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TO THE CHAIRMAN AND MEMBERS OF THE STANDARDS AND AUDIT COMMITTEE

You are hereby summoned to attend a meeting of the Standards and Audit Committee to be held on Thursday, 18 July 2019 at 7.00 pm in the Council Chamber, Civic Offices, Gloucester Square, Woking, Surrey GU21 6YL.

The agenda for the meeting is set out below.

RAY MORGAN
Chief Executive

NOTE: Filming Council Meetings

Please note the meeting will be filmed and will be broadcast live and subsequently as an archive on the Council's website (www.woking.gov.uk). The images and sound recording will also be used for training purposes within the Council. Generally the public seating areas are not filmed. However by entering the meeting room and using the public seating area, you are consenting to being filmed.

AGENDA

PART I - PRESS AND PUBLIC PRESENT

1. Minutes

To approve the minutes of the meetings of the Standards and Audit Committee held on 11 April and 20 May 2019 as published.

2. Apologies for Absence

To receive any apologies for absence.

3. Declarations of Interest

To receive declarations of disclosable pecuniary and other interests from Members in respect of any item to be considered at the meeting.

In accordance with the Officer Procedure Rules, the Head of Democratic and Legal Services, Peter Bryant, will declare a disclosable personal interest (non-pecuniary) in any items under which the Thamesway Group of Companies, Brookwood Cemetery or Duke's Court are discussed, arising from his position as a Director of the subsidiary companies. The interest is such that speaking is permissible.

In accordance with the Officer Procedure Rules, the Finance Director, Leigh Clarke, will declare a disclosable personal interest (non-pecuniary) in any items under which Duke's Court is discussed, arising from her position as a Director of Dukes Court Owner T S a r l. The interest is such that speaking is permissible.

4. Urgent Business

To consider any business that the Chairman rules may be dealt with under Section 100B(4) of the Local Government Act 1972.

Matters for Determination

5. Internal Audit Annual Report 2018/19 STA19-008 (Pages 3 - 10)

Reporting Person – James Graham

Matters for Recommendation

6. External Audit Report to those Charged with Governance (ISA 260) 2018/19 ST19-006 – report to follow

Reporting Person – Leigh Clarke

Matters for Determination

7. Annual Governance Statement 2018/19 STA19-007 (Pages 11 - 44)

Reporting Person – Leigh Clarke

8. Health and Safety Annual Report STA19-009 (Pages 45 - 62)

Reporting Person – Peter Bryant

9. Registration of Interests for Members Elected in May 2019 STA19-010 (Pages 63 - 64)

Reporting Person – Peter Bryant

10. Work Programme STA19-011 (Pages 65 - 67)

Reporting Person – Peter Bryant

AGENDA ENDS

Date Published - 10 July 2019

For further information regarding this agenda and arrangements for the meeting, please contact Doug Davern on 01483 743018 or email doug.davern@woking.gov.uk



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STANDARDS AND AUDIT COMMITTEE – 18 JULY 2019

INTERNAL AUDIT ANNUAL REPORT 2018/19

Executive Summary

This report contains the Head of Internal Audit's annual assurance opinion on the control environment of the Council based on internal audit work undertaken during the 2018/19 financial year. This opinion forms an essential part of the assurance gathering process used to inform the compilation of the Council's Annual Governance Statement which is included in the annual accounts.

Overall controls are deemed to be effective within the Council. Where weaknesses have been identified, management have either implemented or agreed timescales for implementing Internal Audit recommendations in order to improve the control environment.

Recommendations

The Committee is requested to:

RESOLVE That the annual assurance opinion of the Head of Internal Audit over the control environment be noted.

The Committee has authority to determine the above recommendations.

Background Papers: None.

Reporting Person: James Graham, Head of Internal Audit
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Contact Person: Leigh Clarke, Finance Director
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Date Published: 10 July 2019

STA19-008

1.0 Introduction

- 1.1 The purpose of internal audit is to provide the Council, through the Standards and Audit, Committee and the Director of Finance (as the Chief Finance Officer) with an independent and objective opinion on risk management, control and governance and their effectiveness.
- 1.2 This annual report forms part of the framework of assurances that is received by the Council and should be used to help inform the Annual Governance Statement. Internal Audit also has an independent and objective consultancy role to help line managers improve risk management, governance and control.
- 1.3 Our professional responsibilities as internal auditors are set out within Public Sector Internal Audit Standards (PSIAS).
- 1.4 The report summarises the internal audit activity for 2018/19 and, therefore, does not include all matters which came to our attention during the year. Such matters have been included within our summary reports to Committee during the course of the year.

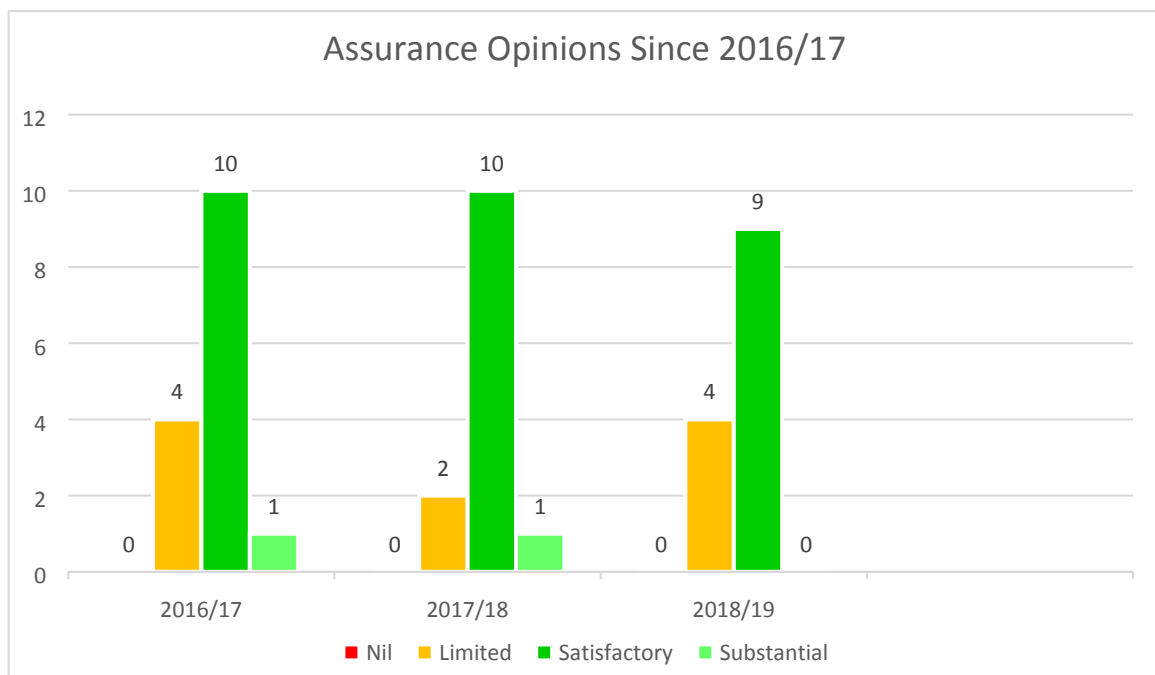
2.0 Internal Audit Opinion 2018/19

- 2.1 Internal Audit has reviewed the effectiveness of the Council's systems of internal control for 2018/19 and taken into account other relevant assurances obtained from internal and external sources.
- 2.2 Arrangements for internal control in individual business areas are generally effective although there are some areas of Council activity where the expected levels of control have not been fully achieved. Where this is the case effective actions have been taken, or are in progress, in response to internal audit recommendations made.
- 2.3 Overall control is deemed to be effective within the Council.

3.0 Delivery of the 2018/19 Internal Audit Plan

- 3.1 The Internal Audit function is outsourced to Mazars LLP, with the Head of Audit role also being undertaken by Mazars. From 2018/19 IT audit work has also been undertaken by Mazars.
- 3.2 The audit plan was agreed by the Committee in March 2018, with 303 audit days allocated. This number also includes the 24 days allocated to the Head of Audit role. The audits on the 2018/19 plan, comprise a mixture of, key financial systems, service specific (operational and financial), corporate wide and IT reviews.
- 3.3 Out of 20 reviews planned for the year, one was carried forward into the 2019/20 year, 14 are finalised, 1 is at draft report stage and 3 are in progress as at the end of June 2019. One further audit is starting on 22 July. Appendix 1 provides a summary of progress against the 2018/19 audit plan.
- 3.4 As at the time of writing there are 23 days left to be delivered on audits in progress.
- 3.5 A summary of the assurance opinion given and number of recommendations raised for each audit is provided in **Appendix 1**.
- 3.6 Each Internal Audit report gives an overall assurance opinion based on the level of controls found to be in place in the area being reviewed. In 2018/19 11 (69%) of audits finalised received a satisfactory assurance opinion and 4 (31%) received a Limited assurance opinion.
- 3.7 The chart below shows the assurance opinions provided since 2016/17. The distribution of assurance has remained largely consistent but indicates an increase in limited assurance reports issued when compared to 2017/18.

Details of the issues raised in audit reports are included in summary reports that have been made available to members.



- 3.8 For the Limited assurance reports issued in 2018/19 action has already been taken by management in response to the recommendations raised and in many cases the issues raised had already been identified by management. I am satisfied that control in these areas has improved since the audits were undertaken.
- 3.9 In addition to Internal Audit reviews carried out from the annual plan, Internal Audit have also given advice/assistance to business areas on issues of risk and control during the year including risk and control advice on supplier resilience.

4.0 Follow Up

- 4.1 Internal audit recommendations are categorised according to priority (High, Medium and Low). This gives management an indication on the urgency of implementing the suggested control.
- 4.2 The Council's improvement tracking tool, Shikari, was used to record all recommendations made in Internal Audit reports and to monitor their implementation status. The Shikari system was decommissioned in 2018 and a spreadsheet tracking system has been adopted while a new SharePoint based system is developed.
- 4.3 Internal Audit request updates from management to monitor levels of implementation. This is supplemented by spot checks in the business area concerned to confirm that the recommendation is being implemented in practice. A procedure is in place to escalate recommendations that have not been implemented to CMG and finally to this Committee where necessary.
- 4.4 In 2018/19 9 high and medium priority recommendations due for implementation within the year were followed up to confirm that they had been implemented. Of the 9 recommendations raised, 7 were implemented and one was no longer applicable. One medium priority recommendation was not fully implemented; however, the recommendation had been implemented to the extent that no further follow up is considered necessary.

5.0 Implications

Financial

- 5.1 There are minimal financial implications around the implementation of internal audit recommendations. Some audit recommendations are designed to improve value for money and financial control

Human Resource/Training and Development

- 5.2 Some audit recommendations need resource to put in place.

Community Safety

- 5.3 None.

Risk Management

- 5.4 Internal Audit identifies weaknesses in the control environment. Implementation of recommendations therefore improves the control environment and hence the management of risk.

Sustainability

5.5 There is minimal impact on sustainability issues.

Equalities

5.6 There is minimal impact of equalities issues.

REPORT ENDS

APPENDIX 1

| Audit | Progress | Assurance Opinion | Recommendations | | |
|---|---------------|-------------------|-----------------|-----------|-----------|
| | | | High | Medium | Low |
| People | | | | | |
| Grants to Voluntary Organisations | Final | Satisfactory | 0 | 2 | 2 |
| Community Safety | Final | Satisfactory | 0 | 1 | 0 |
| New Vision Homes Contract Management | Final | Limited | 1 | 9 | 0 |
| Homelessness Reduction Act | Draft | Limited | 2 | 3 | 0 |
| HMO and Selective Housing Licensing | Deferred | - | - | - | - |
| Place | | | | | |
| Building Control | Final | Satisfactory | 0 | 2 | 4 |
| Emergency Planning | Final | Satisfactory | 0 | 1 | 5 |
| Air Quality Monitoring and Management | Final | Satisfactory | 0 | 3 | 3 |
| Waste Collection | In Progress* | - | - | - | - |
| Asset Management | In Progress | - | - | - | - |
| Us | | | | | |
| Freedom of Information Requests | Final | Satisfactory | 0 | 2 | 1 |
| Corporate | | | | | |
| Key Financial Control Testing | Final | N/A | 0 | 1 | 0 |
| Sheerwater Regeneration Governance | Final | Satisfactory | 1 | 2 | 0 |
| Thamesway Group Companies | Final | Satisfactory | 0 | 1 | 1 |
| Business Continuity | Final | Limited | 2 | 3 | 0 |
| Supplier Resilience | Final | N/A | - | - | - |
| Sickness Absence Management | Final | Satisfactory | 0 | 2 | 1 |
| IT | | | | | |
| Windows Operating System Network Management | Final | Limited | 2 | 5 | 1 |
| IT Strategy | In progress | - | - | - | - |
| FlexiRoute Application | 22 July start | - | - | - | - |
| Total | | | 8 | 37 | 18 |

STANDARDS AND AUDIT COMMITTEE – 18 JULY 2019

ANNUAL GOVERNANCE STATEMENT 2018-19

Executive Summary

The Annual Governance Statement demonstrates the effectiveness of the Council's corporate governance environment and incorporates the statement on internal control (SIC) requirements to demonstrate the Council has appropriate internal control mechanisms in place.

The evaluation of governance arrangements is based around the CIPFA/SOLACE governance framework 'Delivering Good Governance in Local Government' which brings together an underlying set of legislative requirements, governance principles and management processes relating to the whole organisation.

The framework has seven core principles of governance focusing on the arrangements, systems and processes for the direction and control of the organisation and its activities through which it accounts to, engages with and, where applicable, leads the community.

To assist in the assessment process CIPFA has produced a detailed matrix of questions for the statement in accordance with the framework's governance principles. This matrix has been used as the basis for the governance analysis attached at Appendix 2.

