

**Report To:** **AUDIT PANEL**

**Date:** 15 March 2022

**Reporting Officer:** Kathy Roe – Director of Finance  
Wendy Poole – Head of Risk Management and Audit Services

**Subject:** **ANNUAL GOVERNANCE STATEMENT 2020/21 –  
IMPROVEMENT PLAN PROGRESS REPORT**

**Report Summary:** To present the Annual Governance Statement 2020/21 – Improvement Plan Progress Report to Members for comment.

**Recommendations:** The Audit Panel is asked to comment on the Annual Governance Statement 2020/21 Improvement Plan Progress Report attached at **Appendix 1**.

**Corporate Plan:** Demonstrates proper Corporate Governance.


**Policy Implications:** The Governance Statement demonstrates proper compliance with the Accounts and Audit Regulations 2015 (as amended).


**Financial Implications:** Sound corporate governance and proper systems of internal control are essential for the long-term financial health and reputation of the Council.  
**(Authorised by the Borough Treasurer)**

**Legal Implications:** The Accounts and Audit Regulations 2015 (as amended) require the Council to produce an Annual Governance Statement. The purpose is to ensure that there is a sound system of governance operating in the council.  
**(Authorised by the Borough Solicitor)**  
In addition the Improvement Plan Progress Report provides Members with the opportunity to consider and comment on the progress which has been made.

**Risk Management:** The statement provides assurance that the Council has a sound system of corporate governance in place. It is considered to be an important public expression of how the Council directs and controls its functions and relates to its community.

**Access to Information:** The background papers can be obtained from the author of the report, Wendy Poole, Head of Risk Management and Audit Services by:

 Telephone: 0161 342 3846

 e-mail: [wendy.poole@tameside.gov.uk](mailto:wendy.poole@tameside.gov.uk)

## 1 INTRODUCTION

- 1.1 The preparation and publication of an Annual Governance Statement is necessary to meet the requirements set out in Regulation 6 of the Accounts and Audit Regulations 2015. It requires authorities to “conduct a review at least once in a year of the effectiveness of its system of internal control” and “following the review, the body must approve an annual governance statement prepared in accordance with proper practices in relation to internal control”.
- 1.2 The Annual Governance Statement was presented to the Audit Panel on 27 July 2021 as a draft document for review and comment and presented as a final document for approval on 9 November 2021.
- 1.3 The Annual Governance Statement is based on an Assurance Framework which includes:-
  - AGS Self-Assessment Checklists and signed Assurance Statements;
  - Head of Risk Management and Audit’s Annual Report;
  - Annual Review against the Code of Corporate Governance;
  - Medium Term Financial Plan/Budget Report;
  - Review of System of Internal Audit;
  - Annual Audit Letter;
  - Role of the Chief Financial Officer;
  - Role of the Head of Internal Audit;
  - Corporate Plan; and
  - Statutory Inspections.
- 1.4 The Annual Governance Statement details:-
  - Section 1 - Scope of Responsibility;
  - Section 2 - The purpose of the Governance Framework;
  - Section 3 - The Governance Framework;
  - Section 4 - Review of Effectiveness;
  - Section 5 - Level of Assurance; and
  - Section 5 - Conclusion and Signatures

## 2 IMPROVEMENT PLAN PROGRESS REPORT

- 2.1 Section 5 of the Annual Governance Statement identified a number of areas for development which were appended to the statement in an Improvement plan. Addressing the issues identified will further enhance the governance framework in place for the Council.
- 2.2 The Table presented at **Appendix 1** provides a progress report against each development as at February 2022.

## 3 RECOMMENDATIONS

- 3.1 As set out on the front of the report.

