

Annual Governance Statement 2019/2020

This is a signed statement by the Executive Leader and Chief Executive certifying that governance arrangements are adequate and operating effectively within the Council.

1. Scope of Responsibility

Tameside MBC (the Council) 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 Council 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 Council is also responsible for putting in place proper arrangements for the governance of its affairs, facilitating the effective exercise of its functions, which includes arrangements for the management of risk. These arrangements are intended to make sure that we do the right things, in the right way, for the right people, in good time, and in a fair, open, honest and accountable way. The Council has approved and introduced a Code of Corporate Governance.

This Annual Governance Statement explains how we have followed the above Code and the requirements of the Accounts and Audit (England) Regulations 2015.

The Council, in accordance with the Local Government Pension Scheme (LGPS) Regulations, which are written by the Department for Communities and Local Government (DCLG) and passed by Parliament, administers the Greater Manchester Pension Fund (GMPF).

The Council delegates the function in relation to maintaining the GMPF to the following: -

- Pension Fund Management Panel
- Pension Fund Advisory Panel
- Pension Fund Working Groups
- The Director of Governance and Pensions

A Local Board was established in 2015 and membership is comprised of scheme employers and member representatives. The purpose of the Board is to assist the Administering Authority in its role as a scheme manager of the Scheme. Such assistance is to:

- secure compliance with the Regulations, any other legislation relating to the governance and administration of the Scheme, and requirements imposed by the Pensions Regulator in relation to the Scheme and;
- to ensure the effective and efficient governance and administration of the scheme.

The Executive Leader of the Council chairs the Management Panel and all Panels and Working Groups have elected members from the other nine Greater Manchester Authorities, as the fund is accountable to its member Authorities. Whilst the GMPF has different governance arrangements to other Council Services (which are all detailed on its website), all officers are employees of the Council and therefore comply with the Council's Code of Corporate Governance and Constitution. Specific reference will not be made to GMPF throughout the Annual Governance Statement, unless appropriate to do so, as it is considered to be part of the Council.

2. The Purpose of the Governance Framework

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

The system of internal control is a significant part of the 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 Council'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.

The Governance Framework has been in place at the Council for the year ending 31 March 2020, and up to the date when the annual accounts are approved.

3. The Governance Framework

Developing codes of conduct which define standards of behaviours for members and staff and policies dealing with whistleblowing and conflicts of interest and that these codes and policies are communicated effectively.

Members and Officers are governed by Codes of Conduct, Cabinet Portfolios, contracts of employment, employment rules and procedures, Professional Codes of Conduct and bound by the Constitution and Code of Corporate Governance. Conflicts of interest are recorded in the minutes of all meetings, where applicable, and a register is maintained for both members and officers by the Monitoring Officer.

The Council is committed to leading on and maintaining the highest standards of behaviour and in support of this hosts and chairs the National Anti-Fraud Network (NAFN). In addition to those mentioned above, documentation to eliminate corruption includes Procurement Standing Orders, Financial Regulations, Anti-Fraud, Bribery and Corruption: Statement of Intent, Terms of Reference, Protocols for Gifts and Hospitality and Standards of Conduct and Ethics.

The Council has a published Whistleblowing Policy on its public website and awareness and updates are provided in its internal communications magazine, the Wire. Allegations received are investigated by either the Monitoring Officer or Internal Audit.

Such guidance is accompanied by training and communications. The work of the Monitoring Officer, Standards Committee and the Standards Panel are fundamental in defining, achieving and monitoring high standards.

Ensuring compliance with relevant law and regulations, internal policies and procedures, and that expenditure is lawful.

All reports to Senior Managers, Board, Panels, Working Groups, Council and for Key/Executive Decisions are subject to review by the Executive Director of Governance and Pension, as the Monitoring Officer and the Director of Finance, as the Section 151 Officer. Internal Audit assesses compliance with internal policies and procedures on an ongoing basis and annually all members of the Single Leadership Team sign an Assurance Statement and complete a Self-Assessment Checklist, which includes questions on the above issues.

Standing Orders, Financial Regulations and the Scheme of Delegation are all included in the constitution and available on the Staff Portal and any updates are presented to the Council for approval. All decisions of the Council are minuted and available on the website. Supporting procedure notes/manuals to manage risks and ensure consistency of approach are updated regularly and checked as part of the internal audit process. All managers receive regular legal updates from the Director of Governance and Pensions via a Lawyers in Local Government Bulletin.

The Medium Term Financial Plan, the Budget Report and a detailed monitoring regime for both revenue and capital expenditure, together with the Section 151 Officer and Monitoring Officer, ensures that expenditure is lawful. Officers of the Council are experienced and trained to fulfil their roles, ensuring that a competent workforce is in place. Officers have regular supervision meetings to ensure that performance is satisfactory and the attendance at training seminars/courses ensures that officers are up to date with developments in their areas of expertise.

Documenting a commitment to openness and acting in the public interest.

The Council's Constitution - Access to Information Procedure Rules outlines access to Council meetings, agendas and minutes, so that members of the public can be involved in the governance arrangements of the Council.

In response to the government's desire for increased transparency, the Local Government Transparency Code was published in October 2014 and the Council now produces open data, examples of which are; Expenditure over £500, procurement information, payment of undisputed invoices within 30 days, members' allowances, salaries and wages information and fraud data. The Council also respond to Freedom of Information requests and has a central monitoring system in place to ensure deadlines are achieved.

Tameside also has a number of Neighbourhood Forums in place which allow members of the public to participate in the decision making process and the Big Conversation which provides residents and service users the opportunity to express their views and opinions about the services they use and how they can be delivered.

Developing and communicating a vision which specifies intended outcomes for citizens and service users and is used as a basis for planning.

The Council needs to set out a clear vision that members, employees, service users and the public can identify with and this is detailed in the Corporate Plan which can be found [here](#).