Arising from the assessment is a requirement to produce a Governance Statement and action plan to correct any identified problems in the governance arrangements. The Governance Statement is attached at Appendix 1. The statement will be published separately on the internet as well as forming part of the Statement of Accounts.

Recommendations

The Committee is requested to:

RESOLVE That the Annual Governance Statement be received.

| |
|---|
| The Committee has the authority to determine the recommendation(s) set out above. |
|---|

Background Papers: None.

Reporting Person: Leigh Clarke, Finance Director
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Date Published: 10 July 2019

STA19-007

1.0 Introduction

- 1.1 The Council conducts its business within a governance framework. It is an interrelated system that brings together an underlying set of legislative requirements, governance principles and management processes.
- 1.2 Documents and processes that provide some of the boundaries to this governance framework include:
 - The Constitution;
 - Local and statutory Codes of practice, Policies and Strategies;
 - Management Arrangements and Scheme of Delegations;
 - Service and Performance Plans;
 - Performance Management Systems; and
 - Internal Control Processes.
- 1.3 In essence, the Annual Governance Statement is a formal statement that recognises, records and publishes an authority's governance arrangements as defined in the framework.
- 1.4 The Annual Governance Statement documents the corporate governance environment.
- 1.5 The CIPFA/SOLACE governance framework 'Delivering Good Governance in Local Government' brings together an underlying set of legislative requirements, governance principles and management processes relating to the whole organisation and sets out the fundamental principles of corporate governance. These are contained in 7 core principles.
- 1.6 To assist in the assessment process CIPFA has produced a detailed matrix of questions for the statement in accordance with the framework's governance principles. This matrix has been used as the basis for the governance assessment attached at Appendix 2.

2.0 Implications

Financial

- 2.1 There are no financial implications of this work.

Human Resource/Training and Development

- 2.2 Ongoing training will be provided in order to ensure compliance with the governance and assurance framework.

Community Safety

- 2.3 There are no implications for community safety.

Risk Management

- 2.4 The development of risk management and business continuity is an ongoing improvement for the Council.

Sustainability

- 2.5 There are no implications for sustainability.

Equalities

2.6 There are no implications for equalities.

3.0 Conclusions

3.1 The assessment demonstrates that the Council has the documentation and procedures in place that provide a strong environment of governance and assurance.

REPORT ENDS

ANNUAL GOVERNANCE STATEMENT 2018/19

1. Scope of Responsibility

Woking Borough Council (The Authority) is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively.

The Authority also has a duty under the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness.

In discharging this overall responsibility, the Authority is responsible for putting in place proper arrangements for the governance of its affairs and facilitating the effective exercise of its functions, which includes arrangements for the management of risk and the system of internal control.

The Authority has approved and adopted arrangements for corporate governance, which are consistent with the principles of the CIPFA/SOLACE Framework *Delivering Good Governance in Local Government*. The framework consists of 7 core principles each with sub principles. These are considered in more detail in section 3.

This statement explains how the Authority meets the requirements of Accounts and Audit (England) Regulations 2015, regulation 6(1)(a), which requires all relevant bodies to conduct a review at least once in a year of the effectiveness of its system of internal control and include a statement reporting on the review with any published Statement of Accounts. This Statement is prepared in accordance with proper practices in relation to accounts.

2. The purpose of the governance framework

Governance comprises the arrangements put in place to ensure that the intended outcomes for stakeholders are defined and achieved. To deliver good governance in the public sector, governing bodies and individuals working for public sector entities must try to achieve their entity's objectives while acting in the public interest at all times.

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

The quality of governance arrangements underpins the levels of trust in public services and is therefore fundamental to the Authority's relationship to customers and residents. Trust in public services is also influenced by the quality of services received and also by how open and honest an Authority is about its activities.

A framework for the implementation of good governance allows the Authority to be clear about its approach to discharging its responsibilities and to promote this internally, to officers and members and externally to partners, stakeholders and residents.

The arrangements required for gathering assurances for the preparation of the Annual Governance Statement provide an opportunity for the Authority to consider the robustness of the governance arrangements in place and to consider this as a corporate issue that affects all parts of the Authority. It also helps to highlight those areas where improvement is required which are contained in the improvement plan.

The governance framework has been in place at the Authority for the year ended 31 March 2019 and up to the date of approval of the annual report and statement of accounts.

The key elements of the systems and processes that comprise the Authority's governance arrangements are documented in a detailed supporting analysis. The Authority has responsibility for conducting, at least annually, a review of the effectiveness of its governance framework.

The review of effectiveness is informed by the work of the Corporate Management Group and Senior Managers within the Authority who have responsibility for the development and maintenance of the governance environment, the Head of Internal Audit's Annual Report, and by comments made by the external auditors and other review agencies and inspectorates. The Corporate Management Group review the arrangements and provide an assurance that the Authority is operating within local and statutory frameworks. The group has approved this statement.

3. The Governance Framework

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

There is a comprehensive staff handbook and Behaviour and Skills Framework setting out the Authority's expectations regarding behaviour and the procedures for non compliance. Staff are made aware, through induction and the performance management framework, of the Authority's expectations in terms of standards of behaviour and compliance with agreed policies and codes of conduct.

There is also a Members' Code of Conduct which sets out the standards of behaviour to be followed by Members. Both codes take into account 'The Seven Principles of Public Life' which are included in the Localism Act 2011. The principles are: selflessness, integrity, objectivity, accountability, openness, honesty and leadership.

The Authority is clear about its leadership responsibilities for services, whether provided directly, through partners or third parties. We work closely with partners and influence third parties to make sure they deliver to agreed levels of quality and are accountable for what they do.

We have a clear commitment to ensure services deliver an appropriate combination of quality, value and choice to the community.

There is a complaints procedure which provides for a response from the service manager and allows for the complainant to appeal. Complainants are advised of their right to refer the matter to the Local Government Ombudsman, Housing Ombudsman or Information Commissioner as appropriate. This is publicised in the offices and on our website.

Complaints submitted under the Members Code of Conduct are reported to the Standards and Audit Committee which also receives regular reports on complaints which have been referred to the Ombudsman. The Arrangements for dealing with complaints made by Members against other Members were reviewed during the year and a new protocol was agreed by Council in April 2019.

A report on complaints received by the Council is received by the Overview and Scrutiny Committee.

The Scheme of Delegation within the Constitution requires Members and Officers to ensure that all decisions are compliant with policies, procedures, laws and regulations. The key documents within the Governance and Policy Framework are maintained and regularly reviewed including the Constitution itself.

Principle B – Ensuring openness and comprehensive stakeholder engagement

The Council's Vision and Values have been developed with the three pillars of People Place and Us to provide clarity on the role and priorities of the Authority in relation to its residents and partners/stakeholders.

The Constitution clearly defines the purpose of community leadership, effective scrutiny, and public accountability in terms of roles and responsibilities and functions. The Authority is committed to openness and acting in the public interest.

Woking Joint Committee is a committee between Woking Borough Council and Surrey County Council and makes decisions on certain services, monitors the effectiveness of public services, partnerships and joint initiatives. Local people are encouraged to take part. Members represent the Authority working formally and informally with voluntary groups.

The Council is the ultimate decision-making body and the principal forum for political debate. The Council sets the Policies and Strategies for the Authority and appoints the Leader of the Council, who then determines the appointment of the Deputy Leader and the members of the Executive.

The Executive acts within the approved policy framework and budget and leads preparation of new policies and budget. Each member of the Executive has a portfolio of work for which they take responsibility. The Authority also has an Overview and Scrutiny Committee reviewing Executive decisions, Council Services and other services in the Borough that affect the community of Woking. The other responsibilities of the Authority are discharged through its non-executive committees and the Standards and Audit Committee.

Meetings are webcast and recordings are available afterwards to view through the website.

The Constitution provides for members of the public to ask questions of the Executive at the Executive meeting. Petitions may also be put to the Council with the Constitution setting out how these are considered depending on the number of signatures. Members of the public may also ask questions at the Joint Committee.

The Council undertakes public consultations on specific matters affecting the community.

Principle C – Defining outcomes in terms of sustainable economic, social and environmental benefits

Historically the Authority's main priorities have been established and agreed. These continue to be priorities for the Authority in the current year:

1. Health and Wellbeing
2. Affordable Housing
3. The Environment
4. Economic Development

The Authority has developed a Vision – 'Towards Tomorrow Today' and a comprehensive set of values. The three pillars of People, Place and Us clarify the Authority's approach and the Service and Performance Plans reflect this structure.

The Council's Vision, Values and the Service and Performance Plans are available on the internet in the Annual Service and Performance Plan. Together these form the 'umbrella' under which the services, and individual plans sit.

The Core Strategy, adopted in October 2012, sets out the vision for Woking to 2027. The strategy has been communicated widely internally to local partners and to the wider community through interest groups. It is also available on our website.

The Authority's Climate Change Strategy, Woking 2050, balances our environmental aspirations with the Borough's needs for development and economic prosperity. The aim of the strategy is to coordinate a wide range of objectives which can be used by the Council and Woking's residents, businesses, community groups and others to reduce the Borough's impact on the environment.

The Authority has also prepared Natural Woking, a biodiversity and green infrastructure strategy for the area. This seeks positive outcomes for habitats and people, by enhancing provision and accessibility to green spaces; conserving appropriate existing biodiversity and habitats; and creating opportunities for species to return to the Borough.

The Economic Development Strategy was approved by Council in April 2017 and covers the period to 2022 while considering the vision to 2050. The Strategy's objectives are to encourage business development growth and inward investment in the Borough. Additionally, the Strategy supports the creation of jobs, stimulating the economy, as well as generating income for the Council (to support service provision).

New Capital and Investment Strategies were approved by Council in February 2019. Presented with the Treasury Management Strategy these provide further details on the overall approach to the capital programme including explaining the purpose of the Council investment.

Following the appointment of the new Director of Housing early in 2019/20, the Council's Housing Strategies will be reviewed and updated to reflect the direction and priorities for the future.

Collectively these key documents form the Council's Corporate Strategy and show how the Vision and Values translate into Council action through the detailed plans, budgets and Investment Programme. It is recognised that the links between these policies could be

communicated more clearly and the presentation on the Council website will be reviewed during 2019/20.

The Authority has a general approach to protect services seeking instead to achieve efficiencies and increase income generation where there are budget pressures.

The Performance Framework is owned by Members and officers. The content is communicated to a wide audience in order to ensure that these key priorities are understood and translated into operational outcomes, and it is available via the Authority's website.

Principle D – Determining the interventions necessary to optimise the achievement of the intended outcomes

A Medium Term Financial Strategy (MTFS) is prepared on at least an annual basis and updated as circumstances change. It was last updated in March 2019 and clearly sets out the financial challenges facing the Authority. This enables the identification of resource requirements to continue the Authority's activities and secure a sustainable future. The MTFS is linked to the annual budget and service strategies.

Service planning is closely aligned to the budgeting process and identifies service developments and the associated financial impacts. Key performance indicators are set and monitored during the year.

The Authority is proactive in working together with partners and considering the most effective way for services to be provided within the community, whether that be by the Council direct or through third parties.

Principle E – Developing the entity's capacity, including the capability of its leadership and the individuals within it

The Performance and Development Review process is fully embedded in the Authority with annual assessments completed by all officers. The process incorporates the Council's Behaviour and Skills framework and helps to determine the Learning and Development programme.

The Authority was reassessed by Investors in People during 2016/17. The award was retained with an accreditation at the 'Silver' level.

Following the recommendation of the 2015 Peer Review, a programme of management development has been introduced to support future leaders and succession planning. Two groups of senior managers have completed a bespoke development programme during 2018/19 and the programme has been extended to staff at the next level.

There is a comprehensive training programme for Members. The Council's commitment to Member development was first comprehensively assessed by South East Employers in 2008. Since then Woking has successfully maintained Charter status for Elected Member Development, achieving reaccreditation every three years. The Council was assessed for reaccreditation in 2018 and was again awarded the Charter.

The Council reviews its programme for Member Development annually and has developed a comprehensive learning and Development Framework together with the Roles and Responsibilities of Elected Members. A programme of Mandatory Member training was introduced in May 2018.

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

The system of internal control is a part of the governance framework and is designed to manage risk to a reasonable level. It cannot eliminate all risk of failure to achieve policies, aims and objectives and can therefore only provide reasonable 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 the Authority's policies, aims and objectives, to evaluate the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively and economically.

Formal Risk Management arrangements provide for risk identification, analysis, ownership and mitigating actions. An annual risk report is provided to the Executive. The Corporate Management Group review the Strategic Risk Register. Committee reports identify and quantify risks associated with a proposal. The system of internal financial control is based upon a framework of comprehensive financial regulations and procedures (within the Constitution), which comply with the CIPFA "Good Practice Guide for Financial Regulations in a modern English Council". Control is maintained through regular management information, management supervision, and a structure of delegation and accountability. The Council has an anti-fraud and corruption policy and whistle blowing policy which are updated and promoted internally regularly.

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

The Authority annually reviews the effectiveness of its governance framework including the system of internal control. The review is informed by the managers who have responsibility for the development and maintenance of the governance processes, Internal Audit reviews and by comments made by the external auditor and other review agencies and inspectorates.

Since the Local Government Association Corporate Peer Review in 2015 the Council has been working to address the recommendations. This will continue during 2019/20 ahead of a new review to assess progress.

The Council's Internal Audit Service carries out a programme of independent reviews. Their work is based around the core risks faced by the Council and includes work on financial and non-financial systems, corporate programmes and partnerships. This includes adherence to established policies, procedures, laws and regulations.

These findings are brought together within this Annual Governance Statement and are reported annually to the Standards and Audit Committee which undertakes the functions of an audit committee, as identified in CIPFA's *Audit Committee – Practical Guidance for Local Authorities* and has responsibility for receipt of the Annual Governance Statement.

