
Email: <a href="mailto:helen.dolman@powys.gov.uk">helen.dolman@powys.gov.uk</a>
Head of Service: Diane Reynolds
Corporate Director: Emma Palmer

### Complaints Received.

1st November 2020 to 31st October 2021.

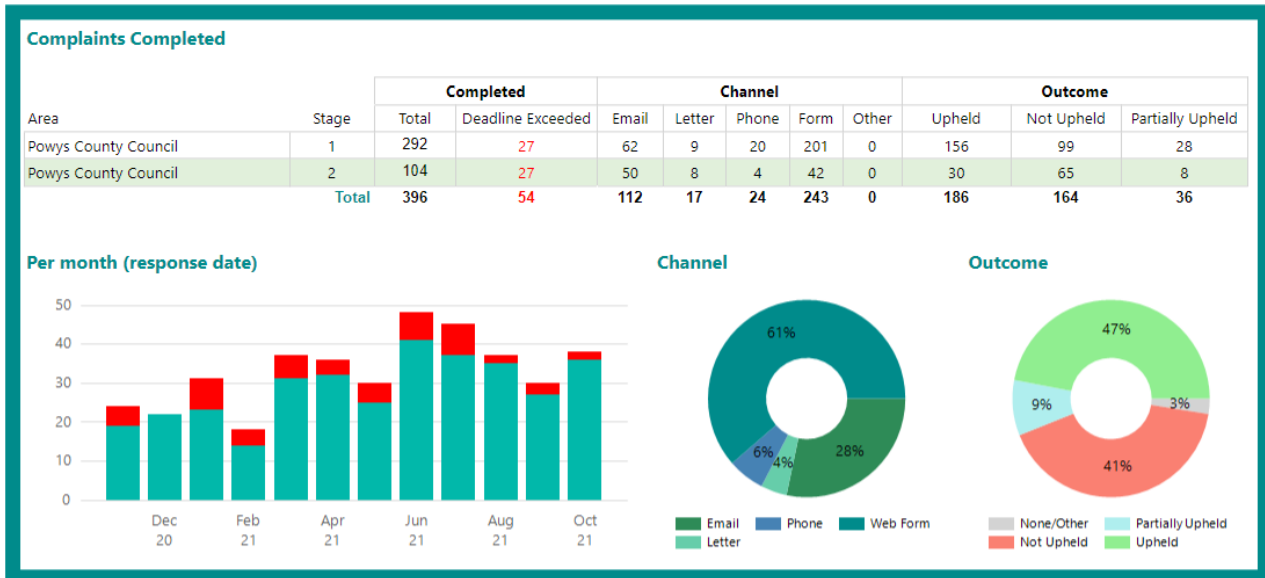


1st November 2021 to 31st October 2022 (as at 30/03/2023).

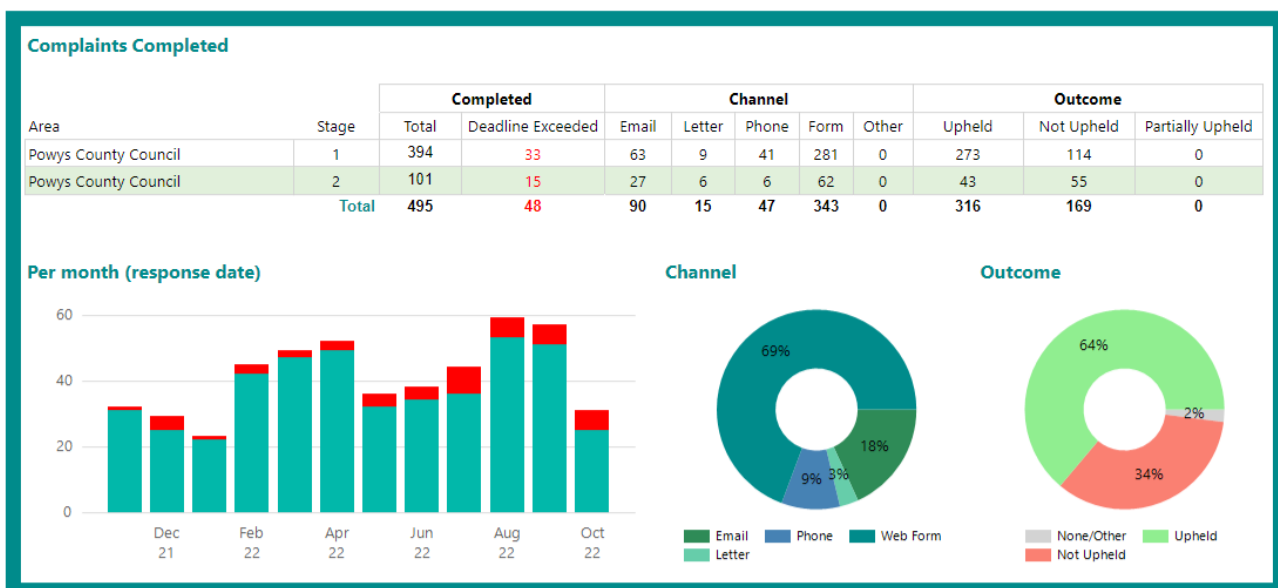


### Completed complaints.

1st November 2020 to 31st October 2021



1st November 2021 to 31st October 2022 (as at 30/03/2023).



**Outcome of Complaints.**

1st November 2020 to 31st October 2021.

Service Area	No. of Complaints	Number Upheld	Percentage Upheld	Not Upheld	Percentage not upheld	Partially upheld	Percentage Partially upheld
Legal and Democratic Services	8	3	38%	4	50%	1	12%
Economy and Digital services	9	7	78%			2	22%
Finance	42	15	36%	18	43%	7	17%
Highways, Transport, and Recycling	164	100	61%	50	30%	7	4%
Housing and Community Development	53	27	51%	18	34%	7	13%
Property, Planning and Public Protection	77	14	18%	58	75%	5	6%
Schools Services	8	1	13%	7	87%		
Unspecified	19	12	63%	7	37%		
<b>Totals</b>	<b>380</b>	<b>179</b>	<b>47%</b>	<b>162</b>	<b>43%</b>	<b>29</b>	<b>8%</b>

1st November 2021 to 31st October 2022 (as at 30/03/2023).

Service Area	No. of Complaints	Upheld	Percentage Upheld	Not Upheld	Percentage not upheld
Communications	2	NIL	0%	2	100%
Community Services	2	2	100%	NIL	0%
Legal and Democratic Services	3	2	66%	1	33%
Economy and Digital services	12	9	75%	3	25%
Finance	61	29	48%	22	36%
Highways, Transport, and Recycling	279	225	81%	48	21%
Housing Services	88	44	50%	44	50%
Property, Planning and Public Protection	53	33	62%	20	38%
Schools Services & Education	24	3	12%	21	88%
Workforce and Organisation Development	2	2			0%
<b>Totals</b>	<b>526</b>	<b>334</b>	<b>63%</b>	<b>176</b>	<b>33%</b>

## Breakdown of complaints by service area.

Service area	1 <sup>st</sup> November 2020 – 31 <sup>st</sup> October 2021			1 <sup>st</sup> November 2021 – 31 <sup>st</sup> October 2022			Increase or decrease in received
	Number of complaints	Stage 1	Stage 2	Number of complaints	Stage 1	Stage 2	
Communications and Marketing				2	1	1	NA
Community Services				2	2	NIL	NA
Legal and Democratic Services	8		8	3	2	1	63% ↓
Economy and Digital services	9	7	2	12	9	3	33% ↑
Finance	42	32	10	61	49	12	45% ↑
Highways, Transport, and Recycling	164	134	30	279	238	41	75% ↑
Housing and Community Development	53	39	14	88	68	20	66% ↑
Property, Planning and Public Protection	77	53	24	53	33	20	31% ↓
Schools Services	8	5	3	24	14	10	162% ↑
Workforce and Organisational Development				2	2	NIL	NA
Unspecified	19	12	7				NA
<b>Totals</b>	<b>380</b>	<b>282</b>	<b>98</b>	<b>526</b>	<b>418</b>	<b>108</b>	



## **CYNGOR SIR POWYS COUNTY COUNCIL**

### **Corporate Complaints Policy**

Date of Issue	April 2021
Amended	September 2021
Date of Previous Issue	June 2019
Agreed by	Chief Executive Officer
Review Date	April 2022

#### **Concerns and Complaints Policy**

Powys County Council is committed to dealing effectively with any concerns or complaints you may have about our services. We aim to clarify any issues you may be unsure about. If possible, we will put right any mistakes we may have made. We will provide any service you're entitled to which we have failed to deliver. If we did something wrong, we will apologise and, where possible, try to put things right for you. We aim to learn from our mistakes and use the information we gain from complaints to improve our services.