Our People – Our Place – Our Plan is for everyone every day and is based on five themes: -

- Starting Well;
- Living Well;
- Ageing Well;
- Great Place; and
- Inclusive Growth.

The plan also has eight key Priorities: -

- Very Best Start – in life where children are ready to learn and encouraged to thrive and develop;
- Aspiration and Hope – through learning and moving with confidence from childhood to adulthood;
- Resilient Families and Supportive Networks – to protect and grow our young people;
- Work Skills and Enterprise – Opportunities for people to fulfil their potential through work, skills and enterprise;
- Infrastructure and Environment – Modern infrastructure and a sustainable environment that works for all generations and future generations;
- Nurturing and Communities – Having pride in our people, our place and our shared heritage;
- Longer and Healthier Lives – Good mental health through better choices and reducing inequalities; and
- Independence and Dignity in Older Age – Independence and activity in older age, and dignity and choice at end of life.

The corporate plan is based on a relationship between public services and citizens, communities and businesses that enables shared decision making, democratic accountability and voice, genuine co-production and joint delivery of services. Do with, not to.

No one organisation can achieve the change aimed for on its own. The Council and its partners are committed to working together along with the people of Tameside to achieve lasting change for the borough as we continue on our journey towards an integrated place based approach. It is using the Public Service Reform principles as a basis for the development of this approach.

The landscape the Council operates in has changed significantly over the last 5 years and this has impacted significantly on how the Council delivers against its objectives. In 2016 the Government offered any council that wished to take it up, a four-year funding settlement to 2019/20, making a commitment to provide minimum funding allocations for each year of the Spending Review period. This offer was subject to the Council choosing to accept the offer and publishing an efficiency plan by October 2016, which the Council accepted. The four-year funding settlement provides the Council with greater certainty over its funding allocations to the end of 2019/20 which enables service planning to take place with more certainty. However, the position beyond March 2020 fell outside of this four-year settlement, with a one-year settlement granted for the 2020/21 financial year with no indicative information available for future periods beyond March 2021. This has been made more complicated by the Government's commitment to review the way that local government is funded through its Fair Funding review, and creates further uncertainty that the Council needs to be aware of, and factor into its financial assumptions. The Council has introduced a more robust budget setting process that aligns with the corporate plan and started the process for setting a balanced budget in 2020/21 in February 2020.

The Covid 19 pandemic has cast further complications on the funding outlook for both 2020/21 and 2021/22 financial years and beyond, with the Council having to respond to greatly increased costs arising from dealing with the immediate impact of the pandemic, alongside losses of income relied upon to fund the effective delivery of services. It is expected that there will be a long term impact of the pandemic over the following years as the UK and world enter a period of recession/depression. Government has responded in the short term and provided the Council with a number of packages of financial support to address the immediate financial impact of the response to the pandemic in 2020/21 financial year, but as yet there have been no announcements or indications of the funding levels for 2021/22 and beyond.

The development of the Council's strategic approach through the Corporate Plan has been informed by a number of factors not least the following (although this list is not exhaustive): -

- Ongoing engagement between the Council and local people;
- Budget Consultation;
- Big Conversation – service specific consultations to inform service redesign;
- Public Service Reform;
- Greater Manchester Devolution Agreement;
- Greater Manchester Health and Social Care Devolution;
- Care Together (health and social care integration);
- Medium Term Financial Plan;
- Partnership Engagement Network
- Vision Tameside; and
- Greater Manchester Strategy.

Translating the vision into courses of action for the Council, its partnerships and collaborations.

The Tameside Corporate Plan is the Borough's plan to maximise the wellbeing and health of the people within the Borough. Working with partners across public services, industry, commerce, the community and voluntary sectors the vision is translated into objectives which are detailed in service plans, team plans, and individual development plans.

The creation of an integrated system of health and social care brings together Tameside and Glossop Clinical Commissioning Group, Tameside Metropolitan Borough Council and Tameside and Glossop Integrated Care NHS Foundation Trust to reform health and social care services to improve the health outcomes of our residents and reduce health inequalities.

Tameside One has brought world-class customer service and learning facilities, along with thousands of staff and students, into the heart of Ashton-under-Lyne. The Denton Wellness Centre, the jewel in the crown of our £20 million transformation of our leisure services, opened in March 2020, and construction is nearly complete on the Ashton transport interchange, which will provide a state-of-the-art hub for public transport, encompassing the metrolink tram, the national rail network and bus services in the heart of Ashton for travel within Tameside and beyond.

The Council joined the Co-operative Council Innovation Network in October 2019. The network is in place for shared learning and benchmarking around approaches to projects and service development based on the broad principles of cooperation/co-operatives. The Tameside Co-operative Summit was held on 3 October 2020 in Dukinfield and details can be found on its [webpage](#).

Starting well is a priority for Tameside as it is a key driver for future prosperity. Educational attainment levels form a measurement of this success and in Tameside in 2019 63% of KS4 pupils achieved the standard pass in English and Maths which is an improvement on the 2018 figure of 62%, with 40% of pupils achieving a strong pass. The national average figures were 65% and 43%. Tameside has strengthened its position in comparison with North West Local Authorities. At KS2 63% of pupils achieved the expected standard in reading, writing and maths, compared to Greater Manchester at 64% and the National figure of 65%. Prioritising, reading, attendance and Special Education Needs (SEN) support across Tameside can deliver improvement. The successful Tameside Loves Reading campaign to help boost children's literacy skills is a proactive step to delivering the Council's objective of Very Best Start in life where children are ready to learn and encouraged to thrive and develop. It has seen numerous volunteers enrol who have found the experience very rewarding and positive feedback has been received from schools.

The GMPF helps to support the Council's vision and its objectives are detailed in service plans which are presented to Working Groups and the Pension Fund's Management/Advisory Panel. The Northern LGPS Investment Pool in conjunction with West Yorkshire Pension Fund and Merseyside Pension Fund has created an asset pool of around £45bn, which is helping to reduce investments costs and provide greater scope to allow the funds to invest in major regional and national infrastructure projects.