The Overview and Scrutiny function provides the scope to focus on issues that have the widest impact on the community and not just services directly provided by the Authority.

Monthly performance and financial monitoring information is published, including details on treasury management and group company activities.

Accessible data is available online, where detailed information is published in accordance with transparency requirements.

4. Roles and Responsibilities

The Authority has approved a Constitution which defines and documents the roles and responsibilities of the Authority, Executive, Overview and Scrutiny and officer functions, with clear delegation arrangements and protocols for decision making and communication and codes of conduct defining the standards of behaviour for Members and staff. Delegations are recorded in accordance with the relevant Regulations.

The Thameswey Group of companies has been established by the Authority to assist in the delivery of the Council's strategic objectives with a view to securing benefits for the residents of the Borough. The Council, and the Boards of the Thameswey group of companies, have approved a set of protocols designed to make the activities of the companies open and transparent in the context of the commercial environment in which the companies operate.

The Group Business Plans are approved by the Council annually. Group Company information is included in the monthly performance and financial monitoring information (Green Book).

The senior management of the Authority is structured to provide clear responsibility and accountability at both strategic (Corporate Management Group, CMG) and operational (Senior Manager) levels. The structure reflects the Authority's values and approach with management and services grouped by 'People', 'Place' and 'Us'.

The CMG comprises the Chief Executive, Deputy Chief Executive, Director of Housing, Finance Director (nominated in accordance with Section 151 of the Local Government Act 1972) and the Head of Democratic and Legal Services. Each has allocated responsibilities to ensure that there is a clear chain for decision-making and actions to implement those responsibilities. The Chief Executive is the Head of Paid Service under the terms of the Local Government & Housing Act 1989. The Head of Democratic and Legal Services is the designated Monitoring Officer and is responsible for ensuring that the Authority acts in accordance with the Constitution.

The Head of Internal Audit, provided through a framework contract with Mazars, has direct access to the Finance Director, to the Chief Executive, other CMG members and reports to Members through the Standards and Audit Committee. These arrangements are in accordance with CIPFA guidance in their publications 'Role of the Chief Financial Officer' and 'Role of the Head of Internal Audit'.

5. Significant Governance Issues

In formulating this year's Governance Statement a range of evidence has been reviewed including Statements from senior managers and Internal Audit reviews. To avoid duplication such findings are not noted in this statement other than where their implications could affect the overall effectiveness of the Authority's governance procedures and require action under the Governance Plan.

There has been a continued focus on addressing Internal Audit recommendations during the year. The position is considered by CMG and the Standards and Audit Committee quarterly where action progress can be monitored and resources redirected if necessary.

The following areas have been identified as areas for improvement in the Governance Plan and need further action in order to ensure governance arrangements remain robust for the future:

- (i) Peer Review
Continue with the areas of improvement identified by the Peer Review, including further embedding the new management structure.
- (ii) Council Constitution
The Council's Constitution will be formally reviewed during 2019/20.
- (iii) Corporate Plan
The presentation of the Council's key Strategies, collectively the Corporate Plan, will be reviewed to ensure that the links between the vision and values, and detailed plans and Investment Programme are communicated clearly.
- (iv) Action tracking
Introduce new processes for the management of Internal Audit recommendations and Committee decisions to improve the efficiency and effectiveness of the system.
- (v) CIPFA Financial Management Code
The Chartered Institute of Public Finance Accountants (CIPFA) have consulted on a draft Financial Management Code. When finalised the Council will ensure that governance arrangements comply with the new Code.

6. Conclusion

We are satisfied that the Authority has in place the necessary practices and procedures for a comprehensive governance framework, the governance arrangements provide assurance that intended outcomes will be achieved, and remain fit for purpose. The actions above will deliver further improvements and we will continue to monitor, evaluate and report on progress as part of our next annual review.

Leader of the Council
Cllr D Bittleston
Date

Chief Executive
R N Morgan OBE
Date

| The Council should demonstrate the following requirements | | Position at Woking |
|--|--|--|
| A | Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law | |
| A1 | Ensuring members and officers behave with integrity and lead a culture where acting in the public interest is visibly and consistently demonstrated thereby protecting the reputation of the organisation | There are Codes of Conduct for both Employees and Members. The culture and behaviours required are covered in new Member briefings. The Council has a complaints procedure details of which are on the Council's website. Staff briefings visibly set the tone for staff and consistently demonstrate the public service ethos. Copies of staff briefings are available to view for anyone who has missed them. |
| A2 | Ensuring members take the lead in establishing specific standard operating principles or values for the organisation and its staff and that they are communicated and understood. These should build on the Seven Principles of Public Life (the Nolan Principles) | The Council has both Employee and Member Code of Conducts which reflect the 'Seven Principles of Public Life'. Staff and Member inductions cover these Codes. Training is provided as considered necessary. |
| A3 | Leading by example and using the above standard operating principles or values as a framework for decision making and other actions | The Council has a written constitution which sets out, amongst other things, the organisational structure of the Council, the responsibilities of committees and members as individuals, a scheme of delegation to officers and codes of conduct. The Constitution was last reviewed in 2015/16. A formal review is planned during 2019/20. The Constitution reflects the strong leader approach, and the Council has identified Portfolio holders and shadow portfolio holders. |
| A4 | Demonstrating, communicating and embedding the standard operating principles or values through appropriate policies and processes which are reviewed on a regular basis to ensure that they are operating effectively | Policies are reviewed on a regular basis. The Behaviour & Skills Framework for staff is part of the Performance Development Review process. Internal Audit review for appropriate and regularly updated policies, and undertake specific work in areas such as gifts and hospitality. |
| A5 | Seeking to establish, monitor and maintain the organisation's ethical standards and performance | Induction training for all staff incorporates the organisational and operational framework of the Council. A comprehensive training programme is provided for members. The Standards and Audit Committee is responsible for: (i) promoting and maintaining high standards of conduct by councillors and co-opted members in accordance with the Members' Code of Conduct;; (ii) assisting councillors and co-opted members to observe the Members' Code of Conduct; (iii) advising the Council on the adoption or revision of the Members' Code of Conduct; (iv) monitoring the operation of the Members' Code of Conduct; (v) advising, training or arranging to train councillors and co-opted members on matters relating to the Members' Code of Conduct; |

| The Council should demonstrate the following requirements | | Position at Woking |
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| | | <p>(vi) determining allegations that there has been a breach of the Members’ Code of Conduct in accordance with arrangements adopted by Council;</p> <p>(vii) act as the Council’s Audit Committee. In performing this task the Standards and Audit Committee will:</p> <ul style="list-style-type: none"> · approve the plans of Internal Audit and consider the External Audit plan, · receive the Annual Audit and Inspection letter from External Audit; · receive Internal Audit recommendations for improvements and assurance that action has been taken where necessary; · review summary Internal Audit reports (located on the intranet); · receive a half yearly and annual report from the Chief Internal Auditor on the work of Internal Audit; · receive appropriate matters of concern raised by either External or Internal Audit or other agencies; and · ensure that there are effective relationships between Internal and External Audit and promote the value of the audit process; <p>(viii) overseeing the Council’s Risk Management, Anti Fraud and Whistleblowing strategies, and Health and Safety policies and practices;</p> <p>(ix) the receipt of the Annual Governance Statement; and</p> <p>(x) oversight of payments in cases of maladministration which are neither disputed nor significant (which are dealt with by the Monitoring Officer)</p> |
| A6 | Underpinning personal behaviour with ethical values and ensuring they permeate all aspects of the organisation’s culture and operation | <p>The constitution contains a member code of conduct together with a number of statements and protocols covering registration of interests, anti fraud and corruption policy.</p> <p>The Council has a code of conduct for officers.</p> <p>The Council has a Customer code of conduct together with an equalities and diversity policy designed to define the relationship with customers and to remove any bias in dealing with the community.</p> <p>We also have a number of HR policies such as Anti bullying and Whistleblowing that relate to conduct and personal behaviour.</p> <p>The 2015 Peer Review noted: “Partners of all types speak highly of the people they work with and their obvious dedication and hard work”</p> |
| A7 | Developing and maintaining robust policies and procedures which place emphasis on agreed ethical values | <p>The Council operates within a framework which includes codes of conduct, customer service policies, equality and diversity policies, vision and values all of which serve to provide an environment promoting ethical standards and equality of treatment.</p> <p>The Member code of conduct and the constitution require the declaration of interests of officers and members to be made at</p> |

| The Council should demonstrate the following requirements | | Position at Woking |
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| | | <p>meetings where matters require such a declaration including meetings of the Thamesway Group boards. Other declarations and registrations include related party transactions for members and senior officers, members and senior officers recording when a relative is employed by the council, interests of officers in contracts involving relatives, and declarations of gifts and hospitality by all in a register maintained by the Head of Democratic and Legal Services. Members interests are published on the Council website.</p> <p>The Council has a confidential reporting 'whistleblowing' policy which is accessible via the intranet and internet.</p> |
| A8 | Ensuring that external providers of services on behalf of the organisation are required to act with integrity and in compliance with ethical standards expected by the organisation | <p>The council clearly understands its role as a leader within the local community and has set out within its values the way in which the authority should operate - e.g. openness, honesty, transparency - when dealing with all elements of the community and the expectation that others associated with the Council will operate similarly to engender a positive and trusting relationship.</p> <p>Expectations are incorporated into contractual arrangements where appropriate and addressed at contract meetings.</p> |
| A9 | Ensuring members and staff demonstrate a strong commitment to the rule of the law as well as adhering to relevant laws and regulations | <p>The Head of Democratic and Legal Services is the Council's Monitoring Officer, responsible for ensuring the Council acts in accordance with the Constitution.</p> <p>Committee reports consider legal implications. External legal advice is taken where appropriate.</p> <p>Legislative matters are dealt with at local level where changes are evaluated by suitably qualified staff supported by legal services.</p> <p>Major legislative change will require the Legal service to assess, evaluate and advise on the impact of legislative changes.</p> <p>The constitution sets out the limits of activity. Legislation around the power of general competence means the Council has wide legislative powers to undertake activities for the benefit of its community and seeks to make full use of these.</p> |
| A10 | Creating the conditions to ensure that the statutory officers, other key post holders, and members, are able to fulfil their responsibilities in accordance with legislative and regulatory requirements | <p>The Constitution sets out the responsibilities of the statutory officers.</p> <p>The 3 statutory officers (Chief Executive – Head of Paid Service, Head of Democratic and Legal Services – Monitoring Officer, and Finance Director – Chief Finance Officer/Section 151 Officer) are members of the Council's Corporate Management Group (CMG). CMG meets weekly, there are regular meetings between the Chief Executive and Council Leader and with portfolio holders to discuss and challenge proposals.</p> |

| The Council should demonstrate the following requirements | | Position at Woking |
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| A11 | Striving to optimize the use of the full powers available for the benefit of citizens, communities and other stakeholders | It is the responsibility of the relevant CMG member to identify opportunities to benefit local citizens, prioritising those considered most beneficial to the community and meeting the locally identified needs. Through the Personal Development Review process, and the Behaviour and Skills framework, the Council encourages staff to be challenging and innovative and improvements are brought in by senior managers and their staff. |
| A12 | Dealing with breaches of legal and regulatory provisions effectively | The Council has effective processes in place in the event of any breaches. It is the responsibility of the Monitoring Officer to assess the appropriate actions. |
| A13 | Ensuring corruption and misuse of power are dealt with effectively | <p>There are procedures for reporting any suspected issues, and for dealing with any identified instances. This may include the involvement of the police.</p> <p>There is a formal complaints procedure which was revised in August 2018 and provides for a response from a manager and allows for an appeal to be considered if the complainant is not satisfied. The Legal section monitors corrective action taken in response to upheld Ombudsman complaints against the authority. The Standards and Audit Committee reviews the outcome of Ombudsman complaints.</p> <p>The process for dealing with Member complaints about other Members was reviewed during 2018/19 and a new protocol adopted.</p> <p>Officers and members are required to declare interests in issues being determined by the Council and generally with regard to any business of the Council. Standing orders and financial regulations have similar requirements governing operational decisions made by officers.</p> <p>The register of interests is a public document and is available on the Council's website.</p> <p>The council has a confidential reporting policy for staff available through ewokplus. Members of the public normally write to one of the three Statutory Officers.</p> <p>The Vision and Values statement requires members and officers to demonstrate these behaviours</p> |
| B | Ensuring openness and comprehensive stakeholder engagement | |

| The Council should demonstrate the following requirements | | Position at Woking |
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| B1 | Ensuring an open culture through demonstrating, documenting and communicating the organisation’s commitment to openness | <p>The Council is committed to openness, support and respect. Procedural rules make detailed provision for rights of access for public and members. The council complies with statutory requirements regarding access e.g. to financial information and responses to Freedom of Information requests. A new system has been introduced to improve the efficiency and effectiveness of the Council’s response to Freedom of Information requests. Performance and breaches are reported to CMG monthly.</p> <p>There is also extensive information published on the internet. This continues to be developed in accordance with the Local Government Transparency Code. The Council uses the datashare software and continues to add more information here to enable easy access for members of the public.</p> <p>There is an internal and external communications strategy</p> <p>The Council issues regular press releases to the local media. Committee reports are available on the Council’s website and meetings are webcast with the recording also available afterwards to view.</p> <p>The Green Book performance monitoring and financial information is published monthly and also available on the Council website.</p> <p>There is a Marketing and Communications strategy and action plan.</p> |
| B2 | Making decisions that are open about actions, plans, resource use, forecasts, outputs and outcomes. The presumption is for openness. If that is not the case, a justification for the reasoning for keeping a decision confidential should be provided. | <p>Decisions only made confidentially with specific reasons provided. Items held in part 2 of the agenda are kept to a minimum where there is information of a confidential, commercial third party or personal nature. Wherever possible decisions and discussion is public and broadcast on webcasts also available to view afterwards on the Council’s website. If necessary supporting confidential details are provided in a separate report, with the discussion in Part 1 unless it is necessary to refer to the confidential data.</p> <p>Delegated decisions are published on the Council’s website.</p> |
| B3 | Providing clear reasoning and evidence for decision in both public records and explanations to stakeholders and being explicit about the criteria, rationale and considerations used. In due course, ensuring that the impact and consequences of those decisions are clear | <p>In 2018/19 the Council introduced Modern gov, an application which serves to make reports available to officers members and the public. This replaced the previous system, Shikari, and provides increasing transparency across WBC and other partners (eg SCC) which aids partnership working.. Relevant officers can add their appropriate</p> |