## When to use this policy

When you express your concerns or complain to us, we will usually respond in the way we explain below. However, sometimes you may have a statutory right of appeal e.g. against a refusal to grant you planning permission or the decision not to give your child a place in a particular school so, rather than investigate your concern, we will explain to you how you can appeal.

Sometimes, you might be concerned about matters that are not covered by this policy e.g. when a legal framework applies, and we will then advise you about how to make your concerns known.

This policy does not apply to 'Freedom of Information' or data access issues. Please contact:

Information Compliance  
Powys County Hall  
Spa Road East  
Llandrindod Wells  
Powys LD1 5LG  
Telephone: 01597 827460  
Email: [information.compliance@powys.gov.uk](mailto:information.compliance@powys.gov.uk)

This Policy does not apply to complaints relating to Social Services. Please contact:

Social Services Complaints  
Powys County Council  
County Hall  
Spa Road East  
Llandrindod Wells  
Powys  
LD1 5LG  
Telephone: 01597 827515  
Email: [get.sorted@powys.gov.uk](mailto:get.sorted@powys.gov.uk)

This Policy does not apply to schools, if you have a complaint regarding a school, please approach the School Governors in the first instance.

Complaints about the conduct of Councillors cannot be dealt with through the Councils Complaints process. For information please contact:

Public Services Ombudsman for Wales  
1 Ffordd yr Hen Gae  
Pencoed  
CF35 5LJ  
Telephone: 0300 7900203  
Email: [ask@ombudsman.wales](mailto:ask@ombudsman.wales)  
Website: [www.ombudsman.wales](http://www.ombudsman.wales)

Or, alternatively, contact the Council's Monitoring Officer:

Monitoring Officer  
Powys County Hall  
Spa Road East  
Llandrindod Wells

Powys  
LD1 5LG  
Telephone: 01597 826746

Complaints Officers can advise on the type and scope of complaints they can consider.

## Welsh Language Standards

Complaints relating to Powys County Council's compliance with the Service Delivery Standards, Policy Making Standards and Operational Standards, which the Council is required to comply with under the Welsh Language (Wales) Measure 2011, are also dealt with in accordance with this policy.

## Asking us to provide a service?

If you are approaching us to request a service, e.g. reporting a faulty streetlight, or requesting an appointment, this policy does not apply. If you make a request for a service and then are not happy with our response, you will be able to make your concern known as we describe below.

Sometimes your concern or complaint will not be dealt with via the Corporate Complaints Policy, examples include:

- An initial request for service, such as reporting a faulty streetlight or refuse has not been picked up.
- An appeal against a 'properly made' decision made by the council.
- A means to seek to change to legislation or 'properly made' policy decision.
- Decisions in respect of which there is a separate right of appeal or review, e.g. planning appeals, council tax reviews and via Magistrates court.
- An insurance claim against the council (however a complaint could be made about the process the council followed in administering the claim).
- Comments about the standard of a particular service when the service standard provided is not below the published standard.
- A means of lobbying groups/organisations to promote a cause.
- Allegations of financial impropriety, fraud and/or corruption.
- Items which are a police matter.
- Complaints about things which are not the responsibility of the Council.
- A matter that has already been considered by the Public Ombudsman for Wales, unless there is extensive new evidence.

**This list is not definitive**

## How to express concern or complain

**You can express your concern in any of the following ways:**

- Ask for your complaint to be logged by the person with whom you are already in contact. Tell them that you want us to deal with your concern
- Get in touch with our Corporate Complaints Team on 01597 827472 if you want to make your complaint over the phone
- Use the form on our website at [www.powys.gov.uk](http://www.powys.gov.uk)
- Write to us at:
  - Complaints, Comments & Compliments
  - Corporate Complaints Team
  - Powys County Council
  - County Hall
  - Spa Road East
  - Llandrindod Wells



Copies of this policy are available in Welsh, audio, large print and braille.

## Stage 1 Complaint

If possible, we believe it's best to deal with things straight away. If you have a concern, please raise it with the person you're dealing with. They will try to resolve it for you there and then.

If they're unable to resolve it or it is a complaint about another department or service area, the complaint can be logged by the member of staff or it can be referred to the Corporate Complaints team.

You will be sent a formal acknowledgement email or letter within 3 working days of the complaint being logged. The complaint will be passed to the most relevant officer within the relevant department. Your complaint will be responded to within 10 working days.

If your complaint cannot be responded to within 10 working days, we will let you know as soon as possible and we will escalate to Stage 2.

If the Stage 1 complaint response is not acceptable to you, you can proceed to make a Stage 2 complaint.

## Stage 2 Complaint

If we are unable to resolve your complaint within 10 working days, your complaint will be escalated to a Stage 2.

Some complaints can be escalated straight to Stage 2 should they be of a serious nature, the decision is made by the Complaints Team in liaison with the Head of Service.

Stage 2 complaints will be acknowledged within 5 working days and dealt with by a Senior Officer within the council, they may be independent to the service your complaint or concern is regarding.

Your complaint will be responded to within 20 working days or, if more, complex, you will be informed by the officer investigating your complaint how long we expect it to take.

## Dealing with your concern or complaint

- We will communicate with you as you have requested, if you have any requirements for communication – for example, if you need documents in large type.
- We will deal with your concern in an open and honest way.
- We will make sure that your dealings with us in the future do not suffer just because you have expressed a concern or made a complaint.

Normally, we will only be able to look at your concerns if you tell us about them within 12 months. This is because it's better to investigate your concerns while the issues are still fresh in everyone's mind.

We may exceptionally be able to look at concerns which are brought to our attention later than this. However, you will have to explain why you have not been able to bring it to our attention earlier and we will need to have sufficient information about the issue to allow us to consider it properly. In any event, we will not consider any concerns about matters that took place more than three years ago.

If you're expressing a concern on behalf of somebody else, we will need their agreement to you acting on their behalf.

## What if there is more than one body involved?

If your complaint covers more than one body e.g. a Housing Association and the Council, we will usually work with them to decide who should take the lead in dealing with your concerns. You will then be given the name of the person responsible for communicating with you while we consider your complaint.

If the complaint is about a body working on our behalf e.g. contractors, you may wish to raise the matter informally with them first. However, if you want to express your concern or complaint formally, we will investigate this ourselves and respond to you.

## Investigation

We will tell you who we have asked to investigate your concern or complaint. If your concern is straightforward, we will usually ask somebody from the relevant service area and respond to you. If it is more serious, we may use someone from elsewhere in the Council or, in certain cases, including complaints against senior officers, especially where there is a perceived conflict of interest, these may be referred to an independent investigator.

We may contact you to ensure we understand your concerns, or to establish the outcome you are hoping for.