At the Council Meeting in February 2020 support for the climate emergency was discussed and it was agreed that the Council will play an active part with the Greater Manchester Combined Authority to achieve net zero carbon across Greater Manchester and commit to supporting the Mayor to deliver this challenging ambition for the region. As part of this commitment the Council has consulted on a number of walking and cycling schemes, making sure that wherever you live in Tameside you'll be able to feel secure in leaving the car at home.

GMPF is the biggest local Government fund in the country and invests in a diverse range of assets. At a high level, GMPF has set itself the target of achieving net zero emissions by c2050, in line with the Paris Agreement. We have been on this journey for some time, and work very closely with our active managers to understand their approach to managing the risks and opportunities of an orderly and just transition to a low carbon economy. The latest investment saw £2.4 billion of investments transferred from a traditional passively managed approach to a low carbon, factor based approach, which we see as a means of substantially reducing our carbon footprint, whilst preserving our expectations around long term returns. GMPF's latest carbon footprinting exercise found that as at 31 March 2020, the active equity holdings were 25% more efficient than the combined benchmark on the weighted average carbon intensity method, as recommended by the Taskforce for Climate related Financial Disclosures.

Establishing clear channels of communication with all sections of the community and other stakeholders, ensuring accountability and encouraging open consultation.

Significant improvements in the quality of life for our residents will only be achieved through effective partnership working. This involves working together through a shared vision for the future of the borough, to create a place based approach that redefines services and places individuals, families, communities at the heart.

The Corporate Plan is the key document that communicates the vision for Tameside, and the delivery of the vision is supported by outcome specific networks, joint teams and partnerships.

In addition to the website, the Council has embraced social media (Facebook, Twitter and Instagram) as modern communication channels to endeavour to reach all sections of the community. Council meetings are webcast and the Executive Leader and Executive Members publish Blogs on the Council's website.

The Tameside Engagement Strategy sets out the way the Council will involve local people in shaping delivery of high quality services across the borough. It aims to help ensure that a co-ordinated and strategic approach to consultation and engagement is undertaken.

Consultation has continued using the Big Conversation which provides residents and service users the opportunity to express their views and opinions about the services they use and how they can be delivered in the future, in light of the financial challenges faced by Tameside.

The Councils approach to consultation and engagement is detailed in the comprehensive Partnership Engagement Network which brings together stakeholders from a range of organisations and groups to inform and influence policy develop and decision making.

Accountability is demonstrated by the publication of the Statement of Accounts, the Annual Report in the Citizen Newspaper, the Annual Governance Statement and the review of service plans.

Reviewing the effectiveness of the decision-making framework, including delegation arrangements, decision-making in partnerships, information provided to decision makers and robustness of data quality.

The Council has a documented decision-making process and Scheme of Delegation, which are included in the Constitution. It publishes a Forward Plan and all agendas and minutes of meetings can be found on the Council's public website. The Safe and Sound Decision Making Framework in place ensures that good processes are in place for making and implementing decisions, which are informed by good information and data, stakeholder views and an open and honest debate, which reflects the interests of the community.

The robustness of data quality is the responsibility of managers and is reviewed as part of the Internal Audit and External Audit functions. Performance indicators, which are collated centrally, are regularly reported to the Single Leadership Team.

Measuring the performance of services and related projects and ensuring that they are delivered in accordance with defined outcomes and that they represent the best use of resources and value for money.

Effective challenge is an integral part of how the Council and its partners manage Tameside. It ensures that the partnership and constituent organisations remain focused on improvement and achievement. Challenge helps to identify areas for benchmarking and the development of best practice. Similarly, it supports individuals and teams further develop their own skills and capacity, which in turn helps to deliver better outcomes for local people.

The Council's approach includes: -

- Peer assessment and challenge;
- Performance Management;
- Big Conversation and Service Redesign;
- Scrutiny, and
- Risk Management.

Continual improvement has always been at the heart of the organisation and the results can be seen through our sustained record of achievement. The External Auditor is responsible for providing a Value for Money conclusion for the Council annually and this is reported in their Audit Findings Report dated July 2019 and their Audit Letter which was presented to the Audit Panel in November 2019.

The Report included an unqualified Value for Money conclusion and stated that our External Auditors were satisfied that in all significant respects, the Council had put in place proper arrangements to secure economy, efficiency and effectiveness in its use of resources for the year ended 31 March 2019-

- "We are satisfied that the Council's arrangements for addressing the concerns of OFSTED were sufficient as the inspectorate re-scored the Children's Services out of inadequate. Whilst we recognise that further improvement work is required we are satisfied that arrangements are in place to secure value for money".

The Ofsted inspection of children's social services showed that inspectors noted the effectiveness of our multi-agency safeguarding hub, strengthening the voice of the child, and enhancing our recruitment and retention efforts for social workers.

However, the journey will continue in 2020. Following Ofsted's recommendations, a detailed sustainability plan was passed at Executive Cabinet in November 2019. The seven proposals will deliver action in a number of areas, including Early Help, Family Support, Looked After Children's Placements and Fostering. These will both improve outcomes for children and families, and guarantee the financial sustainability of these vital services for the future.

In the Leaders speech presenting the budget to the Council Meeting in February 2020, it was stated that over the last six years the Council has had to save £160 million to set a legally-required balanced budget. Whilst a balanced budget was presented for 2020-21, it did continue to rely on investments in services funded from reserves and, it is projected that even more cost savings will have to be found to be able to continue to set a legal budget in future years.

The three funds that comprise Northern LGPS have formed Northern Private Equity Pool (NPEP), a joint venture that combines the private equity investing activities of the three funds. NPEP will draw on the combined expertise and experience of the internal teams at each of the respective Northern LGPS funds, and the administration capabilities of Northern LGPS's pool-wide external custodian. The combined scale and resources of the NPEP will enable funds in Northern LGPS to invest in private equity through lower cost implementation approaches than have been the case historically.