| The Council should demonstrate the following requirements | | Position at Woking |
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| | | <p>comments during the report preparation process. Portfolio holders and the Executive are briefed on reports prior to publication. Decisions made at meetings are were previously loaded into Shikari with responsible officer and timescale and progres monitored automaticallyThe Council is developing a Sharepoint based solution to replace the decision tracking functionality of Shikari.</p> <p>Reports are drafted using a standard, logical structure which supports decision making and assists clear reasoning and the provision of evidence. Impact assessments are completed for each committee report.</p> |
| B4 | Using formal and informal consultation and engagement to determine the most appropriate and effective intervention/courses of action | <p>The Leader of the Council and Chief Executive are part of the management arrangements of Enterprise M3, the Local Enterprise Partnership. The Leader is part of the wider Surrey Local Authorities 'Leader Group' and senior officers engage in County wide professional groups.</p> <p>A Business Breakfast meeting is held each year which provides an opportunity to update the business community on the Council's plans and receive feedback.</p> <p>Officers engage widely with community and resident association groups.</p> <p>Members are represented on various community groups. The Council provides approximately £1.2m of funding for voluntary groups and senior officers regularly meet with representatives.</p> <p>There is an active Youth Council supported financially by the Council.</p> |
| B5 | Effectively engaging with institutional stakeholders to ensure that the purpose, objectives and intended outcomes for each stakeholder relationship are clear so that outcomes are achieved successfully and sustainably | <p><i>Institutional stakeholders are the other organisations that local government needs to work with to improve services and outcomes (commercial partners, suppliers, other public and third sector organisations) or organisations to which they are accountable.</i></p> <p>The Council has well developed relationships with other local authorities through joint working groups, health service, voluntary and community groups. There is a Woking Joint Committee which has responsibility for decision making across range of services.</p> |

| The Council should demonstrate the following requirements | | Position at Woking |
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| | | Members of CMG take the lead on key relationships and feed back through CMG meetings and team meetings as appropriate. The Council’s approach is to be supportive of others and engage in discussions and work programmes. |
| B6 | Developing formal and informal partnerships to allow for resources to be used more efficiently and outcomes achieved more effectively | <p>The Council has outsourced a number of services where outcomes can be achieved more efficiently and effectively. Close relationships have been developed with those providers of the outsourced provision: Leisure, Housing, AM/FM.</p> <p>The Council has a joint waste contract with 3 other Surrey Districts, which became operational for Woking in September 2017 and generated savings across the partners. The joint team continue to work to ensure the contract is effective.</p> <p>Where there are areas of expertise/capacity officers work with colleagues across Surrey to make good use of resource – examples include on street parking, fraud, environmental health, home improvement agency and health and safety. The Council is exploring the option of a joint building control function with a neighbouring Borough.</p> <p>The Council supports Community Groups and local partners - £1.3m funded in year – to achieve local outcomes.</p> <p>The Thameswey group of companies, wholly owned by the Council, was set up to effectively seek local outcomes in a more commercial environment. The group includes joint venture companies with a development partner.</p> <p>The Joint Committee (SCC/WBC) was established in June 2014. Its primary focus is to improve outcomes and value for money for citizens and businesses of Woking by strengthening local democracy and improving partnership working in the Borough. Both Councils have delegated decision-making powers to the Joint Committee across a wide range of activities and it makes joint decisions on various strands of work including Community Safety, Health and Safety, Youth, Highways, On-Street Parking, Infrastructure and Early Help.</p> <p>There are regular meetings with the Woking Chamber of Commerce.</p> |
| B7 | Ensuring that partnerships are based on: trust, a shared commitment to change, a culture that promotes and accepts challenge among partners, and that the added value of partnership working is explicit. | The Council's key partners are the group of companies set up to deliver the Council key priorities of affordable housing and energy/environment matters and developments. |

| The Council should demonstrate the following requirements | | Position at Woking |
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| | | <p>A set of protocols has been developed and approved by the Council and the Thamesway Group to improve the governance and transparency of the Thamesway Group activities. There are briefings for Members on Group activities and Members can attend Board meetings.</p> <p>Other objectives are being progressed through joint ventures with other organisations most notably the Victoria Square regeneration. Appropriate arrangements are in place to support these joint ventures. To make efficiency savings the Council has worked with other local authorities and organisations to transform the way services are delivered. This includes joint procurement, sharing accommodation or outsourcing such as has happened with Leisure, HRA and Asset/Facilities Management. All joint arrangements are monitored appropriately.</p> |
| B8 | Establishing a clear policy on the type of issues that the organisation will meaningfully consult with or involve communities, individual citizens, service users and other stakeholders to ensure that service provision is contributing towards the achievement of intended outcomes | Consultation takes place on a wide variety of issues where the community can influence the outcome whether they be by whole Borough, geographical areas or service/interest specific. The arrangements for consultation are published on the Council's website. |
| B9 | Ensuring that communication methods are effective and that members and officers are clear about their roles with regard to community engagement | Formal arrangements exist with a number of stakeholder bodies – Business Breakfast (NNDR consultation), Tenant representatives, user organisations for various services such as Leisure and parking. |
| B10 | Encouraging, collecting and evaluating the views and experiences of communities, citizens, service users and organisations of different backgrounds including reference to future needs. | <p>The Council has an external communications policy and utilises a number of communication channels - self serve via internet; consultation with the citizen's panel; appropriate consultation as required for specific issues. Alternative arrangements will be made for hard to reach sections of the community.</p> <p>The council has adopted a principles of consulting document, published on the internet providing guidance on the arrangements for engaging with all sections of the community recognising their different needs. The Council participates in and actively supports and consults with disabled groups to help frame policy and services.</p> <p>Resources are in place to ensure community engagement is managed strategically and some 30 staff are trained facilitators offering a range of skills to engage appropriately with different groups and sections of the community.</p> <p>Where necessary appropriate use is made of specialist resources to engage with particular cultures, languages, disabilities, etc.</p> |

| The Council should demonstrate the following requirements | | Position at Woking |
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| | | Work with and use partners' expertise to engage with different groups, e.g. Connect to Innovation and Surrey Chamber of Commerce to engage with businesses and the commercial sector |
| B11 | Implementing effective feedback mechanisms in order to demonstrate how views have been taken into account | Any complaints received are used to improve service delivery at a local level. The Council advises on responses to consultations either individually or by way of committee reporting as appropriate. |
| B12 | Balancing feedback from more active stakeholder groups with other stakeholder groups to ensure inclusivity | The Council seeks to use objective data sources to balance special interest group representations with wider community interest. |
| B13 | Taking account of the impact of decision on future generations of tax payers and service users | The Council takes a long term view through preparation of long term plans and strategies – Woking 2027, Core Strategy, Woking 2050, Medium Term Financial Strategy. |
| C | Defining outcomes in terms of sustainable economic, social, and environmental benefits | |
| C1 | Having a clear vision, which is an agreed formal statement of the organisation's purpose and intended outcomes containing appropriate performance indicators, which provide the basis for the organisation's overall strategy, planning and other decisions | <p>The Woking 2050, Woking 2027 and Natural Woking strategies set out priorities.</p> <p>The Joint Committee makes decisions across a range of services.</p> <p>The Council actively pursues priorities agreed with partner organisations and the wider community through on-going consultation</p> <p>The 2015 Peer Review evaluated the Council's understanding of local place and priority setting and considered whether an informed clear vision and priorities had been set. The review recommended that the Council be clear on the next 5 year period. It is intended that the next Peer Review will be in 2019.</p> <p>A Corporate Plan would bring together the Council's Vision and Values, Aims, Objectives and Corporate Strategies. It is intended that this over-arching document is prepared during 2019/20.</p> <p>The Council's priorities have been agreed and are approved annually through the service planning process and manifesto pledges. The service planning process is supported by a corporate team. The structure of the plan emphasises the way service plans contribute to the development of People, Place and Us. The Service and Performance Plan is available via the Council's website. Service plans feed into PDR objective setting following the 'golden thread'</p> |

| | The Council should demonstrate the following requirements | Position at Woking |
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| C2 | Specifying the intended impact on, or changes for, stakeholders including citizens and service users. It could be immediately or over the course of a year or longer | Impact assessments for each committee report. The report format supports the provision of impact summary, reasons for and implications of decisions. |
| C3 | Delivering defined outcomes on a sustainable basis within the resources that will be available | Performance management is well imbedded at the Council with detailed reporting published and publicly available each month. The Medium Term Financial Strategy (MTFS) sets out the resources that are available and the actions required to ensure a sustainable future. The MTFS is formally updated annually, with updates during the year through budget and other finance papers. Other decisions are made in the context of the MTFS. |
| C4 | Identifying and managing risks to the achievement of outcomes | Comprehensive Service and Corporate Risk Registers are regularly reviewed. |
| C5 | Managing service users' expectations effectively with regard to determining priorities and making the best use of the resources available | Service Users expectations are 'managed' by advising of the Council's priorities through the Service Planning process. There are ongoing dialogues with groups regarding the best uses of the resources available. |
| C6 | Considering and balancing the combined economic, social and environmental impact of policies and plans when taking decisions about service provision | The balancing of economic, social and environmental factors is extensively considered as part of the Place Making role led by the Council. |
| C7 | Taking a longer-term view with regard to decision making, taking account of risk and acting transparently where there are potential conflicts between the organisation's intended outcomes and short-term factors such as the political cycle or financial constraints | The Council has a Medium Term Financial Strategy which sets out the challenges over the next 3-5 years, together with long term planning, climate change and sustainability strategies. Many of the decisions currently being made are long term in nature with Members considering the long term benefits and future need – eg Infrastructure investment, Victoria Square, Hoe Valley School and Community facilities, Sheerwater Regeneration, protection of employment space and Brookwood Cemetery |
| C8 | Determining the wider public interest associated with balancing conflicting interests between achieving the various economic, social and environmental benefits, through consultation where possible, in order to ensure appropriate trade-offs | The wider public interest is assessed through public consultation on particular issues. Ultimately the public direction is set through the annual election cycle. |
| C9 | Ensuring fair access to services | Equalities reporting, officer, portfolio holders, considered in all decision reports, considered in fees and charges An Annual Equalities Report is provided to the Executive and an external assessment of the Council by the LGA found that we are at the 'Achieving' level on the Equalities Framework. |
| D | Determining the interventions necessary to optimize the achievement of the intended outcomes | |
| D1 | Ensuring decision makers receive objective and rigorous analysis of a variety of options indicating how intended | Executive and Council reports contain detailed information to support decision making and provide options on the course of action. |

| | The Council should demonstrate the following requirements | Position at Woking |
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| | outcomes would be achieved and associated risk. Therefore ensuring best value is achieved however services are provided | <p>Members of the Executive have portfolio responsibilities and strong relationships with lead officers enabling rigorous challenge of the information and analysis provided.</p> <p>Matters requiring decisions are reported to the Executive or appropriate committee for approval. The report format is standard providing information in a consistent and comprehensive way.</p> <p>All reports include a section for financial implications of reports. The process for approving reports includes publishing a forward programme of reports, a timetable for the preparation of reports that specifically provides for the involvement of portfolio holder, CMG and Executive prior to publication. CMG review draft agendas and reports as part of the weekly meeting.</p> |
| D2 | Considering feedback from citizens and service users when making decisions about service improvements or where services are no longer required in order to prioritise competing demands within limited resources available including people, skills, land and assets and bearing in mind future impacts | Reviews of service needs inform strategies, A complete review of all Housing strategies and policies during 2019/20. |
| D3 | Establishing and implementing robust planning and control cycles that cover strategic and operational plans, priorities and targets | Service planning is well embedded at the Council. The plans provide more focused information and link the strategic objectives and operational plans. Targets are agreed and performance monitored through the monthly Green Book publication. |
| D4 | Engaging with internal and external stakeholders in determining how services and other courses of action should be planned and delivered | Internal consultation is through staff briefings and team meetings. CMG minutes and decisions are available on Sharepoint and there are regular meetings between CMG and Unison. External consultations are undertaken on specific issues. The Woking Joint Committee is a joint committee of Woking Borough Council and Surrey County Council. |
| D5 | Considering and monitoring risks facing each partner when working collaboratively including shared risks | The Council is experienced in working closely with partners and will identify and monitor risks through an appropriate review mechanism. There are detailed contract management processes for the Council's major contracts (Freedom, NVH, Skanska etc plus joint waste) where risk is considered. |
| D6 | Ensuring arrangements are flexible and agile so that the mechanisms for delivering goods and services can be adapted to changing circumstances | The Council, where appropriate, builds flexibility into contractual (or other) arrangements with third party providers of goods and services. Larger contracts will have formal change control clauses, with smaller contracts allowing more informal change management through dialogue. The Council has a responsive management style and will make appropriate changes as circumstances dictate building strong relationships with providers which enable flexibility. |