The person looking at your complaint will usually need to see the files we hold relevant to your complaint. If you don't want this to happen, it's important that you tell us.

If there is a simple solution to your problem, we may ask you if you're happy to accept this. For example, where you asked for a service and we see straight away that you should have had it, we will offer to provide the service rather than investigate and produce a report.

We will aim to resolve concerns as quickly as possible and expect to deal with the vast majority within 20 working days. If your complaint is more complex, we will:

- Let you know within this time why we think it may take longer to investigate.
- Tell you how long we expect it to take.
- Let you know where we have reached with the investigation, and
- Give you regular updates, including telling you whether any developments might change our original estimate.

The person who is investigating your concerns will firstly aim to establish the facts. The extent of the investigation will depend upon how complex and how serious the issues you have raised are. In complex cases, we will draw up an investigation plan.

In some instances, we may ask to meet with you to discuss your concerns. Occasionally, we might suggest mediation or another method to try to resolve disputes.

We'll look at relevant evidence. This could include information you have provided, our case files, notes of conversations, letters, emails or whatever may be relevant to your particular concern. If necessary, we will talk to the staff or others involved and look at our policies, any legal entitlement and guidance.

## Outcome

If we formally investigate your complaint, we will let you know what we find. If necessary, we will produce a report. We will explain how and why we came to our conclusions.

If we find that we made a mistake, we will tell you what happened and why.

If we find there is a fault in our systems or the way we do things, we will tell you what it is and how we plan to change things to stop it happening again.

If we make a mistake, we will always apologise for it.

## Putting Things Right

If we didn't provide you with a service you should have had, we'll aim to provide it now, if that's possible. If we didn't do something well, we'll aim to put it right. If you have lost out because of a mistake on our part, we'll try to put you back in the position you would have been in if we'd done things properly. If you had to pay for a service yourself, when we should have provided it for you, or if you were entitled to funding you did not receive, we will try to refund the cost.

## The Ombudsman

If we do not succeed in resolving your complaint, you may complain to the Public Services Ombudsman for Wales. The Ombudsman is independent of all government bodies and can investigate your complaint, if you believe that you personally or the person on whose behalf you are complaining:

- Have been treated unfairly or received a bad service through some failure on the part of the service provider.
- Have been disadvantaged personally by a service failure or have been treated unfairly.

The Ombudsman normally expects you to bring your concerns to our attention first and to give us a chance to put things right. You can contact the Ombudsman by:

- Phone: 0300 790 0203
- Email: [ask@ombudsman.wales](mailto:ask@ombudsman.wales)
- The website: [www.ombudsman.wales](http://www.ombudsman.wales)
- Writing to: Public Services Ombudsman for Wales  
1 Ffordd yr Hen Gae,  
Pencoed  
CF35 5LJ

There are also other organisations that consider complaints. For example, the Welsh Language Commissioner's Office deals with complaints about services in Welsh. We can advise you about such organisations.

Welsh Language Commissioner  
Market Chambers  
5-7 St Mary Street  
Cardiff  
CF10 1AT  
Telephone: 0845 6033221  
Email: [post@welshlanguagecommissioner.wales](mailto:post@welshlanguagecommissioner.wales)

## Learning lessons

We take your concerns and complaints seriously and try to learn from any mistakes we've made. Our Senior Leadership Team considers a summary of all complaints quarterly or more often, as applicable, and is made aware of all serious complaints. Our Senior Leadership Team also considers our response to complaints twice a year. We share summary (anonymised) information on complaints received and complaints outcomes with the Ombudsman as part of our commitment to accountability and learning from complaints.

Where there is a need for significant change, we will develop an action plan setting out what we will do, who will do it and when we plan to do it.

## What if you need help?

Our staff will aim to help you make your concerns known to us. If you need extra assistance, we will try to put you in touch with someone who can help. You may wish to contact advocacy services e.g. Age Cymru or Shelter, who may be able to assist you.

You can also use this concerns and complaints policy if you are under the age of 18. If you need help, you can speak to someone on the Meic Helpline:

- Phone 0808 802 3456
- Website [www.meiccymru.org](http://www.meiccymru.org)

or contact the Children's Commissioner for Wales. Contact details are:

- Phone 0808 801 1000
- Email [post@childcomwlaes.org.uk](mailto:post@childcomwlaes.org.uk)
- Website [www.childcome.org.uk](http://www.childcome.org.uk)

## What we expect from you

In times of trouble or distress, some people may act out of character. There may have been upsetting or distressing circumstances leading up to a concern or a complaint. We do not view behaviour as unacceptable just because someone is forceful or determined.

We believe that all complainants have the right to be heard, understood and respected. However, we also consider that our staff have the same rights. We therefore expect you to be polite and courteous in your dealings with us. We will not tolerate aggressive or abusive behaviour, unreasonable demands or unreasonable persistence. We have a separate policy to manage situations when we find that someone's actions are unacceptable.

# Powys County Council

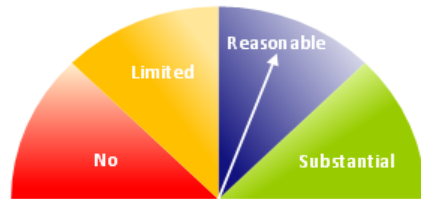
## Internal Audit Report Annual Opinion 2022/23

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# Internal Audit Annual Opinion – 2022/23: ‘At a Glance’

## Annual Opinion



There is generally a sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives.

## The Headlines

	62 reviews delivered as part of the 2022/23 Internal Audit Plan. Includes assurance, special investigation, advisory and follow-up reviews.
	There were no areas of corporate high risk but there were areas of significant concern about: <ul style="list-style-type: none"> <li>• Highways Operations</li> <li>• Continuing Health Care &amp; DoLS</li> <li>• Housing Maintenance Services</li> </ul>
	There was reasonable coverage across key strategic/audit risks and core services. The coverage across corporate priorities was less visible, but this linkage has been reinforced for the 2203/4 work programme.
	Assurance for the internal audit opinion was taken from consideration of the work of other Assurance Providers, the follow up process, the work of the Counter Fraud Team, Risk Management and Value for Money activities.
	The Council are in general effectively managing and mitigating the risks identified from internal audit work.

## Internal Audit Assurance Opinions 2022/23

Substantial	1
Reasonable (inc. Grant Certifications)	35
Limited	9
No Assurance	0
Other (inc. advisory, special investigations & follow ups)	17
<b>Internal Audit Agreed Actions 2022/23</b>	
Priority 1	16
Priority 2	89
Priority 3	133
<b>Total</b>	<b>238</b>



**Internal Audit provides an independent and objective opinion on the effectiveness of the Authority's risk management, control and governance processes.**

**The Internal Audit Charter, which is reviewed annually by this Committee, guides the work of Internal Audit and is based around the existing International Professional Practices Framework (IPPF).**



## Purpose

The Head of Internal Audit (SWAP Assistant Director) should provide a written annual report to those charged with governance to support the Authority's Annual Governance Statement (AGS). This report should include the following:

- An opinion on the overall adequacy and effectiveness of the organisation's governance, risk management and internal control environment.
- The potential for the occurrence of fraud and how the organisation manages fraud risk.
- Disclose any qualifications to that opinion, together with the reasons for the qualification.
- Present a summary of the audit work from which the opinion is derived, including reliance placed on work by other assurance bodies.
- Draw attention to any issues the Head of Internal Audit judges particularly relevant to the preparation of the Annual Governance Statement.
- Provide the opportunity to review the work undertaken during the year, and summarise the performance of the Internal Audit function against its performance measures, criteria and standards; and
- Comment on compliance with these standards and communicate the results of the internal audit quality assurance programme.

The purpose of this report is to satisfy this requirement and Members are asked to note its content and the Annual Internal Audit Opinion given.