Through its involvement in the NPEP joint venture, GMPF added eight funds to its portfolio. At the end of 2019, Northern Private Equity Pool took a significant step towards its objectives through the establishment of a co-investment partnership with a leading global alternatives asset manager. This will enable GMPF, through NPEP, to implement its targeted private equity exposure at lower cost through partnering more directly with its preferred managers in certain transactions.

Defining and documenting the roles and responsibilities of members and management with clear protocols for effective communication in respect of the Council and partnership arrangements.

The Council Constitution sets out the roles and responsibilities of each Executive Member, and the responsibilities delegated to the Chief Executive, members of the Single Leadership Team and senior managers of the Council. It includes the post and responsibilities of the Statutory and Proper Officers.

The Chief Executive for the Council is the Accountable Officer for the Tameside and Glossop Clinical Commissioning Group and joint management arrangements have continued to develop during 2019/20 to foster closer working. Some service areas like People and Workforce Development, Executive Support and Policy, Performance and Communications are delivering services directly to the Tameside and Glossop Clinical Commissioning Group.

Protocols for effective communication are in place. Meetings have agendas and minutes published on the Council's Website and a Forward Plan is published. The Executive Leader's Key Note Address, the Corporate Plan, the Citizen Magazine, Scrutiny, Consultation via the Big Conversation and, increasingly, the use of Social Media (Facebook, Twitter and Instagram) are examples of how the Council communicates with partners and residents of the Borough.

The constitution is reviewed and updated regularly and changes are disseminated across the Council and Tameside and Glossop Clinical Commissioning Group via the Chief Executive's (Steven's) Weekly Brief, The Wire and team briefings.

The Tameside Health and Wellbeing Board is a statutory partnership with health commissioners, providers and other interested parties. It is chaired by the Executive Leader of the Council and has developed the Tameside Health and Wellbeing Strategy that identifies priorities to address local health inequalities.

Ensuring that financial management arrangements conform with the governance requirements of the CIPFA Statement on the Role of the Chief Finance Officer in Local Government (2015) and where they do not, explain why and how they deliver the same impact.

The financial management arrangements in place conform with the CIPFA statement. The service is managed by the Director of Finance (which is a shared role with the Tameside and Glossop Clinical Commissioning Group), who is the Council's Section 151 Officer and has been in post since October 2017. The role is supported by an Assistant Director of Finance on the Council side and a Deputy Chief Finance Officer supporting the Clinical Commissioning Group and they are supported by a group of experienced Business Partners who manage the service area finance teams.

Ensuring effective arrangements are in place for the discharge of the monitoring officer function.

The Director of Governance and Pensions is the Monitoring Officer for the Council and the function is detailed in the Constitution. A Monitoring Officer Protocol is in place and detailed on the website.

Ensuring effective arrangements are in place for the discharge of the head of paid service function.

The Chief Executive is the head of paid service and the role and function are detailed in the Constitution.

Providing induction and identifying the development needs of members and senior officers in relation to their strategic roles, supported by appropriate training.

Induction guidelines are available for managers including a checklist to ensure consistency across all services. Member induction is delivered by the Monitoring Officer and the Executive Support

Team. As part of this a finance induction for new members is delivered by the Director of Finance and IT.

Training needs are assessed using Annual Development Reviews for officers. The process takes into account the needs of the service and then identifies any gaps in the skills and knowledge of the workforce to enable it to meet its objectives. All training requirements are reviewed by management and then compiled into service training plans, which are submitted to People and Workforce Development to inform and direct the provision of future training and development opportunities.

Training for members is assessed on an annual basis and a programme of events is scheduled to ensure both local and national subjects are covered.

Reviewing the effectiveness of the framework for identifying and managing risks and for performance and demonstrating clear accountability.

The Council empowers its employees to be innovative and to find solutions to problems, but recognises that there are potential risks for the Council. Significant and cross cutting service risks are amalgamated into the Corporate Risk Register, which is regularly presented to the Single Leadership Team and the Audit Panel. Every report presented to Senior Managers, Council, Committees, Board, Panels, Working Groups and for Key/Executive Decisions is risk assessed. Work is ongoing to ensure the risk management processes for the Council and the CCG are merged and embrace best practice.

The Information Governance Framework, which was refreshed during 2018, continued to be a key priority for the Council ensuring that the guidance contained in the supporting documents was relevant, disseminated and embedded across all service areas in light of the introduction of the General Data Protection Regulations (GDPR) and the new Data Protection Act in May 2018. The Information Governance Group, chaired by the Director of Governance and Pensions, ensured that available resources were directed towards compliance with all relevant legislation and in line with the requirements of the Information Commissioners Office, the regulatory body for enforcing the requirements of Data Protection legislation. Information Governance, Cyber Security and Data Protection training is delivered via a range of media, including briefing notes, the Chief Executive's Brief, the Wire, workshops and E-Tutorials.

Ensuring effective counter fraud and anti-corruption arrangements are developed and maintained in accordance with the Code of Practice on Managing the Risks of Fraud and Corruption (CIPFA 2014).

The Council has an Anti-Fraud, Bribery and Corruption Strategy: Statement of Intent as part of the Constitution and all investigations are undertaken by Internal Audit. All investigations are conducted in line with the Fraud Response Plan and operational guidance notes. The Standards Panel receives regular reports on investigations underway to monitor progress and provide direction, where appropriate. The Council continues to participate in the National Fraud Initiative, which is conducted every two years by the Cabinet office and the datasets to be uploaded and the matched received are coordinated by Internal Audit.

A Whistleblowing Policy is maintained and available on the Council's website.

Ensuring an effective scrutiny function is in place.

This role is performed both by the Scrutiny function and by Tameside Members who sit on Outside Bodies' Committees. The Scrutiny function conducts reviews across Tameside which may call into account other public service providers like the NHS. Reviews conducted are reported to the Scrutiny Panels and the Overview Panel and the programme of reviews and reports are available on the scrutiny website together with an Annual Report. Members who represent the Council on

outside bodies are ensuring that service delivery is effective, providing a challenge function and that the needs of Tameside are taken into account.