| The Council should demonstrate the following requirements | | Position at Woking |
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| D7 | Establishing appropriate key performance indicators as part of the planning process in order to identify how the performance of services and projects is to be measured | Key performance indicators are set to improve performance over time usually to achieve top quartile performance. Performance Indicators are reviewed to ensure they remain the most appropriate and relevant for the Council. Efficiency improvements and income generating assets have been identified to enable the maintenance of service delivery. External Audit continues to assess and report on the Council's value for money approach. |
| D8 | Ensuring capacity exists to generate the information required to review service quality regularly | CMG regularly considers the adequacy of resources and redirects as required. All requests to recruit staff are considered by CMG which enables capacity to be used flexibly depending on priorities. |
| D9 | Preparing budgets in accordance with objectives strategies and the medium term financial plan | The Council's planning and budgeting processes are closely aligned in the Business planning process. Service plans and budgets are prepared together. The financial strategy makes provision for known changes to services including legislative changes, growth, efficiency savings and the impact of the investment programme. The budget papers provide a summary of the MTFS and high level update. The budget reflects the overarching strategy set in the MTFS and links to the latest plan. The MTFS is subsequently updated to reflect the new base and actions required. |
| D10 | Informing medium and long term resource planning by drawing up realistic estimates of revenue and capital expenditure aimed at developing a sustainable funding strategy | MTFS last updated March/April 2019. This takes a cautious view on government funding and requires additional savings to be identified and achieved. It identifies uncertainties and flexibilities within the forecasts. There was an Internal Audit review of the MTFS during 2018 which included comparison with other councils. The Investment Programme is based on best estimated timing and costings for projects which are being worked up. Where it is not possible to include an estimated figure, the narrative report notes the exclusion. |
| D11 | Ensuring the medium term financial strategy integrates and balances service priorities, affordability and other resource constraints | The MTFS works from the Council's Service Plans with the latest approved budgets used as a base. Future enhancements and changes to services as well as Council responsibilities are identified and brought into the summary position to establish the medium term challenges. The mitigations to the identified pressures, and the supporting narrative, balance the need to scale back plans and developments and costs with the desire to find a way to be able to further priority areas. |
| D12 | Ensuring the budgeting process is all-inclusive, taking into account the full cost of operations over the medium and longer term | Budgets cover all services areas, project and Investment Programme spend, together with treasury implications. In setting the annual budget a view on the implications for reserves is provided together with reserves forecasts. Capital spend decisions are subject to consideration of the medium term position including servicing and repayment of any debt. |

| The Council should demonstrate the following requirements | | Position at Woking |
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| D13 | Ensuring the medium term financial strategy sets the context for ongoing decisions on significant delivery issues or responses to changes in the external environment that may arise during the budgetary period in order for outcomes to be achieved while optimizing resource usage | The MTFS is subject to at least annual review and was the subject of a series of staff briefings in 2017. It is referred to/updated in each budget report. All committee reports include a financial implications section where any impacts are highlighted and many refer directly to the MTFS. |
| D14 | Ensuring the achievement of 'social value' through service planning and commissioning | Service planning takes into consideration 'social value' including working with partners and voluntary groups across the community. |
| E | Developing the entity's capacity, including the capability of its leadership and the individuals within it | |
| E1 | Reviewing operations, performance and use of assets on a regular basis to ensure their continuing effectiveness | Performance information is reported on a monthly basis to members and senior officers and is available to the public on line. The reporting includes exceptional variations from expected service - both good and bad - together with the action being taken to correct poor service. Complaints are monitored and used to inform the performance of a service. |
| E2 | Improving resource use through appropriate application of techniques such as benchmarking and other options in order to determine how resources are allocated so that defined outcomes are achieved effectively and efficiently | Benchmarking is used on particular service reviews and where decisions regarding changes to services are being considered. The Council has relationships, and regularly meets with, other local Authorities and shares/learns from the work they are undertaking. Officers meet at a professional level and provide advice and experience to each other. Joint work is completed – eg waste contract – where the opportunities arise. All service options are considered eg on withdrawal of SCC funding. In 2018/19 the future operation of Childrens Centres in the Borough has been reviewed as a result of a change in approach by SCC. |
| E3 | Recognising the benefits of partnerships and collaborative working where added value can be achieved | The Council actively looks for opportunities to collaborate and achieve better value for money. The Joint Waste contract with 3 other local Districts started September 2017. Other joint working includes Environmental Health, On-Street Parking, Home Improvement Agency and Health and Safety. Working is ongoing to consider the potential for joint working for Building Control. The Council works closely with community groups, SCC and Health services |
| E4 | Developing and maintaining an effective workforce plan to enhance the strategic allocation of resources | The management structure has been reviewed in recent years and revised to better meet the strategic needs and focus of the Council. |
| E5 | Developing protocols to ensure that elected and appointed leaders negotiate with each other regarding their respective | The Constitution sets out roles and responsibilities. Long term plans/objectives set out the Council's vision and direction. Members and officers have good working relationships and regular communications. |

| The Council should demonstrate the following requirements | | Position at Woking |
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| | roles early on in the relationship and that a shared understanding of roles and objectives is maintained | |
| E6 | Publishing a statement that specifies the types of decision that are delegated and those reserved for the collective decision making of the governing body | The Constitution sets out the responsibilities and delegations. |
| E7 | Ensuring the leader and the chief executive have clearly defined and distinctive leadership roles within a structure whereby the chief executive leads in implementing strategy and managing the delivery of services and other outputs set by members and each provides a check and a balance for each other's authority | <p>The Constitution schedules the responsibilities that are reserved for full meetings of Council and those that are delegated to the Executive or other committees and officers. The delegations are reviewed annually. The Constitution was reviewed and simplified during 2015/16 with the next review scheduled for 2019/20. For the time being the Leader of the Council has delegated the functions of a strong leader to the Executive. The Constitution contains schemes of delegation for those activities which are delegated to officers. Those officers have prepared schemes of sub delegations to other officers to enable business to be conducted.</p> <p>Following the introduction of Regulations each time a formal delegated decision is made it is recorded and made available via the internet.</p> <p>The Chief Executive, Leader and Deputy Leader of the Council have frequent meetings concerning the business and operation of the Council.</p> <p>CMG meet the Executive on a regular basis to discuss formal Executive business and future plans</p> <p>Portfolio and shadow portfolio holders are nominated for each of the Council's activities. It is the responsibility of Senior Managers and CMG to keep their respective portfolio holder informed of developments in their areas and wider issues. Other members are briefed as appropriate.</p> |
| E8 | <p>Developing the capabilities of members and senior management to achieve effective leadership and to enable the organisation to respond successfully to changing legal and policy demands as well as economic, political and environmental changes and risks by:</p> <ul style="list-style-type: none"> Ensuring members and staff have access to appropriate induction tailored to their role and that ongoing training and development matching individual and organisational requirements is available and encouraged | Senior Management are developed through the current Leadership programme, together with Corporate training programmes. There is support through the PDR process and Peer groupings. There is a comprehensive training programme for Members. The Council's commitment to Member development was first comprehensively assessed by South East Employers in March 2011. Since then Woking has successfully maintained Charter status for Elected Member Development, achieving reaccreditation every three years. The Council was successfully assessed for reaccreditation in 2018/19. |

| The Council should demonstrate the following requirements | | Position at Woking |
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| | <ul style="list-style-type: none"> Ensuring members and officers have the appropriate skills, knowledge, resources and support to fulfil their roles and responsibilities and ensuring that they are able to update their knowledge on a continuing basis Ensuring personal, organisational and system-wide development through shared learning, including lessons learnt from governance weaknesses both internal and external | <p>The Members Training policy is adopted annually by the Council. In April 2018 it was extended to include mandatory training on specific topics. More on-line training has also been introduced to make sessions more accessible to Members.</p> <p>The Council reviews its programme for Member Development annually and has developed a comprehensive learning and Development Framework together with the Roles and Responsibilities of Elected Members. This covers a wide range of issues of interest to new and existing members.</p> <p>Members receive comprehensive briefings and training in overview and scrutiny and a 'Toolkit for successful scrutiny' has been developed and is provided to all Members.</p> <p>Membership of committees is reviewed annually to assist in member development.</p> <p>A range of vocational and non vocational training is available to officers. Officer training is managed by the HR section against a Learning and Development plan. There is currently a programme of management development underway following recommendations in the Peer Review.</p> <p>The organisational structure of the Council provides opportunities for succession planning and internal progression. This is further strengthened by the Behaviour and Skills framework where each post has scored competencies accessible by all so career progression will be easier to identify.</p> |
| E9 | Ensuring that there are structures in place to encourage public participation | Members of the public can ask questions of Executive Members at the Executive meetings. They can also ask questions at the Joint Committee. The Constitution sets out the processes for consideration of petitions depending on the number of signatures. |
| E10 | Taking steps to consider the leadership's own effectiveness and ensuring leaders are open to constructive feedback from peer review and inspections | The Peer review completed by the LGA in October 2015 recommended that an organisational development programme be developed to grow commercial and leadership skills. CMG and Senior Managers have completed personality and behavior analysis, and two groups of Senior Managers completed a bespoke development course during 2018/19. The programme is now being extended to Managers at the next level. |

| The Council should demonstrate the following requirements | | Position at Woking |
|--|---|---|
| | | Members of the Executive have also completed the personality and behavior assessments. |
| E11 | Holding staff to account through regular performance reviews which take account of training or development needs | There is a formal annual Performance Development Review process. |
| E12 | Ensuring arrangements are in place to maintain the health and wellbeing of the workforce and support individuals in maintaining their own physical and mental wellbeing | Sickness levels are monitored by managers and HR and reported in the Green Book. The HR team provide support where issues have been identified. There are active Health and Wellbeing programmes for staff. |
| F | Managing risks and performance through robust internal control and strong public financial management | |
| F1 | Recognising that risk management is an integral part of all activities and must be considered in all aspects of decision making | The Council has adopted a risk management strategy. Risk is covered in all committee reports and embedded in Service Planning. |
| F2 | Implementing robust and integrated risk management arrangements and ensuring that they are working effectively | <p>The Strategic risk register is considered by CMG Operational risk registers</p> <p>Risk registers have been prepared. The risks associated with a course of action are required as part of all committee reports and a risk log is a requirement of all projects recorded on the project monitoring system within sharepoint.</p> <p>Work on developing business continuity particularly for ICT has been ongoing with the development of the Council's own data centre. There have been tests of business continuity in times of bad weather.</p> <p>The Council's approach to insurance has been to insure all risks with limited or no excesses or self insurance unless it is possible to demonstrate vfm for this approach. Excesses were increased as part of the insurance tender in 2015 based on analysis and advice of the broker. Insurance provision is reviewed annually as part of the renewal programme. Claims are handled within the necessary time limits Other risks are identified in the budget and a risk contingency provided. Reserves have been set up to address specific financial risks.</p> <p>The risk management information assists in the operational aspects of service delivery. A relatively simple approach is taken to assessing likelihood and severity of risk to determine high, medium, low risks.</p> |

| The Council should demonstrate the following requirements | | Position at Woking |
|---|--|--|
| | | Key risks are identified and monitored e.g. key budget risks and performance are monitored in the green book. Key risks in projects are monitored as part of the project management methodology. Corrective action is taken to avoid or mitigate the risks. |
| F3 | Ensuring that responsibilities for managing individual risks are clearly allocated | <p>All risk registers allocate risk to individual managers as risk owners.</p> <p>The Deputy Chief Executive is the nominated champion for risk management and business continuity. Risk management is embedded into the processes of the organisation. All committee reports require the risks associated with the matter of the report to be included in the report.</p> <p>The project management arrangements of the Council require a risk log to be prepared identifying the risks and the mitigating action to be taken. The financial strategy and budget reports indicate risks within the budget and provide a risk contingency.</p> <p>The Executive is the committee responsible for risk management and business continuity with overview by the Standards and Audit Committee</p> |
| F4 | Monitoring service delivery effectively including planning, specification, execution and independent post implementation review | <p>There is monthly reporting of key performance measures, financial performance against budgets, Treasury Management information and Group company information in the monthly 'Performance and Financial Monitoring Information' booklet - the green book. This also includes information on the Sheerwater Regeneration and Strategic Properties – areas identified during 2017 as requiring close monitoring. The Green Book provides information on current performance and describes any corrective action to be taken. It is considered by Corporate Management Group (CMG) and at each Executive and published on the internet.</p> <p>In the future decision/action tracking will be through a Sharepoint based application currently under development. This will replace the previous Shikari system.</p> <p>The Executive receives a quarterly report on all projects This summary report is drawn from the sharepoint application used to manage projects.</p> |
| F5 | Making decisions based on relevant, clear objective analysis and advice pointing out the implication and risks inherent in the organisation’s financial, social and environmental position and outlook | The report structures support decision making, prompting comment on the key considerations. Impact assessments are prepared for committee reports. Delegations to officers are included in the Constitution. |

| | The Council should demonstrate the following requirements | Position at Woking |
|-----|--|--|
| F6 | Ensuring an effective scrutiny or oversight function is in place which provides constructive challenge and debate on policies and objectives before, during and after decisions are made thereby enhancing the organisation's performance and that of any organisation for which it is responsible | <p>The Council has an O&S committee. The committee is supported by task groups including two standing task groups for Finance and Housing.</p> <p>There are project specific oversight groups for the most significant developments – Victoria Square and Sheerwater. In 2019/20 a new group will be established for the development at Woking Football Club.</p> <p>Members have the opportunity to raise topics for consideration and the public can raise topics for review via the internet.</p> <p>The overview and Scrutiny Committee prepares an annual report on the activities of the committee and task groups reporting to it. The report is available on the internet (part of committee reports).</p> |
| F7 | Providing members and senior management with regular reports on service delivery plans and on progress towards outcome achievement | The 'Green Book' performance and monitoring report is produced and published on line each month. It is considered at each Executive meeting. Project reporting is prepared for management and Members quarterly. |
| F8 | Ensuring there is consistency between specification stages (such as budgets) and post implementation reporting (eg. Financial statements) | Budgets and Financial Statements are reconciled and analysis provided in the foreword to the Statement of Accounts which links the Statutory Accounts to the Green Book monthly management reporting. |
| F9 | Aligning the risk management strategy and policies on internal control with achieving objectives | The internal audit plan is a risk based plan taking into account risks identified through risk register as well as other factors such as audit knowledge of service delivery enabling the allocation of audit resources. An annual risk management report is provided to the Executive. |
| F10 | Evaluating and monitoring risk management and internal control on a regular basis | <p>Risk management and internal control processes are regularly considered by Internal Audit as part of the annual programme of work. The Corporate Risk Register is reviewed by CMG 6 monthly. The Standards and Audit Committee receive reports on risk management and internal control from Internal Audit.</p> <p>Internal audit reports are used to provide assurance and improve the internal control framework. Internal Audit provide their opinion on the overall arrangements. Under the PSIAS internal audit is required to give assurance annually. The Internal Audit work programme is prepared using a risk based approach. Senior managers complete an assurance statement</p> |