## Background

The Internal Audit Service for Powys County Council is provided by SWAP Internal Audit Services. The team's work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note. The work of the team is guided by the Internal Audit Charter which is reviewed annually.

Internal Audit provides an independent and objective opinion on the Council's control environment by evaluating its effectiveness. This report summarises the activity of the Internal Audit team for the 2022/23 year.

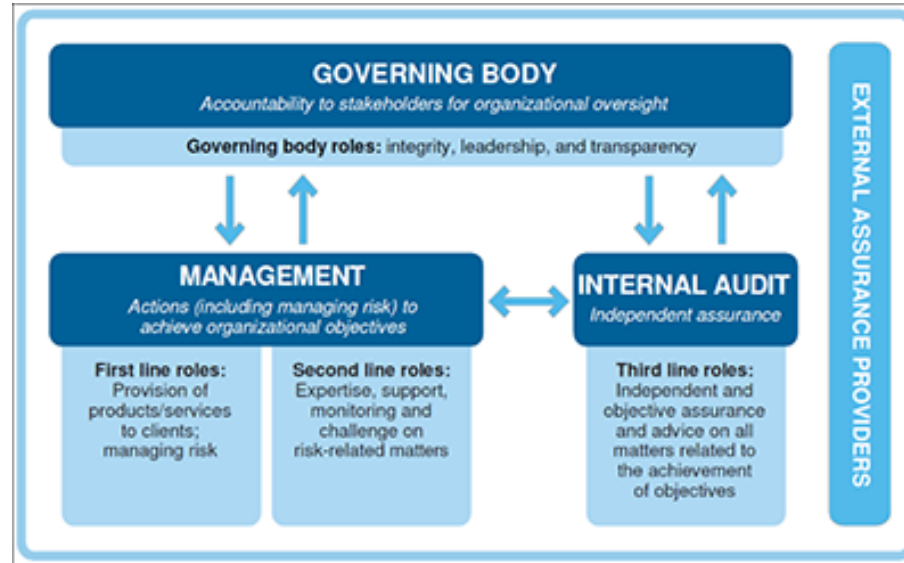


Across the next year the Institute of Internal Auditors (IIA) is planning a significant change to the current International Professional Practices Framework (IPPF) which will ultimately be known as The Global Internal Audit Standards.

SWAP is contributing to the consultation on the proposed new Global Internal Audit Standards. As such SWAP will be reviewing the Charter as further information becomes available from the IIA and will bring a revised charter to the Committee.

In the meantime, we will continue to operate in accordance with our existing charter.

The position of Internal Audit within an organisation's governance framework is best summarised in the Three Lines model shown below.



### Three Lines Model

To ensure the effectiveness of an organisation's risk management framework, the Audit and Governance Committee and senior management need to be able to rely on adequate line functions – including monitoring and assurance functions – within the organisation.

The 'Three Lines' model is a way of explaining the relationship between these functions and as a guide to how responsibilities should be divided:

- the first line – functions that own and manage risk.
- the second line – functions that oversee or specialise in risk management, compliance.
- the third line – functions that provide independent assurance.





## Annual Opinion

The Head of Internal Audit (SWAP Assistant Director) is required to provide an opinion to support the Annual Governance Statement.

Internal Audit has not reviewed all risks and assurances relating to Powys County Council and cannot provide absolute assurance on the internal control environment. Senior Management and Members are ultimately responsible for ensuring an effective system of internal control. Internal Audit Coverage is considered adequate to provide an overall opinion.

On the balance of our 2022/23 audit work for Powys County Council, enhanced by the work of external agencies, I am able to offer a **Reasonable Assurance** opinion in respect of the areas reviewed during the year. Whilst some areas require improvements in internal controls to ensure the achievement of objectives, I do not consider there to be any matters of significant corporate concern.

The Annual Opinion is made based on the following sources of information:

- Completed audits (during the year 2022/23) which evaluate risk exposures (including new and emerging risks) relating to the organisation's governance, operations and information systems, reliability and integrity of information, efficiency and effectiveness of operations and programmes, safeguarding of assets and compliance with laws and regulations.
- Observations from consultancy/advisory support.
- Follow up of previous audit activity, including agreed actions.
- Significant/material risk where management has not accepted the need for mitigating action.
- Implementation of the agreed action to mitigate the risk
- Notable changes to the organisation's strategy, objectives, processes or IT infrastructure.
- Assurances from other providers, including third parties, regulator reports etc.

The following are considered key pieces of audit work that support the annual opinion on the overall adequacy and effectiveness of the organisation's governance, risk management and control:

- Review of risk Management
- IT Assurance Review
- Core Systems Reviews
- Fraud Baseline Maturity and Fraud Risk Assessment

## ➔ Significant Corporate Risks and Concerns

### Definitions of Corporate Risk

#### High Risk

Issues that we consider need to be brought to the attention of both senior management and the Audit Committee.

Most areas reviewed were found to be adequately controlled and whilst I have some concerns regarding certain aspects of the control environment, there were **no areas of significant high corporate risk** reported to the committee during the year in question. However, important areas of concern during the year included:

#### Highways Operations

A series of reports focused on the Highway's Section about many aspects of their operations. The specific reports covered the areas of

- Commissioning;
- Procurement;
- Performance, Delivery and Monitoring;
- Vehicles, assets and Fuel;
- Materials and Stock
- Non-Standard Payments
- Time Recording

The reports found no evidence of misuse but did find several control weaknesses that could increase the opportunity for fraud or limit the chances of its detection. There were also overarching issues around monitoring performance and oversight by management that could provide for a more efficient and effective service to the public.

Scrutiny of the Service has been provided by an Internal Management Board and a sub-group of the Governance and Audit Committee. Follow up reviews of all the original areas form part of the internal audit work programme for 2023/4.

#### Adult Social Care- Continuing Health Care (CHC) & Deprivation of Liberty Safeguards (DoLS)

CHC is the framework that supports the care of individuals across multiple organisations, including the Health Boards and Councils. The review found that the framework for accepting and allocating the cost of care was poorly defined and implemented. The absence of such an embedded and functioning framework affected the relationship and cost management between the parties.

Significant improvement was witnessed after the follow-up of a previous DoLS internal audit report in 2018. However, the fundamental principle of undertaking the assessments within the statutory timescales was still an area of significant concern. The Committee received a presentation from the Head of Service which identified a commitment to improve but did also outline potential legal changes that may impact the service from October 2023 onwards.

A follow up review will be undertaken on both areas in 2023/24.

### Housing Service

Whilst it is acknowledged that the reintegration of services from HOWPS back into the Housing Team has impacted on the delivery of voids and statutory compliance, the Internal audit reviews found that there were areas of delivery that needed improving because of the risk to public health and the need for social housing. In both areas, there were concerns around the quality and usefulness of management data and systems.

Follow up reviews are programmed in the 23/24.

**There has been “Good” or “Some” audit coverage on 11 out of 13 strategic risk identified by the Council.**



### Audit Coverage of Key risk

The coverage map presented to Governance and Audit Committee throughout the year demonstrates that there is a strong linkage between risk and internal audit work. This coverage will become more embedded as integrated risk management further matures across the Council.

Whilst the risk of achieving the corporate objectives was considered for the work programme, SWAP was aware that a change of political administration would form new priorities throughout 2022/23. The revised approach to planning for 23/24 has much stronger links to the Council’s corporate objectives under “Stronger, Fairer, Greener”.

Internal Audit are aware of external inspection reports on

- Audit of Accounts and pension Fund 2021/2
- Annual Governance Statement 2021/2
- Springing Forward Workforce Management
- Corporate Safeguarding
- Inspection of Adult and Children Social Care Jan 23

SWAP have undertaken Follow-up reviews in 6 areas. The agreed action tracker should also be considered as a source of follow-up.