**Annual Governance Statement 2020/21 – Improvement Plan**

**Appendix 1**

| Ref | Area of Review          | Improvement Identified for Implementation in 2021/22  | Progress Reported As At October 2021  | Progress Reported As At February 2022   | Responsible Director Target Date  |
|-----|-------------------------|---|---|---|---|
| 1   | 2019/20 Vision Tameside | The Ashton Town Hall project and the remaining elements of the Vision Tameside project will be completed if and when capital monies become available following the Capital Programme prioritisation review.   | The Ashton Town Hall project and the remaining elements of the Vision Tameside project are on hold until funding becomes available.   | Approx. £20m of Levelling Up Funds has now been received for Ashton Town Centre. A proportion of these monies will allow the first phase of works to commence on Ashton Town Hall   | Place<br>March 2022   |
| 2   | Children's Services     | <p>An action plan has been drafted in relation to the further development of the 7-Point Plan and associated activity and this will also be an initial focus for the Corporate Transformation/Budget Turnaround Team.</p> <p>The specific focus of this will be agreed in July 21, but will include placements for cared for children.</p> <p>Wider improvement and performance activity, including those areas highlighted by Ofsted are also detailed in the improvement action plan with completion dates in 2021.</p> | <p>The action plan has been progressed and the staffing capacity identified as urgent following the OFSTED focused visit has been delivered.</p> <p>The overarching improvement plan, which pulls together all the previous plans including the 7 point plan into one place, has been developed.</p> <p>The focus for the Transformation Team has been identified, a number of the actions identified will be delivered in 2021/22, this addresses the wider improvement activity needed not only in Children's Social Care but also across the Council to support improvements for Children.</p> | <p>The focused visit response and investment identified has been delivered. The ongoing improvement activity has been subsumed into an overarching Improvement Plan as has the 7 point sustainability plan.</p> <p>The Transformation Team continues to engage in supporting transformation work in Children's service including a programme of business process re-engineering to enable frontline social workers to focus on direct work with families. Work is also underway to deliver significant improvement in outcomes and costs savings in accommodation for care leavers.</p> | <p>Children's Services<br/>December 2021</p> <p>Revised Deadline<br/>March 2022</p> |

| Ref | Area of Review   | Improvement Identified for Implementation in 2021/22   | Progress Reported As At October 2021  | Progress Reported As At February 2022   | Responsible Director Target Date                                      |
|-----|--|--|---|---|---|
|     |  |  | The service is also working with the DfE and Stockport via a successful bid to the SLIP programme to further develop our Quality Assurance.   | Joint meetings have taken place with Stockport who have inputted into the revised Quality Assurance and Performance Framework and have supported in the Development of Practice Week taking place from the 28 February 2022   |   |
| 3   | Management of CCTV                                     | Capital investment to update the CCTV system will be progressed during 2021/22, if money is allocated to the project following the outcome of the Capital Programme prioritisation review.   | The replacement of CCTV cameras has been put on hold until funding becomes available.   | The replacement of CCTV cameras has been put on hold until funding becomes available.   | Place<br>March 2022   |
| 4   | ICT Disaster Recovery and Business Continuity Planning | <p>Services to review and agree their system recovery priorities in conjunction with the IT Service.</p> <p>Once determined systems will need to be put in place to ensure Tier 1 systems have full recovery checks and tests undertaken annually and Tier 2 systems every other year.</p> | <p>All Council hosted IT systems have now been moved out of the Rochdale Data Centre and are now located in the Councils Disaster recovery facility in the Tameside Hospitals Data Centre.</p> <p>Works to commission the new Data Centre in Ashton Old Baths is continuing and systems will begin to be moved across from the hospital in November 21.</p> <p>The Corporate IT Business Continuity and Disaster Recovery plan is going</p> | <p>The corporate business continuity and recovery plan has been to SLT and ADDG and details the process and order in which systems hosted by TMBC will be recovered in the event of a serious cyber incident or the new data centre in Ashton Old Baths being rendered un-useable.</p> <p>Conflicting priorities and a lack of capacity within the corporate IT service means commissioning the new data center is still ongoing and work will not be complete until end of May. At which point the</p> | <p>Finance<br/>March 2022</p> <p>Revised Deadline<br/>August 2022</p> |

| Ref | Area of Review                                       | Improvement Identified for Implementation in 2021/22   | Progress Reported As At October 2021  | Progress Reported As At February 2022  | Responsible Director Target Date                          |
|-----|--|--|---|--|---|
|     |  |  | through the internal governance process – including the priority for systems recovery in the event of a disaster. The new DR facility will be fully operational in final quarter of 2021/22.  | migration of systems from the hospital can begin. This process will take around 6-8 weeks to complete. Subject to conflicting priorities and capacity, it is envisaged the DR facility will be fully operational in quarter 2 2022/23.   |   |
| 5   | Information Governance                               | Delivery of the Information Governance Work Plan will be progressed in 2021/22 now that additional capacity has been added to the team, to ensure compliance with UK GDPR and the Data Protection Act 2018.    | <p>Delivery of the Work Plan is progressing well and a number of policies and procedures have been updated and approved by the Audit Panel in July and September 2021.</p> <p>A revised Intranet page is currently in development.</p> <p>Further updated documents will be presented to future meetings of the Audit Panel for approval.</p> | <p>The Information Governance Champions Group and the Information Governance Group meet regularly on a two monthly basis.</p> <p>The revised Data Protection/Information Governance Intranet Page has been launched.</p> <p>Policies, procedures and protocols continue to be updated and presented for approval in accordance with the Work Plan which is monitored by the Information Governance Group</p> | <p>Governance and Pensions<br/>Finance<br/>March 2022</p> |
| 6   | Implementation of a Strategic Commissioning Function | Until the proposed legislation is passed through Parliament, it is difficult to evaluate the risks ahead. As further clarity is received on the GM Integrated Care System, risks will be identified, evaluated | All localities have responded to 6 questions on the development of their local place based model. Sir Richard Leese has been appointed as Chair Designate of the Integrated Care Board  | The date for the establishment of Integrated Care Boards (ICBs) nationally has been moved back to 1 July 2022. The bill is still on its journey through Parliament.  | <p>Finance<br/>Single Leadership Team<br/>March 2022</p>  |