| The Council should demonstrate the following requirements | | Position at Woking |
|--|--|---|
| F11 | Ensuring effective counter fraud and anti-corruption arrangements are in place | The Council has an anti fraud policy which is reviewed regularly. The register of Member's interests and register of gifts and hospitality may be reviewed by the Standards and Audit committee. Members interests, gifts and hospitality, are available on the Council's website. The Council has a flexible fraud resource for follow up and investigations where appropriate. |
| F12 | Ensuring additional assurance on the overall adequacy and effectiveness of the framework of governance, risk management and control is provided by the internal auditor | The internal audit service is provided by Mazars through a framework contract with Croydon Council. Computer audit is provided by Spelthorne Borough Council/Mazars. The Head of Internal Audit (HIA) role is performed by Mazars. An annual report by the HIA on the overall adequacy of the control environment is considered by Standards and Audit committee. Internal Audit provide updates at each Standards and Audit meeting and attend CMG on a quarterly basis or as required. |
| F13 | Ensuring an audit committee which is independent of the executive and accountable to the governing body: <ul style="list-style-type: none"> Provides a further source of effective assurance regarding arrangements for managing risk and maintaining an effective control environment That its recommendations are listened to and acted upon | The Standards and Audit Committee performs the functions of an Audit Committee. It is independent of the Executive and reports to Council. It receives regular reports and seeks assurances from Internal Audit and External Audit. |
| F14 | Ensuring effective arrangements are in place for the safe collection, storage, use and sharing of data, including processes to safeguard personal data | The Council has existing data protection and security policies to ensure the proper collection, use, storage and control of it's assets including data and information. Since the introduction of GDPR in May 2018 there has been monthly reporting of GDPR and cybersecurity issues to CMG. The Head of Democratic and Legal Services undertakes the role of Data Protection Officer at the Council |
| F15 | Ensuring effective arrangements are in place and operating effectively when sharing data with other bodies | Sharing data with other bodies is subject to oversight by the Head of Democratic and Legal Services. The Council has a number of Information Sharing Protocols with 3 rd parties which incorporate appropriate safeguards to protect data. |
| F16 | Reviewing and auditing regularly the quality and accuracy of data used in decision making and performance monitoring | Performance data is reported regularly to senior management and Members and published publicly. Any issues arising or anomalies are investigated. |
| F17 | Ensuring financial management supports both long term achievement of outcomes and short-term financial and operational performance | The Finance team monitors and reports on in-year performance and long term risks/financial pressures and trends. |

| The Council should demonstrate the following requirements | | Position at Woking |
|---|--|---|
| | | <p>The Treasury management system tracks long term investments, and borrowing.</p> <p>Annual budget setting reports also refer to the MTFs, considering the long term implications of the budget to be approved.</p> |
| F18 | <p>Ensuring well-developed financial management is integrated at all levels of planning and control including management of financial risks and controls</p> | <p>Services are supported by specified contacts in the finance team.</p> <p>The finance system has been recently upgraded to provide better accessibility to financial information and more integrated, electronic processes.</p> <p>Finance monitoring reports are used from the finance system.</p> <p>Finance reporting monthly is included in the Green book with high-risk areas covered in detail and other variances reported by exception.</p> <p>Financial regulations and other operational instructions are reviewed to ensure they remain up to date with regard to structures, limits and operating practices. The Financial Regulations and Contract Standing Orders were not part of the review of the Constitution in 2015/16, but will be included in the 2019/20 review.</p> <p>Induction training for all new staff signposts them to these regulations which can be found on the intranet.</p> <p>An update on audit reports and the recommendations in reports is reported to the Standards and Audit committee twice a year and summary reports are available to all members.</p> <p>A Treasury Management strategy is agreed by the Executive in February prior to the operational year and a review of activity and performance is published in July of the following year after the year has ended. The Council complies with CIPFA guidance on Treasury Management. Monitoring takes place monthly with information in the green book and the O&S Committee has responsibility for the scrutiny of the function and receives a mid-year report.</p> <p>Capital and Investment Strategies, complying with new guidance, were approved by the Council in February 2019.</p> |
| G | Implementing good practices in transparency, reporting, and audit to deliver effective accountability | |
| G1 | <p>Writing and communicating reports for the public and other stakeholders in a fair, balanced and understandable style appropriate to the intended audience and ensuring that they are easy to access and interrogate</p> | <p>Reports are written using plain language, in a standard format which assists with reviewing and ensures key information is covered. The Marketing and Communications team review language where appropriate and some communications are reviewed independently to provide confidence that they are easily understood and accessible.</p> <p>There is Marketing and Communications strategy which incorporates an action plan.</p> |

| The Council should demonstrate the following requirements | | Position at Woking |
|---|---|---|
| | | The Council website was modernised in 2018/19 making information easier to access. |
| G2 | Striking a balance between providing the right amount of information to satisfy transparency demands and enhance public scrutiny while not being too onerous to provide and for users to understand | The requirements of the Local Government Transparency Code 2014 are addressed by a 'View our data' section on the internet. The Council uses datashare to make data accessible. Committee documents and webcasts are available online. There are corporate processes in place for FOI requests which were improved during 2018/19 and now include monthly performance reporting to CMG. |
| G3 | Reporting at least annually on performance, value for money and stewardship of resources to stakeholders in a timely and understandable way | The Green Book is published monthly reporting performance issues and variances by exception so focused and understandable. |
| G4 | Ensuring members and senior management own the results reported | CMG members and all portfolio holders are accountable for the Green Book – performance and financial monitoring/outturn. |
| G5 | Ensuring robust arrangements for assessing the extent to which the principles contained in this Framework have been applied and publishing the results on this assessment, including an action plan for improvement and evidence to demonstrate good governance (the annual governance statement) | The assessment is led by the Finance Director and Monitoring Officer, supported by CMG. Evidence is compiled from IA and all Senior managers. The draft statement is reviewed by the Standards and Audit Committee.. Published in draft in Statement of Accounts. Final version published with final accounts. Improvement Plan is updated and new actions added if appropriate as a result of each review. |
| G6 | Ensuring that this Framework is applied to jointly managed or shared service organisations as appropriate | Where the Council is party to joint arrangements appropriate governance arrangements are put in place. |
| G7 | Ensuring the performance information that accompanies the financial statements is prepared on a consistent and timely basis and the statements allow for comparison with other, similar organisations | The annual statutory accounts are prepared following accounting guidelines and standards in accordance with the Code of Practice and to statutory timescales. Reconciliations are prepared to demonstrate consistency with management reporting. The foreword provides a narrative link from the monthly management reporting to the statutory outturn. |
| G8 | Ensuring that recommendations for corrective action made by external audit are acted upon | Tracked on Shikari decision tracking software. No outstanding external audit recommendations. Standards and Audit committee receive reports from External Audit with status of any outstanding recommendations. |
| G9 | Ensuring an effective internal audit service with direct access to members is in place, providing assurance with regard to governance arrangement and that recommendations are acted upon | Internal Audit reports to each meeting of the Standards and Audit Committee including all reports and all recommendations made in the period. Summary reports are also available to members and independent members via their iPads. A new system to monitor the implementation of audit recommendations is being developed to replace Shikari. Outstanding recommendations are reported to CMG and the Standards and Audit Committee. |

| The Council should demonstrate the following requirements | | Position at Woking |
|---|--|---|
| | | <p>External Audit reports are presented to the Standards and Audit Committee as appropriate.</p> <p>The Standards and Audit committee has representation from across the council and is chaired by the Council’s independent member during the year. The committee has clear terms of reference for their responsibilities.</p> <p>An independent person (although not a member of the Standards Committee) has been appointed following the adoption of the standards framework.</p> |
| G12 | Ensuring that when working in partnership arrangements for accountability are clear and the need for wider public accountability has been recognized and met | <p>The Joint Committee, which incorporates the ‘statutory’ Crime & Disorder Reduction Partnership (Safer Woking Partnership), has agreed Terms of Reference and governance arrangements, that set out collective roles and responsibilities for participating organisations, including the Council.</p> <p>Services which are outsourced and operated by contractors are monitored.</p> |

STANDARDS AND AUDIT COMMITTEE - 18 JULY 2019

HEALTH AND SAFETY ANNUAL REPORT

Executive Summary

The Health and Safety at Work etc. Act 1974 and subsequent legislation places a general duty on the Council to ensure, so far as is reasonably practicable, the health, safety and welfare at work of their employees and others such as the general public who use the Council's facilities and may be affected by the carrying out of the work the Council does.

This report provides the Standards and Audit Committee with a review of health and safety activity during 2018/2019.

This report demonstrates that there are no matters of concern.

Recommendations

The Committee is requested to:

RESOLVE That the Health and Safety Annual Report be received with no matters of concern.

The Committee has the authority to determine the recommendation(s) set out above.

Background Papers: None.

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Date Published: 10 July 2019

REPORT ENDS

HEALTH AND SAFETY ANNUAL REPORT

1.0 Introduction

- 1.1 Up to and including the 2017/18 financial year, an annual Health and Safety report was made to Standards and Audit. The Chief Executive has requested that a report be made to CMG on a quarterly basis, with the 4th quarterly report – i.e. the report for the whole of the financial year - being submitted to Standards and Audit. This is the report for quarter 4 of the 2018/19 financial year i.e. the whole of the financial year and will be submitted to the Standards and Audit meeting on 18 July 2019.

2.0 Health and Safety Audits

- 2.1 Health and Safety audits are being undertaken by external consultants RSK who were appointed in March 2018.
- 2.2 Jon Martin from RSK has produced an audit report for HG Wells, Brockhill and Moorcroft. These were sent to the relevant managers and senior managers and were also put on CMG's agenda when they were received.
- 2.3 RSK have prepared a report on the risk assessments for Parking Services, Neighbourhood Team and Planning Enforcement, Brockhill, HG Wells, and Moorcroft. Again, these were sent to the relevant managers and senior managers and were also put on CMG's agenda when they were received.
- 2.4 The reports are appendices to this report along with the relevant managers' comments on what they have done in response to the issues raised.

3.0 Health and Safety Activities 2018/19

- 3.1 Health and Safety activities so far this year include:
- refresher training for 31 managers/senior managers and 3 members of CMG in the actions to take if there are no Fire Wardens present at the time of a fire alarm;
 - publishing the updated Water Hygiene and Legionella Policy
 - publishing the Employment of Contractors Policy
 - publishing the updated Asbestos Policy
 - publishing the updated Display Screen Equipment Policy
 - publishing the updated Driving at Work Policy
 - publishing the updated Health and Safety Policy
 - publishing the updated Lone Working Policy
 - reviewing all remaining policies to see if they require updating (as per previous Internal Audit requirement)
 - reviewing and updating the Fire Emergency Plan for the Civic Offices
- 3.2 Evacuation procedures have been tested at the Civic Offices on 15 June 2018 and observed by the Senior Health and Safety Officer. This was the first fire drill since the DWP have occupied the Civic Offices. The DWP have their own dedicated fire exit direct from their area. This opens near the entrance of St Andrew's House. Training needs were identified during the fire drill and a message was put on ewokplus afterwards reminding staff of the correct procedure.

- 3.3 A second fire drill took place at the Civic Offices on 29 October. Training needs were identified during the fire drill and an email was sent to all staff afterwards reminding staff of the correct procedure.
- 3.4 A new fire detection and alarm system was installed in the Civic Offices. Weekly tests of the system have been undertaken and staff should now be used to the new sound. (the alarm is now a two tone siren as opposed to a ringing bell)
- 3.5 Evacuation procedures at other buildings have been tested but not observed by the Senior Health & Safety Officer: Moorcroft 21 June 2018 and 17 January 2019, The Vyne 24 April 2018 and 8 May 2018, St Marys 22 May 18 and 19 October 2018 and Parkview on 17 May 18 and 14 February 2019.
- 3.6 Risk assessments have been reviewed and updated this financial year for Brockhill, Building Control, Car Parks Control Room, town centre Christmas tree, Civic Offices car park, Council-wide office work, Development Management and Planning, Drainage and Flood Risk Engineer, Estate management, Family Support Programme, First Aid provision for the Civic Offices, flooding and storms, Green Infrastructure – Balsam, Green Infrastructure , Health & Safety and Insurance, HGW – general, HGW – kitchen, HGW - work at heights, Home Independence (Homelink and Carline), Home Support, ICT & Commercial Unit, Moorcroft, Moorcroft first aid provision, Neighbourhood Team, Parking – CEOs, Parkview, Parkview first aid provision, Planning Policy, Revs, Bens & Cust Servs, St Mary's, The Vyne, The Vyne first aid provision, use of evacuation chairs, use of lifts to evacuate and Waterers Park Attenuation Pond. These have all been read and checked by the Senior Health & Safety Officer.
- 3.7 Earlier in 2018, before this financial year, risk assessments were reviewed and updated for Community Meals Service, Community Safety, Housing Needs, Housing Standards and Housing Strategy and Enabling. These have all been read and checked by the Senior Health & Safety Officer.
- 3.8 All current Health and Safety documents are available on the Health and Safety pages on ewokplus.