No. of Actions	200
% Completed or WIP	91.5%
No. Outstanding	17

## Areas of Assurance

### Oversight by other Assurance Providers

It is appropriate to draw upon evidence provided from the Council’s second line including:

- Governance -Senior Leadership Team and Cabinet and Committees (including Scrutiny)
- Risk Management (strategic, service, project and also in resilience planning and management)
- Performance Management and Business Planning

Key third line assurances relevant to 2022/23 include those areas where external bodies have engaged in Adults and Children’s Social Care (Care Inspectorate Wales) and Finance (Wales Audit). Both service areas are subject to significant governance and reporting structures which provide a comprehensive trail (and narrative) to support the assurance landscape.

SWAP is not aware of any significant and material corporate risks arising from the work of these assurance functions that would impact on the internal audit opinion. SWAP Internal Audit Services have also noted the significant findings from the assurance providers reports and will be working with Powys County Council to ensure sufficient coverage in these areas in the subsequent financial year where appropriate.

### Follow-up

Generally, the follow-up work confirms the responsive nature of management at Powys County Council in implementing agreed actions to mitigate exposure to areas of significant risk. An extract from the agreed action tracker at the end of the financial year is included in Appendix B.

Over the year, the Internal Audit Team have found Senior Management of Powys County Council to be supportive of Internal Audit findings and responsive to the actions that are agreed. In addition, there is a good relationship with Management whereby they feel they can approach the Internal Audit Team openly in areas where they perceive potential problems, this is reflected by the additional work completed at the request of Senior Management.

Internal Audit facilitated a fraud risk self-assessment exercise in 2021/22 to enabled the work programme to be focused on several higher risk areas during the year. A further refresh by SWAP together with Council Officers in 2022/23 has guided the future work programme.

In addition, the Council has recognised the increasing risk of fraud in the strategic risk register.

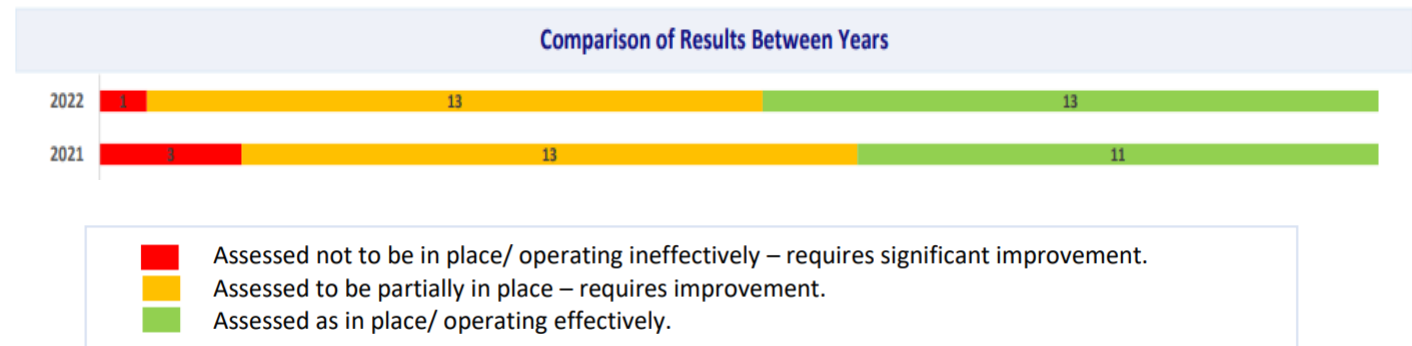
There has been increased coordination between Internal Audit and Counter Fraud in 2023.

SWAP will work with the Council to implement the outstanding actions.

SWAP’s audit review found the risk management process was “Implemented” but the Council still needed to further embed risk management deeper into its culture and workforce.

## Counter Fraud

An initial fraud maturity baseline review was undertaken in 2020-21 by SWAP that has been subject to a follow up review in 2022/23. The baseline assessment provides the organisation with a corporate view of the organisation’s fraud maturity, in line with the Fighting Fraud and Corruption Locally Strategy 2020. SWAP is pleased to report that some good progress has been made since the first review (2021) and this is shown in the chart below. In the latest 2022 assessment, the fully compliant areas increased from 11 to 13. The 13 amber areas remain the same and the not in place/ not operating effectively areas decreased from 3 to 1. This action referrers to the Council have a detailed fraud operational response plan.



## Risk Management

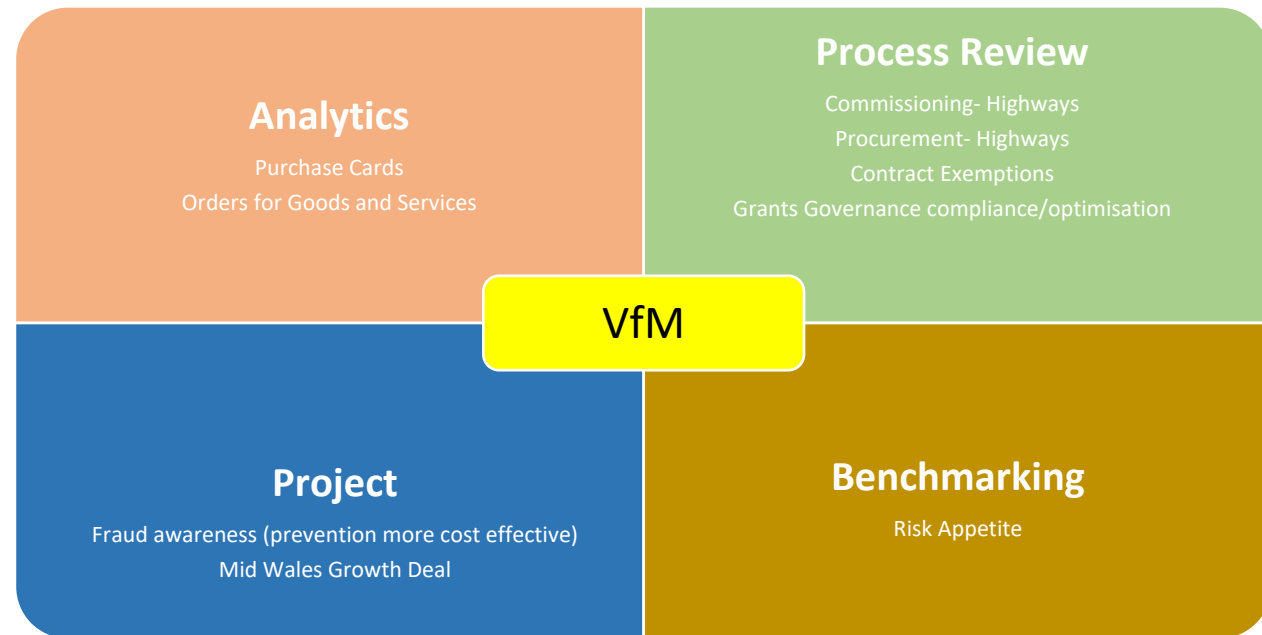
The Council’s risk management team continue to develop and embed risk management frameworks and the associated mindset which acknowledges the value of risk and opportunity management in service delivery.

## Value for Money

Best value for money is defined as the most advantageous combination of cost, quality, and sustainability to meet customer requirements.

The graphic shows how VfM principles have aligned to Internal Audit work

Internal Audit reviews often include aspects of VfM in their scope with many of the concepts overlapping with risk, control and governance considerations. That said, there are some reviews which are more naturally weighted towards VfM considerations.