Ensuring that assurance arrangements conform with the governance requirements of the CIPFA Statement on the Role of the Head of Internal Audit (2019) and, where they do not, explain why and how they deliver the same impact.

The Council's assurance arrangements conform with the governance requirements of the CIPFA Statement. The Head of Risk Management and Audit Services reports directly to the Assistant Director of Finance as the Deputy Section 151 Officer and reported quarterly to the Audit Panel and the Greater Manchester Pension Fund Local Board. The Risk Management and Audit Service was also judged to conform to the Public Sector Internal Audit Standards for 2019/20 via a self-assessment which was presented to the Audit Panel on 9 June 2020 by the Director of Finance.

Undertaking the core functions of an Audit Committee, as identified in CIPFA Position Statement on Audit Committees in Local Authorities and Police (CIPFA 2018).

The Audit Panel has been reviewed to ensure that it meets the revised CIPFA Position Statement on Audit Committees issued in 2018. The membership of the Panel is still under review. Meetings are regularly attended by our External Auditor. Training is assessed for members of the panel based on their existing skills and knowledge to determine a training plan which will be delivered by officers of the Council, External Audit and service specific experts where required. A Forward plan is presented regularly to the Panel detailing the items for agendas and any training to be delivered.

Ensuring that the Council provides timely support, information and responses to external auditors and properly considers audit findings and recommendations.

Information, support and responses are provided to External Audit in a timely manner. Audit findings and recommendations are considered by the Director and Assistant Director of Finance, the Director of Governance and Pensions and the Assistant Director (Pensions Local Investments and Property) and presented to the Audit Panel and the Pension Fund Management Advisory Panel.

In their Annual Letter of August 2019, Mazars commented that:

“Draft accounts were received from the Council on 29 May 2019, in advance of the 31 May deadline together with most of the supporting working papers. We have had the full co-operation of management throughout the audit.”

Incorporating good governance arrangements in respect of partnerships and other joint working and ensuring that they are reflected across the Council's overall governance structures.

Good governance arrangements in respect of partnership working were established many years ago when the Tameside Strategic Partnership was created and those standards are still adopted today.

The continued successful delivery of outcomes by the various networks, joint teams and partnerships operating across Tameside to maximise the wellbeing and health of the people of the Borough demonstrates that the arrangements in place are sound. Tameside has always promoted working with partners and it is through our strong and long-standing partnerships, along with new ones that may develop in the future, that help us to produce solutions and real improvements for Tameside. Joint working with the Tameside and Glossop Clinical Commissioning Group, the joint appointments of the Chief Executive as the Accountable Officers and a shared Director of Finance, a shared Single Leadership Team are testament to this approach. Joint meetings/arrangements are also in place with the Integrated Care Foundation Hospital Trust to ensure that integration across the health and social care realises the benefits to the people of Tameside and Glossop.

Tameside Council was officially welcomed into the Cooperative Council Innovation Network. We are now a proud member of a growing and influential network of local authorities committed to developing a new relationship with our citizens, and transforming the way that public services are delivered. As stated by the Leader of the Council in her budget speech in February 2020, this approach that will define how we look and move forward.

4. Review of Effectiveness

The Council has responsibility for conducting, at least annually, a review of the effectiveness of its Governance Framework including the system of internal control. This review of effectiveness is informed by the work of the Directors/Assistant Directors within the Council who have responsibility for the development and maintenance of the governance environment, the Head of Risk Management and Audit Service's Annual Report, and by comments made by the External Auditor and other review agencies and inspectorates.

The process that has been applied in maintaining and reviewing the effectiveness of the Governance Framework includes the following measures and actions: -

- The Council has adopted a Planning and Performance Framework and carries out a programme of monitoring which runs throughout its annual cycle. This includes quarterly monitoring of all revenue and capital budgets which are reported to the Single Leadership Team, Board and Executive Cabinet and regular monitoring of Service Delivery Plans by directorates in terms of performance indicators and update reports.
- The refreshed Corporate Plan 'Our People – Our Place – Our Plan' was approved by the Executive Cabinet in February 2019. A total of 56 indicators measure the overall performance and impact of the Corporate Plan and these were reported to the Overview Panel in November 2019 by way of a Corporate Plan Performance Scorecard. The Scorecard is also presented to the Strategic Commissioning Board, Executive Cabinet, the Place and External Relations Scrutiny Panel and the Integrated Care and Wellbeing Scrutiny Panel. In light of COVID-19 work is current being undertaken, led by the Assistant Director of Policy, Performance and Communications to review the objectives within the plan as the Council defines its new normal.
- The Capital Programme is regularly monitored and reported quarterly to the Strategic Planning and Capital Monitoring Panel, Audit Panel and the Executive Cabinet.
- The Council is open to peer challenge and in the last eighteen months we have had peer reviews of MASH, Domestic Abuses, Clean Air (aka Healthy Spaces), Youth Justice, and SEND. A LGA Peer Challenge had been commissioned, however, this has had to be postponed due to COVID-19.
- The Executive Cabinet carries out its functions in accordance with responsibilities outlined in Cabinet Portfolios, which are detailed in the Council's Constitution. Several Non-Executive Members are appointed to specific roles to assist Executive Members in the delivery of their particular areas of responsibility. All roles are assigned at the annual meeting of the Council.
- There is a well-established Overview and Scrutiny function, which has been revised and updated in the light of experience. Scrutiny Panels review the work of the Council throughout the year; make a series of recommendations to Overview Panel and Executive Cabinet, which then require a formal response and action, as appropriate. There is a public website where the public can access completed review reports and Annual Plans and Annual Reports. Scrutiny emails are regularly circulated to scrutiny members, elected members and senior management drawing their attention to guidance, live consultations and outputs from GM scrutiny.