| Ref | Area of Review                      | Improvement Identified for Implementation in 2021/22   | Progress Reported As At October 2021  | Progress Reported As At February 2022  | Responsible Director Target Date  |
|-----|-------------------------------------|--|---|--|---|
|     |                                     | and reported in accordance with the joint principles agreed across the place based leadership model.   | (ICB). Work is underway on first draft of overarching GM ICS operating model. Latest ICS State of Readiness plans submitted to NHS England/NHS Improvement. | An initial draft Greater Manchester ICB Constitution underwent locality consultation in December 2021 and was submitted to NHS England and Improvement (NHSE/I). A further draft will be prepared once NHSE/I release the revised model constitution template.<br><br>There are discussions underway at the GM level regarding the possible forms for the Locality Boards permitted under the current draft legislation. | Revised Deadline<br>June 2022   |
| 7   | Debtors                             | Improvements to the Debtors System need to be embedded across the Council and these will then be tested by Internal Audit in the latter half of 2021/22 to provide assurance that the overall system is working effectively and fit for purpose. | The audit of the Debtors system is due to commence in Q3 of 2021/22.  | The audit of the Debtors system was due to be undertaken in Q4 of 2021/22. However, capacity within the Team has now been diverted to make the payments recently announced by the government in terms of a £150 Council Tax Rebate.<br><br>The audit work has been rescheduled to Q1 in 2022/23.   | Governance and Pensions<br>Finance<br>March 2022<br><br>Revised Deadline<br>July 2022 |
| 8   | Compliance with the CIPFA Financial | To ensure the nine improvements identified in the assessment conducted and   | An action plan was reported to Audit Panel in September 2021 setting out the proposed changes to be implemented   | Work is ongoing to implement the proposed changes set out in the action plan in September 2021.  | Director of Finance<br>March 2022   |

| Ref | Area of Review           | Improvement Identified for Implementation in 2021/22   | Progress Reported As At October 2021   | Progress Reported As At February 2022   | Responsible Director Target Date  |
|-----|--------------------------|--|--|---|---|
|     | Management Code (New)    | reported to Executive Cabinet in April 2021 are implemented.   | over the period October 2021 to March 2022.  | <p>Revisions to the Financial Regulations have been approved. A budget holder manual is in draft and training materials are being developed.</p> <p>An interim review of the capital programme has been concluded, and the business case template refresh is in progress.</p> <p>2022/23 budget setting included an initial risk assessment process, which will be further developed during 2022/23. Further work is required to develop internal financial reporting for the Senior Leadership Team.</p> |   |
| 9   | Early Help Service (New) | To review and implement the learning and improvements identified by the Peer Review conducted by Stockport in December 2020. | An action plan has been developed the key focus of this is the establishment of a strategic leadership group to lead on the co-location and integration priority, which is chaired by the Director of Children's Services (DCS) with key senior leads from Health and other key partners. Four locations have been identified within each neighbourhood and a location | The MASH and EHAP services have been co-located at Tameside One, further redesign work is underway. Work is ongoing to deliver colocation of neighbourhood teams along with a newly identified Family Hubs work programme.  | <p>Children's Services<br/>March 2022</p> <p>Revised Deadline<br/>December 2022</p> |

| Ref | Area of Review | Improvement Identified for Implementation in 2021/22 | Progress Reported As At October 2021   | Progress Reported As At February 2022 | Responsible Director Target Date |
|-----|----------------|--|--|---------------------------------------|----------------------------------|
|     |                |  | <p>for the colocation of the MASH/EHAP and Spoke, which is expected to be delivered through 2022. This will be developed throughout Tameside around the Family Hub model as a main hub and spoke approach utilising both Health, Education and LA buildings based in each neighbourhood</p> <p>This is a key priority through the new Work Smart initiative.</p> |                                       |                                  |