# Summary of Audit Work 2020/21

At the conclusion of audit assignment work each review is awarded a "Control Assurance Definition"

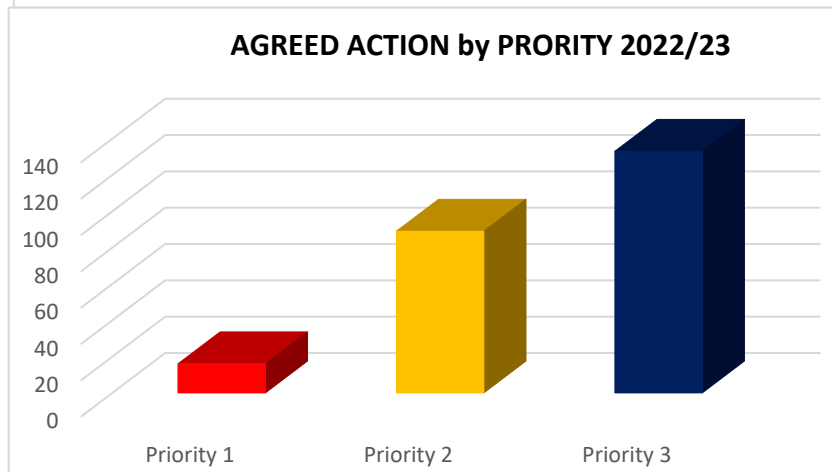
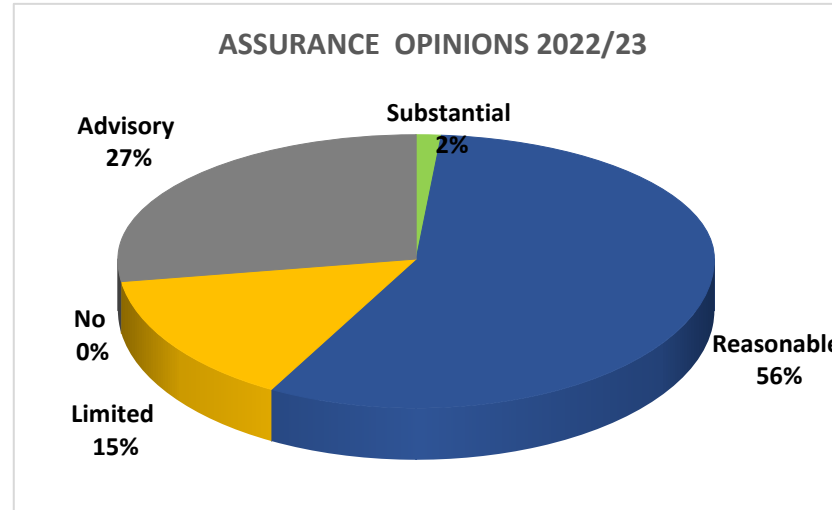
## Assurance Definitions

<b>No Assurance</b>	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.
<b>Limited</b>	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.
<b>Reasonable</b>	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
<b>Substantial</b>	A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.



## Summary of Audit Opinion

The graphs below indicates the spread of assurance opinions and priority of actions across our work during the past year.



We rank our actions on a scale of 1 to 3, with 3 being medium or administrative concerns to 1 being areas of major concern requiring immediate corrective action

### Added Value

Extra feature(s) of an item of interest (product, service, person etc.) that go beyond the standard expectations and provide something more while adding little or nothing to its cost.

SWAP produces a monthly newsletter called “News Round-up” that highlights topical issues in the public sector audit arena.



### Added Value

Throughout the year, SWAP strives to add value wherever possible i.e., going beyond the standard expectations and providing something ‘more’ while adding little or nothing to the cost.

#### **Benchmarking**

During the year we have provided benchmarking data across either the SWAP partnership or the wider reach of the Local Authority Chief Auditors Network (LACAN) for:

- Adult Safeguarding
- Sector and Partner Risks
- Licencing
- Risk Management

#### **Innovations and Enhancements to our Audit Process**

We have seen the continued use and embedding of the innovations and enhancements we made during the 2022/23 financial year including:

- The move to a new audit management system during the year. The benefit of improved visibility and agility of a real time system will be granted to the Client in 23/24 through dashboards.





Internal Audit is responsible for conducting its work in accordance with the Code of Ethics and Standards for the Professional Practice of Internal Auditing as set by the Institute of Internal Auditors and further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS).



SWAP Performance

SWAP’s performance is subject to regular monitoring and review by both the SWAP Board of Directors and the Owners Board. The respective performance results for Powys County Council for the 2022/23 year are as follows:

Performance Target	
<u>Value to the Organisation</u>	
Client views on whether our audit work met or exceeded expectation, in terms of value to their areas across 22/23 year	100%

Internal Audit is responsible for conducting its work in accordance with the Code of Ethics and Standards for the International Professional Practice Framework (IPPF) of Internal Auditing as set by the Institute of Internal Auditors and further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS). Both standards require an Internal and External Assessment (at least every five years) of the Internal Audit function.

SWAP exceeds this with an assessment undertaken every three years. The latest assessment undertaken in March 2020 found SWAP to be ‘Generally Conforming’ with the International Professional Practices Framework and the Public Sector Internal Auditing Standards (PSIAS) and is the highest level of performance awarded. As a result of the External Assessment, a Quality Assessment Improvement Plan (QAIP) is produced and maintained. This document is a live document, reviewed regularly by the SWAP Board to ensure continuous improvement. As the International Professional Practices Framework is currently under review, SWAP is considering when it will undertake its next External Assessment which is not formally required until March 2025.

Internal Audit Activity and Work Programme for 2022/23						APPENDIX A		
Quarter	Service	Assignment	Scope	Status	Opinion	Actions by Priority		
						P1	P2	P3
Q1&2	Highways	<b>Commissioning</b>	Reviewing commissioning activities to ensure that critical road defects are repaired promptly and effectively.	Complete	<b>REASONABLE</b>	1	2	2
Q1&2	Highways	<b>Procurement</b>	Value for Money is achieved when procuring services whilst protecting against the risk of fraud.	Complete	<b>REASONABLE</b>	1	2	4
Q1&2	Highways	<b>Delivery, Monitoring &amp; Reporting</b>	Ensuring the Service have effective oversight over operations from a performance and financial perspective.	Complete	<b>LIMITED</b>	2	0	2
Q1&2	Highways	<b>Vehicles, Assets &amp; Fuel</b>	Ensuring the use of vehicle and plant is effectively monitored and there are no signs to misuse. Ensuring a complete record of all fuel transactions to enable effective monitoring to protect against fuel theft.	Complete	<b>LIMITED</b>	1	2	0
Q1&2	Highways	<b>Materials and Stock</b>	Material and stock are effectively controlled to provide assurance that the items have been used for the delivery of commissioned work.	Complete	<b>REASONABLE</b>	0	1	2
Q1&2	Housing	<b>Supporting People Grant- Certification</b>	Grant Certification required by Welsh Government to give assurance that expenditure items are legitimate.	Complete	<b>CERTIFIED</b>			
Q1&2	Schools	<b>School Forum - Risk and Control in Schools</b>	Supporting schools by providing training on the audit process and the key areas of governance and control.	Complete	<b>ADVISORY</b>			
Q1&2	Finance	<b>Risk Appetite Benchmarking</b>	Using benchmarking and Partner Sources to support the Council on developing a risk appetite	Complete	<b>ADVISORY</b>			
Q1&2	Finance	<b>Covid Grant Certification</b>	Reviewing expenditure for legitimacy as part of covid grant arrangements.	Complete	<b>CERTIFIED</b>			