- To support delivery of the Medium Term Financial Plan and be in a positive position to respond to the financial challenges facing the Council, a detailed monitoring and reporting system has been put in place. The corporate plan delivery is managed through an Assistant Directors group. The continuation of this work is necessary to ensure that we are in a strong position to manage and use our resources effectively to maintain good outcomes and achieve the level of savings required. Service areas have been challenged to look for new and innovative ways of delivering their services as well as working more closely with our partners. Given the magnitude of the financial challenge the Council faces, consultation via the Big Conversation has continued so that residents' views on any changes can be taken into consideration. The Director and Assistant Director of Finance have worked with the Executive Members/Single Leadership Team, through a Star Chamber process during the budget preparation period to ensure that a robust set of savings plans are in place and a clear delivery plan has been drawn up. The impact of Covid 19 has slowed the delivery of some of the savings and efficiency plans and created further uncertainty, but the Council is responding to this by bringing forward its budget process to allow an earlier consideration of the options available.
- The Directors have each reviewed the operation of key controls throughout the Council, from the perspective of their own directorates, using a detailed assurance self-assessment checklist. They have provided a signed assurance statement and identified any areas for improvement, which will form the basis of the action plan to this Governance Statement.
- The Code of Corporate Governance has been reviewed and the evidence documented to demonstrate compliance with the principles of good governance. The Review was reported to senior management in July 2020 and the Audit Panel in July 2020.
- The Director of Governance and Pensions as the Monitoring Officer, carried out a continuous review of all legal and ethical matters, receiving copies of all agendas, minutes, reports and associated papers, and commented on all reports that go to members and when necessary taking appropriate action, should it be required.
- The Director of Finance as the Section 151 Officer, carried out a continuous review of all financial matters, receiving copies of all agendas, minutes, reports and associated papers, and commented on all reports that go to members and when necessary taking appropriate action, should it be required.
- The Standards Committee is responsible for standards and probity, and receives regular reports from the Director of Governance and Pensions, the Monitoring Officer.
- The role held by the Director of Finance conformed to the requirements of the five principles of the CIPFA Statement on the Role of the Chief Financial Officer (CFO) in Local Government.
- The Ofsted Inspection of Children's Services, which was undertaken in May 2019, recognised the improvements made and judged the service as Requires Improvement to be good. Throughout 2019/20 the improvement journey has continued and since January 2020, positive progress has been made across all areas of children's services, supported by a range of performance data, but a clear focus remains on improvement.

Our updated self-assessments and Annual Conversation with the inspectorate in February 2020 has provided further clarity and there are discreet but linked improvement plans in place where required.

Improvement remains under close review and oversight continues to be provided through regular performance reviews with lead Members, the Tameside Safeguarding Children's Partnership and the Children's Improvement Board. The post inspection year of Department of Education oversight and monitoring, focusing on evidencing continued

improvement, is anticipated to come successfully to an end shortly, but a final decision is still awaited.

- The Audit Panel carries out an overview of the activities of the Council's Risk Management, Internal Audit and External Audit functions. Members are provided with a summary of reports issued and their associated audit opinion. They approve the Annual Plans for each, and receive regular progress reports throughout the year. The Head of Risk Management and Audit Services presents an Annual Report and opinion, and the External Auditor submits a Completion Report and Annual Audit Letter along with other reports during the year. The Corporate Risk Register and the Risk Management Policy and Strategy were presented to the Audit Panel during the year. Work in relation to the risk management system including risk registers is ongoing as we continue to develop systems compatible across the Strategic Commission.
- The Internal Audit Service provides a continuous review in accordance with the Council's obligations under the Local Government Act 1972, and the Accounts and Audit Regulations 2015. It operates under the Public Sector Internal Audit Standards and the External Peer Review conducted in March 2018 confirmed that the service was fully compliant with all the standards, the self-assessment undertaken annually since then have reaffirmed compliance and the report for 2019/20 was reported to the Audit Panel in June 2020 and presented by the Director of Finance.
- The Data Protection Officer and the Head of Risk Management and Audit have continued to monitor adherence to data protection legislation throughout the year and taken appropriate action to deal with any incidents arising. Executive Support continued to monitor the processing of Freedom of Information and Subject Access Requests and weekly progress reports are now provided to all managers and the Executive Cabinet to ensure compliance with the relevant timescales. Information Governance and Cyber Security E-Learning modules were rolled out across the Council in early 2020 to measure and test staff understanding across these key areas and the latest completion rate is 95%.
- The Council's External Auditors review the activities of the Council and issue an annual opinion on the Annual Accounts and a Value for Money conclusion. Conclusions and significant issues arising are detailed in their report to those charged with governance.
- Progress on the development areas identified in Section 6, are regularly reported to the Audit Panel throughout the year by the Head of Risk Management and Audit Services.

The governance arrangements described above were fully operation until March 2020 when the Coronavirus Pandemic COVID-19 arrived.

5. Impact of Coronavirus Pandemic (COVID-19)

The Coronavirus Pandemic COVID-19 hit the Council during March 2020 and by 18 March all staff had been instructed to Work from Home where possible in line with Government advice. The Single Leadership Team became Gold Command (Strategic Coordination Group) and initially met on a daily basis to ensure that we responded promptly to the pandemic and delivered essential services in exceptional circumstances. Staff were redeployed within and across directorates to work on critical services. In terms of decision making Board met on a weekly basis so that matters could be dealt with in a timely manner to ensure we could response effectively to the fast changing situation. A Humanitarian Hub was established to provide food and essential medical supplies to residents who needed support. Throughout the pandemic period the Council and its staff have demonstrated dedication and resilience to the residents of Tameside. Support and advice from both the Governance and Finance Directorates has continued to ensure that actions have kept pace with the regulations issues by the Government and that financial control has been exercised to capture COVID-19 expenditure.

By the end of June, the Single Leadership Team resumed meeting every Tuesday and the Strategic Coordination Group now meets every Thursday. All meetings are being held virtually using Skype for Business. Plans are now being developed for the Council as we define the “new norm” and we learn to live with COVID-19.