4.0 Accidents

- 4.1 Detailed accident statistics for the period 1 April 2018 to 31 March 2019 are attached in Appendix 1.
- 4.2 There were four accidents to staff, none of which required to be reported to the Health and Safety Executive (HSE) in accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR). In the whole of last year there were 20 accidents, and one was reported to the HSE.
- 4.3 Please note that in the summary table of accidents to non-employees in the report for quarter 3, one accident was duplicated and two were wrongly listed under “Centres” instead of “Centre grounds/car parks”.
- 4.4 There were 21 accident reports relating to non-employees, none of which were reported to the HSE under RIDDOR. These are detailed in Appendix 1 where you will see that the majority are not work related. In the whole of last year there were 9 accidents to non-employees and none were reported to the HSE under RIDDOR.

Freedom Leisure

- 4.5 Accident statistics for Freedom Leisure are shown in Appendix 2. There were two employee accident at the Leisure Centre, one of which was sport related and nine employee accidents at the Pool in the Park. No accidents to employees were required to be reported under RIDDOR.
- 4.6 At the Leisure Centre there were 278 accidents to non-employees. Amongst these were 178 accidents where the cause is listed as a sporting injury. No accidents to non-employees were required to be reported under RIDDOR.
- 4.7 At the Pool in the Park, there were 68 accidents to non-employees. Amongst these were 59 accidents where the cause is listed as sport related. No accidents to non-employees were required to be reported under RIDDOR.
- 4.8 Of these accidents, 37 (22 reported at the Leisure Centre and 15 at the Pool) were reported as having occurred outside of Freedom's premises, which may include accidents in Woking Park, the slope up to the Pool, the skate park, the children's play area and the car park. Freedom Leisure are not responsible for these areas, but the public sometimes go to the Pool and Leisure Centre seeking first aid treatment. Disregarding the accidents that occurred outside of Freedom's premises, there were 256 accidents to non-employees at the Leisure Centre and 53 accidents to non-employees at the Pool.
- 4.9 To put these figures in context, in this period of time there were 376,367 visitors to the Leisure Centre and 298,207 visitors to the Pool.
- 4.10 The Sportsbox opened mid-year and there has been one accident to staff. There have been 13 accidents to non-employees, all of which were sport related. There was an accident which occurred in the grounds of the Sportsbox which was reported to us by way of a claim for compensation.

New Vision Homes

- 4.11 New Vision Homes have provided statistics showing that there were two accidents to staff and 14 to non-employees, none of which were RIDDOR reportable. Of the 14 accident reports for non-employees, 6 were not within the remit of Pinnacle but they have recorded the accidents as they were reported to them, therefore there were only 8 accidents to non-staff.

Amey

- 4.12 There were 17 accidents to staff, one of which was RIDDOR reportable. There were no accidents to non-employees.

Brookwood Cemetery

- 4.13 There were two accidents to a staff member, which were not RIDDOR reportable. There were no accidents to non-employees.

Serco

- 4.14 There were 19 accidents to staff, none of which were RIDDOR reportable and one accident to non-employees which was not RIDDOR reportable. Serco had previously declared two accidents to non-employees but one of these was an accident to a child at the Skate Park which Serco have subsequently decided should not have been included in their report.

Thameswey Group

4.15 There was one accident to a staff member, which was not RIDDOR reportable. There were no accidents to non-employees.

| Table 1 | Employee | | Non-employee | | RIDDOR Reportable | |
|--|-----------|-----------------|--------------|-----------------|-------------------|-----------------|
| | This year | Last year total | This year | Last year total | This year | Last year total |
| Summary Accident Statistics | | | | | | |
| Woking Borough Council | 4 | 20 | 21 | 9 | 0 | 1 |
| Amey <i>N.B. "Last year" was only part of a year</i> | 17 | 9 | 0 | 0 | 1 | 1 |
| Brookwood Cemetery | 2 | N/a | 0 | N/a | 0 | N/a |
| Freedom Leisure - Leisure Centre | 2 | 4 | 256 | 323 | 0 | 0 |
| - Pool in the Park | 9 | 7 | 53 | 121 | 0 | 0 |
| - Sportsbox <i>from 30 July 2018</i> | 1 | N/a | 13 | N/a | 0 | N/a |
| Woking Park/Skate Park etc. <i>(reported to Freedom Leisure)</i> | N/a | N/a | 23 | 40 | 0 | 0 |
| New Vision Homes | 2 | 5 | 8 | 14 | 0 | 0 |
| SERCO | 19 | 10 | 1 | 1 | 0 | 0 |
| Thameswey Group | 1 | 4 | 0 | 0 | 0 | 0 |

5.0 Incidents

5.1 No near miss reports were received.

5.2 There were 26 aggressive incident reports received, relating to 15 incidents. In the whole of last year there were 8 aggressive incident reports completed during the year for 3 incidents.

5.3 Eight of the incidents took place in the One Stop Shop, one at Parkview, four on residential streets, one in the car park of a sheltered housing scheme and one on the phone.

5.4 Following the 15 incidents reported, seven people were sent a letter advising that their behaviour was not acceptable and that a marker had been placed against their records. Four incidents were reported to the Police and one arrest was made.

5.5 There were no reports received in confidence from other agencies (e.g. the Job Centre) of persons they have marked as "PV" (potentially violent) due to incidents that have occurred to their staff or on their premises.

6.0 Health & Safety Training

- 6.1 All Council staff plus staff from other organisations that are based in the Civic Offices or who visit regularly and require a photo ID card receive a Health and Safety induction before a photo ID card is issued. Once a photo ID card is issued, the holder can move around the Civic Offices without needed to be escorted by a member of Council staff.
- 6.2 Inductions are held every Monday morning (although inductions for Street Angels are held outside office hours) and take approximately 45 minutes.
- 6.3 Training undertaken this financial year includes:
- Induction training for all staff on their first day - 130 staff and work experience students.
 - Induction training for all staff from other organisations who are based in the Civic Offices including:
 - DWP - 3 people
 - New Vision Homes - 12 people
 - Skanska and their contractors - 11 people
 - Street Angels – 11 people
 - Surrey County Council - 20 people
 - Thameswey Group – 6 people
 - Others - 24 people
 - First Aid training courses including:
 - Emergency First Aid at Work course (1 day) – 22 people
 - First Aid at Work (3 day initial training or 2 day requalification) – 12 people
 - Defibrillator training – 8 people
 - Manual handling training – 5 people
 - Fire safety training:
 - initial Fire Warden training for 2 new Fire Wardens at the Civic Offices
 - Fire safety training for 31 managers/senior managers and 3 members of CMG in the actions to take if there are no Fire Wardens present in the Civic Offices at the time of a fire alarm. (please note this round of training started at the end of the 2017/18 financial year so other managers previously attended training).
 - Practical fire extinguisher training – 9 people
- 6.4 Three members of CMG attended a one day IOSH “Safety for Directors and Senior Executives” course in October.
- 6.5 Twenty nine managers including all Senior Managers passed the three day IOSH “Managing Safely” course in January.
- 6.6 The Assessrite (Display Screen Equipment) online course and self-assessment is completed annually by all staff who use a computer for more than 20% of the time. A total of 295 current staff have completed this during the year (it should be repeated every 12 months) and 130 people had not completed this by the end of March.
- 6.7 All staff have been sent email notification to start the “Firerite” fire safety online training course and the “OHSa” Office Health and Safety Awareness course. Managers and senior managers have been notified to start the Office Health and Safety Awareness for Line Managers (OHSALM) course. Relevant staff have been notified to start other courses including Homeworkers, Asbestos Awareness, Work at Height and COSHH (chemical substances).

- 6.8 “Firerite” online fire safety training – since August, 338 current staff have completed it and 88 people had not completed this by the end of March.
- 6.9 Office Health and Safety Awareness for Line Managers (OHSALM) online training – since October 48 people had completed it and 5 people who were assigned it had not completed this by the end of March. Senior Managers who had attended the IOSH “Managing Safely” course in January were excused from the online training.
- 6.10 Homeworkers online training – since August when the course was released, 126 current staff have completed it and 16 people who were assigned it had not completed this by the end of March.
- 6.11 Asbestos Awareness online training – since September when the course was released 50 current staff had completed it and 13 people who were assigned it had not completed this by the end of March.
- 6.12 Work at Height online training – since October when the course was released 56 people had completed it and 8 people who were assigned it had not completed this by the end of March.
- 6.13 COSHH online training – Since the beginning of December when the course was released 33 current staff had completed it and 8 people who were assigned it had not completed this by the end of March.
- 6.14 “OHSA” Office Health and Safety Awareness online training – since February when this course was released, 238 current staff had completed it and 187 people who were assigned it had not completed it by the end of March. Managers and Senior Managers are assigned the Office Health and Safety Awareness for Line Managers (OHSALM) variant and do not need to do both.
- 6.15 Food Safety 1 online training was sent to relevant people in the Meals Service and in Centres in February – 20 current staff had completed it and 12 staff who had been assigned it had not completed it by the end of March.
- 6.16 Food Safety 2 online training was sent to relevant people in the Meals Service and in Centres in February – 19 current staff had completed it and 7 staff who had been assigned it had not completed it by the end of March.
- 6.17 First Aid online training was sent to people who hold either the three day “First Aid at Work” or the one day “Emergency First Aid at Work” qualifications in January – 46 current staff had completed it and 19 staff who had been assigned it had not completed it by the end of March.
- 6.18 Reminders have been sent to all those with an outstanding online course.

7.0 Planned Work for 2019/20

7.1 The Health and Safety work during 2019/20 will include the following:

- Reviewing and updating the Work Related Stress Policy, Fire Safety Policy, Electrical Safety Policy and Handling Aggression at Work Policy.
- reviewing all remaining policies to see if they require updating (as per previous Internal Audit requirement)
- reviewing and updating the Fire Emergency Plan for the Civic Offices

- continuing to add, update and improve health and safety information available on ewokplus;

8.0 Implications

Financial

- 8.1 Costs associated with training and maintaining a safe working environment are provided for within existing funds.

Human Resource/Training and Development

- 8.2 Training is crucial to maintaining a good health and safety record and avoiding accidents. As well as the training matters referred to in this report there remains a significant commitment to continuing this in the future and health and safety, particularly maintaining awareness, is a key part of the Corporate Learning and Development Plan.

Community Safety

- 8.3 This aspect of Health and Safety specifically relates to the Council's duties as an organisation, an employer and with the safety of the community using Council premises. Other aspects of community health and safety, including food hygiene are dealt with in Environmental Health.

Risk Management

- 8.4 The steps taken to identify and mitigate against health and safety risks are contained within the report.

Sustainability

- 8.5 No impact.

Equalities

- 8.6 Equalities information is not recorded on accident statistics. However, none of the reported accidents are considered to be a result of equality issues.

REPORT ENDS

ACCIDENT ANALYSIS SUMMARY TABLE

Number of accidents to **EMPLOYEES** in the period 1 April 2018 to 31 March 2019

| LOCATION | Brockhill | Car Parks | Civic Offices | Centres | Centre grounds/ car park | Comm Meals Kitchens | H G Wells | Paths & roads | Sheltered schemes | Non-WBC premises | Other | TOTAL |
|-----------------------------------|-----------|-----------|---------------|----------|-----------------------------|------------------------|--------------|------------------|----------------------|---------------------|----------|----------|
| CAUSES | | | | | | | | | | | | |
| Slips, trips & falls on the level | | | 1 | | | | | | | | | 1 |
| Falls up/down stairs | | | | | | | | | | | | 0 |
| Falls from height | | | | | | | | | | | | 0 |
| Walked into something | | | | | | | | | | | | 0 |
| Driving | | | | | | | | | | | | 0 |
| Falling/dropped objects | | | | | | | | | | | | 0 |
| Loading/unloading vehicles | | | | | | | | | | | | 0 |
| Handling objects | | | 1 | | | | | | | | | 1 |
| Lifting/carrying/pushing/pulling | | | | | | | | | | | | 0 |
| Tools/ machinery/ hand tools | | | | | | | | | | | | 0 |
| Cooking/kitchen work | | | | | | 1 | | | | | | 1 |
| Cleaning | | | | | | | | | | | | 0 |
| Other | 1 | | | | | | | | | 1 | | 2 |
| TOTAL | 1 | 0 | 2 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 5 |

| | | | | | | | | | | | | |
|-------------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| INJURIES | | | | | | | | | | | | |
| No injury | | | | | | | | | | | | 0 |
| Minor bump or knock | | | | | | | | | | | | 0 |
| Minor cuts & grazes | | | | | | | | | | | | 0 |
| Bruising | | | 1 | | | | | | | 1 | | 2 |
| Larger cuts / puncture wounds | | | | | | | | | | | | 0 |
| Burns & scalds | 1 | | | | | 1 | | | | | | 2 |
| Strains, sprains & pains | | | 1 | | | | | | | | | 1 |
| Back pain | | | | | | | | | | | | 0 |
| Fractures | | | | | | | | | | | | 0 |
| Eye injuries | | | | | | | | | | | | 0 |
| Other injury | | | | | | | | | | | | 0 |
| TOTAL | 1 | 0 | 2 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 5 |

| | | | | | | | | | | | | |
|------------|---|---|---|---|---|---|---|---|---|---|---|---|
| A. Major | | | | | | | | | | | | 0 |
| B. Serious | | | | | | | | | | | | 0 |
| C. Minor | 1 | 0 | 2 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 5 |

A. Treatment at hospital (24 hours) or major injury (RIDDOR reportable - Reporting of Injuries Diseases and Dangerous Occurrences Regulations 1995)

B. More than 3 days absence from work (RIDDOR reportable)

C. No absence or return to work within 3 days (not reportable)

Summary of Accident Report Forms Completed For Employees

Accident details

| <u>Building</u> | <u>Location</u> | <u>What happened</u> | <u>Injury</u> |
|------------------|-----------------|---|--|
| Brockhill | staff room | IP was making a cup of tea, put cup on side of draining board and spilt boiling water on right hand | scald to right hand |
| Civic Offices | boardroom | opening the flaps in the centre of the table aggravated an existing elbow injury | partially dislocated elbow |
| The Vyne | kitchen | IP moved a pan of hot water and it splashed onto her arm. | scald |
| Civic Offices | 3rd floor south | Two front spokes of IP's chair broke and IP fell to the ground, hitting his arm on the desk and jarring his back. | bruise on top of right arm, back pain |
| Private dwelling | sitting room | FSP client's daughter deliberately hit IP on the head with a piece of wooden toy train track | lump and bruise to right side of head and forehead |

* Note – IP is an abbreviation for “injured person”. This avoids the use of their name, for privacy.