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Quarter	Service	Assignment	Scope	Status	Opinion	Actions by Priority		
						P1	P2	P3
Q1&2	Finance	<b>Contract Exemptions</b>	To ensure that proper planning and value for money is delivered when a contract exemption is employed.	Complete	<b>REASONABLE</b>	0	2	0
Q1&2	Schools	<b>Ysgol Maesydderwen-Secondary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	<b>REASONABLE</b>	0	1	3
Q1&2	Adults & Children	<b>Continuing Health Care</b>	Ensure that effective partnership working is in place to allow effective financial arrangements.	Complete	<b>LIMITED</b>	0	4	0
Q1&2	Finance	<b>Fraud -Those Charged with Governance</b>	Contributing to the Council's assessment of fraud risk	Complete	<b>ADVISORY</b>			
Q1&2	Finance	<b>National Fraud Initiative Report Update Q4 2021/22</b>	Providing data and coordinating investigations to ensure potential fraud cases are identified and investigated.	Complete	<b>LIMITED</b>	1	0	0
Q1&2	Public Protection	<b>Estate Agents Grant-Certification</b>	Grant Certification required by UK Governments to obtain the NTSB grant	Complete	<b>CERTIFIED</b>			
Q1&2	Schools	<b>Gwernfyed High School - Secondary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	<b>SUBSTANTIAL</b>	0	2	1
Q1&2	Schools	<b>Ysgol Bro Hyddgen - Secondary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	<b>REASONABLE</b>	0	1	6
Q1&2	Schools	<b>Bryn Hafren - Primary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	<b>REASONABLE</b>	0	1	3
Q1&2	Schools	<b>Berriew - Primary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	<b>REASONABLE</b>	0	5	4

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Quarter	Service	Assignment	Scope	Status	Opinion	Actions by Priority		
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						P1	P2	P3
Q1&2	Schools	<b>St Mary's - Primary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	<b>REASONABLE</b>	0	5	2
Q1&2	Schools	<b>Guilfield- Primary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	<b>REASONABLE</b>	0	7	2
Q1&2	Schools	<b>Llanidloes - Primary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	<b>REASONABLE</b>	0	3	0
Q1&2	Schools	<b>Penygloddfa - Primary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	<b>REASONABLE</b>	0	8	2
Q1&2	Adults & Children	<b>Deprivation of Liberty safeguarding</b>	Ensuring that the Council have improved performance on undertaking best interest assessments and meeting statutory guidelines.	Complete	<b>LIMITED</b>	1	1	0
Q1&2	Support	<b>Archiving Powys IA Records</b>	Supporting the Council with the management of audit Files/ information from Pre-SWAP	Complete	<b>ADVISORY</b>			
Q1&2	Support	<b>Action Tracking Reports Q1 &amp; Q2, Q3</b>	Reports tracking the implementation of internal audit agreed actions.	Complete	<b>ADVISORY</b>			
Q1&2	Finance	<b>Suspense Account Income</b>	Examining unallocated income and identifying the root cause and user behaviour for non-compliance	Complete	<b>REASONABLE</b>	0	0	3
Q1&2	Finance	<b>Mid Wales Growth Deal</b>	Audit certification of expenditure and Governance controls for 21/22	Complete	<b>CERTIFIED</b>			
Q1&2	Finance	<b>Purchase cards- Q1</b>	On-going continuous review of purchase card transactions to identify non-compliance with council rules and exceptions that require more detailed investigation. The outcome will improve customer behaviour and more sound financial control.	Complete	<b>REASONABLE</b>	0	1	6
Quarter	Service	Assignment	Scope	Status	Opinion	Actions by Priority		

						P1	P2	P3
Q1&2	Finance	<b>Fraud Risk Maturity Assessment -Follow up</b>	Following up on the fraud Maturity baseline assessment to give committee assurance that the Council is preventing and detecting fraud.	Complete	<b>REASONABLE</b>	0	2	3
Q1&2	Finance	<b>Purchase cards Q2</b>	Continuous audit programme identifying spending behaviours and controls for Q2- Advisory	Complete	<b>REASONABLE</b>	0	0	0
Q1&2	Finance	<b>National Fraud Initiative Report Update</b>	Providing data and coordinating investigations to ensure potential fraud cases are identified and investigated. Rolled into new exercise for 22/23	Complete	<b>REASONABLE</b>	0	0	0
Q3	Housing	<b>Supporting People Grant 21/22</b>	Welsh Government require validation and certification of claim expenditure	Complete	<b>CERTIFIED</b>			
Q3	Housing	<b>Enable Grant 21/22</b>	Welsh Government require validation and certification of claim expenditure	Complete	<b>CERTIFIED</b>			
Q1/2/3	Finance	<b>Risk in Projects and Partnerships</b>	Review the Council visibility, governance and risk management on significant partnerships and projects	Complete	<b>REASONABLE</b>	0	1	6
Q2&3	Finance	<b>Risk Management</b>	Ensure that the Council's Risk management process are agile, timely and are forward thinking in terms of risk appetite.	Complete	<b>REASONABLE</b>	0	1	7
Q1/2/3	Finance	<b>Orders for Goods and Services</b>	Analysing data to identify noncompliance and risk that goods are not procured soundly. Further detailed analysis to identify the root cause of any failures.	Complete	<b>REASONABLE</b>	0	4	1
Q3&4	Schools	<b>Llandinam- Primary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	<b>REASONABLE</b>	0	3	8
Quarter	Service	Assignment	Scope	Status	Opinion	Actions by Priority		
						P1	P2	P3

Q3&4	Schools	<b>Cradoc - Primary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	REASONABLE	1	2	5
Q3&4	Schools	<b>Presteigne - Primary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	REASONABLE	0	3	6
Q3&4	Schools	<b>Leighton - Primary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	LIMITED	2	2	6
Q3&4	Finance	<b>Business Rates (Liability and Billing)</b>	Ensure liability of Business rates are effectively determined in light of eligibility of Covid Grants for businesses.	Complete	REASONABLE	0	1	1
Q3	Finance	<b>Purchase Cards – Continuous Audit Q3</b>	Continuous audit programme identifying spending behaviours and controls for Q3.	Complete	REASONABLE	0	0	0
Q2&3	Housing	<b>Statutory Compliance</b>	Ensure improvement in the achievement of the Council statutory responsibility to ensure properties are compliant and safe. Delays caused by Client inactivity.	Complete	LIMITED	2	1	3
Q3&4	Customer/Digital	<b>School Meals Debt-parent pay</b>	The review debt collection and outstanding debt before the Council transitions to free school meals	Complete	REASONABLE	0	2	3
Q4	Schools	<b>Ysgol Pont Robert Primary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	REASONABLE	0	0	7
Q3&4	Finance	<b>Main Accounting</b>	Ensure the accounting transactions are made in accordance with financial regulations	Complete	REASONABLE	0	2	2
Q3&4	Digital	<b>Technology Assisted Framework Review</b>	An advisory review to assess specific risks highlighted as well as providing direction and scope for the targeted provision of future technology and digital audit	Complete	ADVISORY			

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Quarter	Service	Assignment	Scope	Status	Opinion	Actions by Priority		
						P1	P2	P3