6. Level of Assurance

The governance arrangements in place comply with the Principles outlined in the Council’s Code of Corporate Governance and can be regarded as fit for purpose. Areas for development have been identified in the Improvement Plan attached at **Appendix 1**, and addressing these will further enhance the Governance Framework.

The Internal Audit opinion for 2019/20 as reported to the Audit Panel on 9 June 2020 is that members and senior management can take reasonable assurance that arrangements to secure governance, risk management and internal control, within those areas reviewed, are suitably designed and applied effectively. It has to be accepted that the gross risk for the Council has increased in recent years (as we have reduced capacity whilst still having to deliver a significant change programme to meet our financial challenges). The finding of Internal Audit’s work is that controls are in place to mitigate these risks and where improvements have been highlighted, managers have agreed to implement the suggested recommendations. This will aid the management of risks and support the overall control environment.

Improvements arising from External Audit Reports and Inspection Reports during the year have already been built into Service Area Action Plans and are monitored as part of the Performance Management Framework. Internal Audit work with senior managers throughout the year using the Post Audit Review process to ensure identified improvements are implemented.

7. Conclusion and Signatures

The Annual Governance Statement has been reviewed by Senior Management, presented, and approved by the Audit Panel. We have been advised on the implications of the review of the effectiveness of the Governance Framework in place, and the action plan compiled to address the further developments identified to ensure the continual improvement of the system in place.

We are satisfied that these steps will address the improvements that have been identified and their implementation will be monitored by the Audit Panel throughout the year and as part of our next Annual Review.

Signed:

Signed:

.....
Councillor Brenda Warrington
Executive Leader of Tameside MBC

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Steven Pleasant MBE
Chief Executive of Tameside MBC

Dated: 24 November 2020

Dated: 24 November 2020

Annual Governance Statement 2019/20 – Improvement Plan

Appendix 1

Ref	Area of Review	Improvement Identified for Implementation in 2020/21	Progress Reported As At 30 June 2020	Progress Reported As At October 2020	Improvement Owner and Completion Date
1	2019/20 Vision Tameside (Carry Forward)	Options for Ashton Town Hall will be developed and reports presented to ensure full consideration of the options following the Council's governance process for approval. Vision Tameside – the remaining elements of the project to be completed as COVID-19 restrictions are lifted.	External commission underway to determine options for Ashton Town Hall. Vision Tameside - Some remaining snagging still being resolved with the LEP, The Transport Interchange is nearing completion and Land transfers nearing resolution.	Options appraisal completed, cost planning underway following completion of which a report with recommendations to be drafted.	Director of Growth March 2021
2	Children's Services (Carry Forward)	The strengthened 'whole-council' commitment to improving the quality and impact of services for children noted by Ofsted continues to be clearly evident, most notably in relation to the 7 sustainability projects and more widely through the Tameside Safeguarding Children's Partnership. Leaders, both Officers and Members also retain an improved understanding of how well services are working for children and of their key priorities.	Since January 2020, positive progress has been made across all areas of children's services, supported by a range of performance data, but a clear focus remains on improvement. Our updated self-assessments and Annual Conversation with the inspectorate in February has provided further clarity and there are discreet but linked improvement plans in place where required. Improvement remains under close review and oversight continues to be provided	Since June 2020, positive progress continues to be made in Children's Services, supported by a range of performance data, but a clear focus remains on improvement and there is a focus on some specific areas, most notably permanency, the number of Cared for Children and placement sufficiency. Improvement plans are now in place in all key areas and are tracked through the appropriate oversight panels such as the Corporate Parenting Board. Oversight of performance continues to be provided	Director of Children's Services March 2021

Ref	Area of Review	Improvement Identified for Implementation in 2020/21	Progress Reported As At 30 June 2020	Progress Reported As At October 2020	Improvement Owner and Completion Date
			<p>through regular performance reviews with lead Members, the Tameside Safeguarding Children's Partnership and the Children's Improvement Board.</p> <p>The post inspection year of Department for Education oversight and monitoring, focusing on evidencing continued improvement is anticipated to come successfully to an end this month, but a final decision is still awaited.</p>	<p>through regular performance reviews with lead Members, the CEO, Tameside Safeguarding Children's Partnership and the Children's Improvement Board (CIB), with the CIB now receiving regular highlight reports and in September a detailed updating overview report of all improvement activity across Children's Services post the 2019 ILACs inspection.</p> <p>The 7 Cared for Children Sustainability projects were reported through to Board in September 2020 and will be updated on again in December 2020</p> <p>The post inspection year of DfE oversight and monitoring, focusing on evidencing continued improvement which was due to end in May 2020, was extended following a decision by the Minister not to allow any current level of DfE engagement with LAs to be reduced during COVID-19. This position is due to be reviewed in November 2020.</p> <p>COVID-19 has presented a number of challenges to the service, which have been</p>	

Ref	Area of Review	Improvement Identified for Implementation in 2020/21	Progress Reported As At 30 June 2020	Progress Reported As At October 2020	Improvement Owner and Completion Date
				proactively managed, but recent weeks have seen a significant upturn in demand across all areas.	
3	Management of CCTV (Carry Forward)	Capital investment to update the CCTV system will be progressed during 2020/21.	The progress of this review in relation to the potential capital investment has been delayed due to COVID-19 related pressures. All other aspects of the plan have been implemented.	Progress of this review has been delayed due to the pressures of COVID-19. However, the review has now been highlighted as part of the Budgeting Process and will be picked up by the Operations and Neighbourhoods Savings Working Group.	Director of Operations and Neighbourhoods March 2021
4	Estates Management (Carry forward)	<p>The ongoing structure changes will be implemented by October 2020.</p> <p>The Strategic Asset Management Plan (SAMP), Disposal Policy, Surplus Property and Freehold Reversions Policy to be considered by Cabinet in July and August 2020.</p> <p>Service and occupational building needs to be reviewed by Oct 2020.</p> <p>Asset Review work to be commissioned Sept 2020.</p>	<p>New Assistant Director commenced in post April 2020.</p> <p>Strategic Property staffing structure (including estates) under review and restructure will be implemented by Oct 2020.</p> <p>SAMP report drafted and to be considered by Cabinet July 2020.</p> <p>Potential land and property disposals – ward member consultations completed June/July 2020.</p> <p>Updated Disposal Policy being drafted and to be considered by Cabinet Aug</p>	<p>SAMP has been approved.</p> <p>Disposal Policy has been Approved.</p> <p>Commencement of the disposal work has not yet started due to incomplete service restructure and resource pressures.</p> <p>Freeholds Reversion Policy has progressed and a report is to be presented at a November Board.</p> <p>Asset Review Work is subject to approval of the budget by Executive Cabinet - November 2020.</p>	Director of Growth March 2021