Serious accidents reported to HSE under RIDDOR:

The following accidents were reported under RIDDOR:

- None

ACCIDENT ANALYSIS SUMMARY TABLE

Number of accidents to **NON-EMPLOYEES** in the period 1 April 2018 to 31 March 2019

| LOCATION | Brockhill | Car Parks | Civic Offices | Centres | Centre grounds/ car park | Comm Meals Kitchens | H G Wells | Paths & roads | Sheltered schemes | Non-WBC premises | Other | TOTAL |
|-----------------------------------|-----------|-----------|---------------|---------|-----------------------------|------------------------|-----------|---------------|-------------------|------------------|-------|--------------|
| CAUSES | | | | | | | | | | | | |
| Slips, trips & falls on the level | | | | 5 | | | | 3 | | 2 | 1 | 11 |
| Falls up/down stairs | | | | | | | | | 2 | | | 2 |
| Falls From height | | | | | | | | 1 | | | | 1 |
| Walked into something | | | | | | | | | | | | 0 |
| Driving | | | | | | | | | | | | 0 |
| Falling/dropped objects | | | | | | | | | | | | 0 |
| Loading/unloading vehicles | | | | | | | | | | | | 0 |
| Handling objects | | | | | | | | | | | | 0 |
| Lifting/carrying/pushing/pulling | | | | | | | | | | | | 0 |
| Tools/ machinery/ hand tools | | | | | | | | | | | | 0 |
| Cooking/kitchen work | | | | | | | | | | | | 0 |
| Cleaning | | | | | | | | | | | | 0 |
| Other | | | | 1 | 2 | | 1 | | 1 | | 2 | 7 |
| TOTAL | 0 | 0 | 0 | 6 | 2 | 0 | 1 | 4 | 3 | 2 | 3 | 21 |
| INJURIES | | | | | | | | | | | | |
| No injury | | | | 1 | | | | | | 1 | 1 | 3 |
| Minor bump or knock | | | | 2 | | | | | 1 | | | 3 |
| Minor cuts & grazes | | | | 2 | 1 | | 1 | | 1 | | | 5 |
| Bruising | | | | 1 | | | | 2 | | 1 | | 4 |
| Larger cuts / puncture wounds | | | | | 1 | | | | 1 | 1 | 1 | 4 |
| Burns & scalds | | | | | | | | | | | | 0 |
| Strains, sprains & pains | | | | | | | | 1 | | | 1 | 2 |
| Back pain | | | | | | | | | | | | 0 |
| Fractures | | | | | | | | | | | | 0 |
| Eye injuries | | | | | | | | | | | | 0 |
| Other injury | | | | | | | | | | | | 0 |
| TOTAL | 0 | 0 | 0 | 6 | 2 | 0 | 1 | 3 | 3 | 3 | 3 | 21 |
| A. Major | | | | | | | | | | | | |
| B. Serious | | | | | | | | | | | | |
| C. Minor | 0 | 0 | 0 | 6 | 2 | 0 | 1 | 3 | 3 | 3 | 3 | 21 |

A. Major injury as defined by RIDDOR (Reporting of Injuries Diseases and Dangerous Occurrences Regulations 1995)

B. RIDDOR reportable because injured party taken directly to hospital

C. Not RIDDOR-reportable

Summary of Accident Report Forms Completed For Non-Employees

These include reports of accidents that occurred but were not work related.

| <u>Building</u> | <u>Location</u> | <u>What happened</u> | <u>Injury</u> |
|------------------------|------------------------|---|--|
| Moorcroft | lounge | IP was stroking a dog which was brought in by a volunteer. The dog was young and excited, it jumped up and caught its claw on IP's forearm. | cut |
| Moorcroft | men's toilets | IP tripped over his shoelaces. Put his arm up to protect his face and elbow went through the lid of the toilet. | redness and graze to right elbow |
| Vale House | front entrance | Front entrance door opened and closed so fast that it hit and injured IP's arm. <ul style="list-style-type: none"> Please note that this incident was inadvertently duplicated on the summary table for quarter 2. | took off a flap of skin from left arm which was bleeding heavily |
| Moorcroft | car park | IP was climbing the steps on the Bustler bus and her foot slipped. <ul style="list-style-type: none"> Please note that on the summary table for quarter 2, this incident was wrongly listed under "Centres" instead of "Centre grounds/car park" | Deep cut to lower shin |
| The Vyne | car park | IP was hit by a car which made her fall over in the car park. <ul style="list-style-type: none"> Please note that on the summary table for quarter 2, this incident was wrongly listed under "Centres" instead of "Centre grounds/car park" | cut to left hand |
| The Vyne | o/s main office | IP overbalanced whilst sitting in a coffee shop chair and fell on the floor | no injuries |
| Ferney Court | stairwell | IP missed the step on the way up and fell down on front side. IP had returned from the pub but only had a few pints. IP thinks he had low blood sugar as he is diabetic. | cuts and bruising to legs, mainly calves |
| Ferney Court | stairwell | Returning home from walking the dog, going upstairs and he (the dog) pulled a little bit and IP lost his footing. Fell down and bumped forehead and grazed bottom. | Bumped forehead and scratch at top of bottom. Felt dazed for a while |
| Moorcroft | Main hall | whilst sitting back down, IP lost her footing and missed the chair | bruise to left arm and sore upper leg |
| Moorcroft | main hall | IP was paying for raffle tickets - instead of standing in front of the table she stood on the stage. As she turned she caught her foot on the cable which was up on the stage | bump to head |
| On the Bustler Bus | | A week after the event, IP told staff member that she had fallen on the bus. | cut to leg |
| On the Bustler Bus | | Whilst on the bus walking to her seat, IP's leg gave way. | discomfort |
| HG Wells | | IP knelt on a tiny piece of glass on the floor | small cut |
| Moorcroft | Main Hall | IP tripped over her own walking stick. | banged her nose and had nose bleed, banged her knee. |

* Note – IP is an abbreviation for "injured person". This avoids the use of their name, for privacy.

Summary of Accidents Reported By Way of Claim for Compensation But No Accident Report Form Completed

| <u>Building</u> | <u>Location</u> | <u>What happened</u> | <u>Injury</u> |
|--|------------------------|---|---|
| Commercial Way | Sparrow Park | Tripped over uneven paving - notified by claim for compensation, no accident report received | Bruised above lip and on chin |
| Chertsey Road | | Claimant fell in open gully along Chertsey Road where contractors had removed gully cover. Notified by claim for compensation, no accident report received | Injury to left knee and right wrist. |
| Woking Park | Skate Ramp | Child fell whilst using his scooter at skate ramp and caught his knee on a screw. Notified by claim for compensation, no accident report received | Large cut to right knee |
| Bedser Bridge | | IP slipped on ice on the bedser bridge - notified by claim for compensation, no accident report received | soft tissue injury to arm & bruising to knees |
| unknown - road name given by solicitors does not exist | | Claimant Tripped Over A Pothole. Road name given by solicitors does not exist - Notified by claim for compensation, no accident report received | |
| Sportsbox | outside | Claimant hurt hand on fencing as he climbed over the fence at Sportsbox - notified by claim for compensation, no accident report received | Puncture wound and cut, laceration across palm of right hand, loss of movement to littlerfinger and ring finger on right hand |
| Goldsworth Park Play Area | Monkey bars | Claimant hurt arm on monkey bars in Goldsworth play park. As he jumped down he tripped over a metal bar, as he fell he bashed his arm on a metal pole - notified by claim for compensation, no accident report received | Bicep tendon rupture |

Serious accidents reported to HSE under RIDDOR:

No accidents were reported under RIDDOR.

Freedom Leisure**Accident stats**
01/04/18- 31/03/19**Woking LC****Total visitors** 376367 April 18- March 19**Percentage of accidents** 0.07%

| | Total accidents | RIDDOR reportable | Non RIDDOR reportable | Sport related | Outside (Playground/ skate park/ car park) |
|----------|-----------------|-------------------|-----------------------|---------------|--|
| Customer | 278 | 0 | 278 | 178 | 22 |
| Staff | 2 | 0 | 2 | 1 | 0 |
| Total | 280 | 0 | 280 | 179 | 22 |

PITP**Total visitors** 298207 April 18- March 19**Percentage of accidents** 0.02%

| | Total accidents | RIDDOR reportable | Non RIDDOR reportable | Sport related | Outside (Playground/ skate park/ car park) |
|----------|-----------------|-------------------|-----------------------|---------------|--|
| Customer | 68 | 0 | 68 | 59 | 15 |
| Staff | 9 | 0 | 9 | 0 | 0 |
| Total | 77 | 0 | 77 | 59 | 15 |

Sportsbox**Total visitors** 44873 October 18- March 19**Percentage of accidents** 0.04%

| | Total accidents | RIDDOR reportable | Non RIDDOR reportable | Sport related | Outside (Playground/ skate park/ car park) |
|----------|-----------------|-------------------|-----------------------|---------------|--|
| Customer | 13 | 0 | 13 | 13 | 0 |
| Staff | 1 | 0 | 1 | 0 | 1 |
| Total | 14 | 0 | 14 | 14 | 1 |

STANDARDS AND AUDIT COMMITTEE – 18 JULY 2019

REGISTRATION OF INTERESTS FOR MEMBERS ELECTED IN MAY 2019

Executive Summary

The Borough Council elections held on 2 May 2019 resulted in three newly-elected Members, and the re-election of seven existing Members.

Under the Members' Code of Conduct, the newly-elected Members (Councillors Elson, Leach and Sanderson) were required to register their interests, with the Monitoring Officer, within twenty-eight days of their election. This obligation was complied with.

Recommendation

The Committee is requested to:

RESOLVE That the registration of the interests of the Members newly-elected in May 2019 be noted.

The Committee has the authority to determine the recommendation set out above.

Background Papers: None.

Reporting Person: Peter Bryant, Monitoring Officer/Head of Democratic and Legal Services
Email: peter.bryant@woking.gov.uk, Extn: 3030

Contact Person: Peter Bryant, Monitoring Officer/Head of Democratic and Legal Services
Email: peter.bryant@woking.gov.uk, Extn: 3030

Date Published: 10 July 2019

REPORT ENDS

STA19-010

STANDARDS AND AUDIT COMMITTEE - 18 JULY 2019

STANDARDS AND AUDIT COMMITTEE - WORK PROGRAMME

Executive Summary

There are a number of business items which come before the Committee on an established and recurring basis. Most notably, the Internal Audit service and the external audit function both produce plans and reports for consideration throughout the year. These matters are, for the most part, planned with reporting dates fixed in advance. It is helpful to see these planned events listed together, and a provisional work programme is attached to this report.

Recommendations

The Committee is requested to:

RESOLVE That the Work Programme be received.

| |
|---|
| The Committee has the authority to determine the recommendation(s) set out above. |
|---|

Background Papers: None.

Reporting Person: Peter Bryant, Head of Democratic and Legal Services
Email: peter.bryant@woking.gov.uk, Extn: 3030

Contact Person: Peter Bryant, Head of Democratic and Legal Services
Email: peter.bryant@woking.gov.uk, Extn: 3030

Date Published: 10 July 2019

REPORT ENDS

STA19-011

STANDARDS AND AUDIT COMMITTEE WORK PROGRAMME 2019-20

| Committee date | Report title | Issues to consider |
|-----------------------|--|---|
| 18 July 2019 | External Audit Report to those Charged with Governance (ISA 260) 2018/19 | External Audit report and recommendations arising out of the 2018/19 Audit. |
| | Annual Governance Statement 2018/19 | To receive the Annual Governance Statement for inclusion in the 2018/19 Statement of Accounts |
| | Internal Audit Annual Report | Review of work undertaken by the Internal Audit service in 2018/19 (to include update on outstanding high risk recommendations) |
| | Health and Safety Annual Report | To receive the Health and Safety Annual Report. |
| | Registration of Interests for Members Elected in May 2019 | To receive Registration of Interests for Members elected in May 2019. |
| | Work Programme | To receive the provisional Work Programme for the year ahead. |
| 19 September 2019 | Annual Audit and Inspection Letter | Summary of the key findings from the 2018/19 Audit. |
| | Internal Audit Service Progress Update | Progress update of work undertaken by the Internal Audit service. |
| | Members' Code of Conduct | Review operation between 1 August 2018 and 31 July 2019. |
| | Ombudsmen Complaints | Receive the annual report on Ombudsmen Complaints. |
| 28 November 2019 | Internal Audit Progress Report | Review of work undertaken by the Internal Audit service in the six months to 30/9/19. |
| | Internal Audit Charter | To approve the Internal Audit Charter, which would be reviewed annually. |
| 5 March 2020 | External Audit Plan | To consider the programme of work for the 2019/20 year. |
| | Internal Audit Strategy and Proposed 2020/21 Plan | To approve the Internal Audit plan for the year 2020/21. |
| | Internal Audit Service Progress Update | Progress update of work undertaken by the Internal Audit service. |