Q3&4	Finance	<b>NFI 2022/23 Exercise -Process Checklist</b>	Review the governance, administration, and controls the investigation of NFI Fraud matches	Complete	<b>ADVISORY</b>			
Q3&4	Finance	<b>Pension Administration</b>	Review the administration of Pension transactions to ensure funds are effectively controlled.	Complete	<b>REASONABLE</b>	0	0	6
Q3&4	Finance	<b>NFI 2022- Data &amp; Fair Processing</b>	GDPR Compliance, Data uploads, Investigation readiness and roll out of matches.	Complete	<b>ADVISORY</b>			
Q3&4	Housing	<b>Voids – Follow up</b>	To follow up a previous limited report on the administration, control and reporting of void properties.	Complete	<b>FOLLOW UP-LIMITED</b>	0	2	0
Q2&3	Corporate	<b>Whistle Blowing</b>	Review the Council's whistleblowing arrangements to give assurance that fraud and corruption measures are in place.	Complete	<b>REASONABLE</b>	0	1	2
Q4	Finance	<b>Fraud Risk Assessment- Stage 2</b>	A follow up to the original assessment picking up those Services that didn't respond to the original assessment	Complete	<b>ADVISORY</b>			
Q1,2,3&4	Support	<b>Committee / Management Reporting</b>	Supporting Council Management Teams and Governance and Audit Committee.	Complete	<b>SUPPORT</b>			
Q1,2,3&4	Support	<b>Planning &amp; Engagement</b>	Engaging with Services to develop risk-based plans	Complete	<b>SUPPORT</b>			
Q2&3	Adults & Children	<b>Managing Financial Commitments</b>	Review the way in which Childrens Service manage budgets commitments to enable effective budget management.	Complete	<b>REASONABLE</b>	0	1	1
Q3&4	Workforce	<b>Health &amp; Safety</b>	Review corporate guidance, oversight and governance arrangements with Health and Safety legislation. A further review of OD Service compliance will be undertaken in a future audit cycle.	Complete	<b>REASONABLE</b>	0	1	1
<b>Quarter</b>	<b>Service</b>	<b>Assignment</b>	<b>Scope</b>	<b>Status</b>	<b>Opinion</b>	<b>Actions by Priority</b>		
						<b>P1</b>	<b>P2</b>	<b>P3</b>

Q3&4	Schools	<b>Churchstoke - Primary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	<b>LIMITED</b>	3	2	7
Q2&3	Corporate	<b>Complaints</b>	Give assurance to the Audit Committee that the administration of Complaints is effective	Complete	<b>REASONABLE</b>	0	1	2
Q3&4	Workforce	<b>Safeguarding</b>	Review the Councils DBS checking in payroll following on from a Wales Audit review	Complete	<b>REASONABLE</b> <b>LIMITED</b>	0 1	2 5	2 3
Q4	Schools	<b>Radnor Valley Primary</b>	Review Governance, financial administration and Asset Management at school using 360 assessment	Complete	<b>REASONABLE</b>	0	2	9



Internal Audit Progress Report as at end Quarter 4 2022/23

← to Detailed Summary

### Powys County Council Insight Dashboard

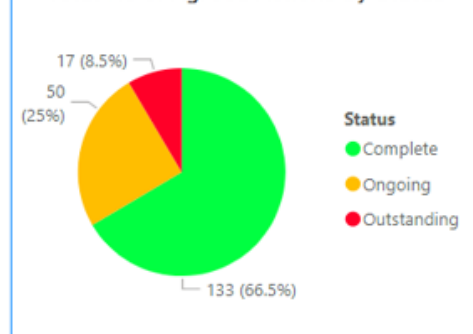
Drill down to Agreed Actions



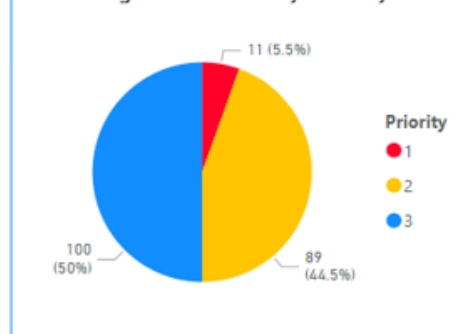
#### Agreed Actions made by Internal Audit



#### Total No of Agreed Actions by Status



#### Agreed Actions by Priority



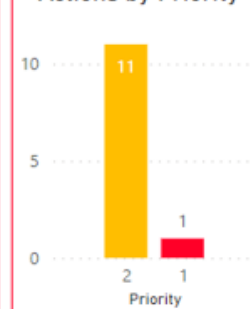
#### Priority 1&2 requiring immediate attention



#### Outstanding Agreed Actions by Directorate

Directorate/ Service	Overdue 30 to 60 Days	Overdue up to 30 Days	Total
Finance	10	0	10
Transport	1	1	2
<b>Total</b>	<b>11</b>	<b>1</b>	<b>12</b>

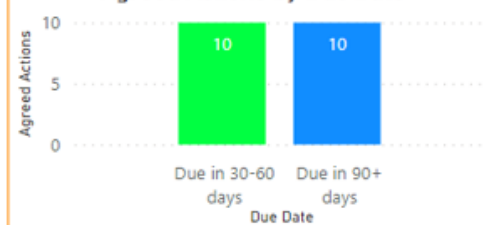
#### Outstanding Agreed Actions by Priority



#### Priority 1&2 Agreed Actions on the Horizon (due in 30 days or less)



#### Agreed Actions by Due Date



#### Priority 3 Agreed Actions that would add value (if implemented)



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**Governance and Audit Committee****Risk Deep Dives****Which Risk will be considered at the Meeting:**

- The Committee will only consider one strategic risk at a meeting and the Service will be advised of the risk to be considered.

**Notice of Attendance at the Meeting:**

- Democratic Services will provide 4 to 6 weeks notice of the need to attend a meeting to the Service involved.

**What is the Role of the Committee:**

- The Committee monitors the Strategic Risk Register on a quarterly basis.
- The purpose of the Deep Dive is for the Committee to gain a greater understanding of the risk.
- The role of the Committee is to act as a critical friend to the Service in relation to the risk and to support the service.
- The Committee's role is not to scrutinise the risk (operational responsibilities) which is a matter for the Council's Senior Management and the Council's Scrutiny Committees.
- The Committee would seek to exchange good practice with other services.

**What will the Committee receive with the agenda for the meeting:**

- The Committee will receive an extract of the Risk Register relating to the specific risk being considered.

**What does the Service need to provide in advance of the meeting / or at the meeting:**

1. **N.B. - Information to Democratic Services as to whether any of the content in the presentation to the Committee will be confidential or not so that the agenda can be structured accordingly.**
2. A Powerpoint presentation – either shared with the Committee in advance or on the day of the meeting.

<b>What is expected of the Service at the meeting:</b>
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1. The Service will make a presentation to the Committee.

**The presentation at the meeting should be precise and coherent, and focus on the key issues and should last no longer than 10 minutes to allow time for the Committee to ask questions.**

What should be covered in the Powerpoint presentation:

- (i) Background to the risk – so that the Committee can understand the context and why it has been identified as a strategic risk and included on the Strategic Risk Register, including.

- How was the risk identified.
- Why it is scored as set out on the register.
- What is the impact on clients, staff, reputational issues.

- (ii) Mitigating Actions:

- Why have the mitigating actions been selected to address the risk.
- What is the timeline target for the reduction of the risk?
- How do the mitigations contribute to reducing the risk.
- Are the mitigating actions having an effect
- Once the mitigations have been implemented what is the risk remaining and is the Cabinet content with the gap?
- If not, what other action is proposed and what are the timescales involved?

2. Responding to Questions by the Committee:

The Committee is likely to focus, though not necessarily exclusively, on the following issues:

- Impact of risk on delivering 'Reimagining Powys'
- Impact of risk on meeting statutory duties;
- Understand the impact of each of the mitigation actions on the inherent risk;
- How does this contribute to the assessment of the residual risk, is there still a gap left.
- How does this relate to the Council's risk appetite;
- Human Resources and workforce;
- Finance and budgets;
- Operational Performance;
- Systems and Processes;
- IT and Digital;
- Partnership issues, if relevant

The service should bring additional issues if relevant.

**How does this work link with the work of Scrutiny Committees:**

- The Committee will invite the Chairs of a relevant Scrutiny Committee to the meeting as there may be matters which the Governance and Audit Committee may recommend to a scrutiny committee for consideration.

**What happens if the Committee is not content with the response received by a Service following a Deep Dive:**

- Recommendations to Cabinet; or
- Recommendation for Scrutiny to work with the Service on any improvements; or
- Recommendations to EMT;

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