Ref	Area of Review	Improvement Identified for Implementation in 2020/21	Progress Reported As At 30 June 2020	Progress Reported As At October 2020	Improvement Owner and Completion Date
			<p>2020.</p> <p>Proposed land and property surplus to requirements to be considered by Cabinet Aug 2020.</p> <p>Freehold Reversions Policy being updated and to be considered by Cabinet Aug 2020.</p>		
5	<p>ICT Disaster Recovery and Business Continuity Planning (Carry Forward)</p>	<p>During 20/21, the Council will for the first time have key systems hosted in a Disaster Recovery facility.</p> <p>The implementation of a new backup and recovery system, which will include off site tape storage and the adoption of the new Cyber Security Strategy with associated action plan means the Council is best placed to deal with physical disasters as well as Cyber incidents.</p>	<p>COVID-19 lock down has added further delays but construction works are now underway and current projections are that the new Data Centre will be completed in Jan/Feb 2021.</p> <p>COVID-19 lockdown has also delayed the build of the new DR facility. This work is also now underway and building the infrastructure (servers, discs and switches) will be complete in August 2020.</p> <p>The initial list of systems being hosted in the DR center is being finalised and Licenses requirements (Microsoft Server operating system and SQL database) are currently being procured.</p>	<p>The new Data Centre is scheduled to be completed and handed over for commissioning in Dec 2020. IT systems will begin to be moved from their current location in Rochdale Council's Data Centre in February 2021 with the process completed by May 2021.</p> <p>The Disaster Recovery Centre is now complete and testing of the new infrastructure is underway. The facility will be operational by the end of 2020.</p>	<p>Director of Finance March 2021</p>

Ref	Area of Review	Improvement Identified for Implementation in 2020/21	Progress Reported As At 30 June 2020	Progress Reported As At October 2020	Improvement Owner and Completion Date
6	Information Governance (Carry Forward)	<p>Compliance with GDPR and the Data Protection Act 2018 are a key priority for the Council and the Risk, Insurance and Information Governance Team.</p> <p>The Action Plan will be reviewed with the new Risk, Insurance and Information Governance Manager, and as capacity is added to the team, the improvements required will be allocated and delivered.</p>	<p>The Risk, Insurance and Information Governance Manager started in post on 1 July 2020; however, recruitment is still ongoing for the officer roles.</p> <p>Whilst work is ongoing to support the Council in terms of Data Sharing, Data Protection Impact Assessments, information incidents and general advice, further capacity is still needed to address the developments in the Action Plan.</p>	<p>Recruitment to the two vacant posts on the Team was delayed due to COVID-19 and the new starters will not be in post until January 2021.</p> <p>The structure of the team is currently being reviewed to ensure that roles and responsibilities are allocated across all members of the Team.</p> <p>Following that, the Information Governance Plan will be reviewed and developed.</p>	<p>Director of Governance and Pensions Director of Finance March 2021</p>
7	Implementation of a Strategic Commissioning Function (Carry Forward)	<p>The Single Leadership Team need to continue to review and identify the appropriate risks across both organisations, on a regular basis including identifying mitigating actions and report on these through the appropriate governance routes in each statutory organisation.</p>	<p>Work is ongoing to develop a shared risk management approach across both organisation to enable consistent reporting which meets the requirements of the statutory organisations.</p>	<p>The new Risk, Insurance and Information Governance Manager is drafting a proposed shared approach.</p> <p>Risks across both organisations continue to be managed.</p>	<p>Single Leadership Team March 2021</p>
8	Debtors (Carry Forward)	<p>Improvements being introduced 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 2020/21 to provide assurance that the overall system is</p>	<p>Significant work has taken place in terms of both the Debtors IT System (Moving from Civica to Agresso) and the introduction of new ways of working, which affect all services, are being implemented.</p>	<p>COVID-19 has affected the progress in this area and the introduction of the new ways of working.</p> <p>Improvements will be assessed and the work plan re-evaluated.</p>	<p>Director of Governance and Pensions Director of Finance Revised to June 2021</p>

Ref	Area of Review	Improvement Identified for Implementation in 2020/21	Progress Reported As At 30 June 2020	Progress Reported As At October 2020	Improvement Owner and Completion Date
		working effectively and fit for purpose.		The assessment by Internal Audit will be rescheduled to early 2021/22.	
9	Risk Management System (New)	To review the risk management systems in operation across the Strategic Commission and align them to ensure consistency of approach and reporting.		The Risk, Insurance and Information Governance Manager is now in post. The review has commenced, however, capacity issues are currently affecting progress. Unfortunately, recruitment to the two vacant posts on the Team was delayed due to COVID-19 and the new starters will not be in post until January 2021.	Director of Finance Revised to March 2021
10	Budget Monitoring (New)	Following an Internal Audit review, the processes in place are being reviewed and improved to address the concerns raised.		The Post Audit Review (PAR) is ongoing. Improvements are being implemented and assurance will be provided at a future update once the PAR has been completed.	Director of Finance Revised to December 2020