



CORPORATE GOVERNANCE AND AUDIT COMMITTEE

Meeting to be held in Civic Hall, Leeds, LS1 1UR on
Thursday, 25th June, 2015
at 2.00 pm

MEMBERSHIP

Councillors

P Grahame	J Bentley	R Wood
G Hussain (Chair)		P Harrand
A McKenna		
K Bruce		
N Dawson		
A Sobel		
J Illingworth		

A G E N D A

Item No	Ward	Item Not Open		Page No
1			<p>APPEALS AGAINST REFUSAL OF INSPECTION OF DOCUMENTS</p> <p>To consider any appeals in accordance with Procedure Rule 15.2 of the Access to Information Procedure Rules (in the event of an Appeal the press and public will be excluded).</p> <p>(*In accordance with Procedure Rule 15.2, written notice of an appeal must be received by the Head of Governance Services at least 24 hours before the meeting)</p>	
2			<p>EXEMPT INFORMATION - POSSIBLE EXCLUSION OF THE PRESS AND PUBLIC</p> <p>1 To highlight reports or appendices which officers have identified as containing exempt information, and where officers consider that the public interest in maintaining the exemption outweighs the public interest in disclosing the information, for the reasons outlined in the report.</p> <p>2 To consider whether or not to accept the officers recommendation in respect of the above information.</p> <p>3 If so, to formally pass the following resolution:-</p> <p>RESOLVED – That the press and public be excluded from the meeting during consideration of the following parts of the agenda designated as containing exempt information on the grounds that it is likely, in view of the nature of the business to be transacted or the nature of the proceedings, that if members of the press and public were present there would be disclosure to them of exempt information, as follows:-</p>	

Item No	Ward	Item Not Open		Page No
3			<p>LATE ITEMS</p> <p>To identify items which have been admitted to the agenda by the Chair for consideration</p> <p>(The special circumstances shall be specified in the minutes)</p>	
4			<p>DECLARATION OF DISCLOSABLE PECUNIARY AND OTHER INTERESTS'</p> <p>To disclose or draw attention to any disclosable pecuniary interests for the purposes of Section 31 of the Localism Act 2011 and paragraphs 13-16 of the Members' Code of Conduct.</p>	
5			<p>APOLOGIES</p> <p>To receive any apologies for absence.</p>	
6			<p>MINUTES - 20TH MARCH 2015</p> <p>To receive the minutes of the meeting held on 20th March 2015.</p>	1 - 6
7			<p>LEEDS CITY REGION JOINT COMMITTEE ANNUAL FINANCIAL RETURN AND ANNUAL GOVERNANCE STATEMENT 2014/15</p> <p>To receive a report of the Deputy Chief Executive This report accompanies the 2014/15 Annual Accounting Statement and Annual Governance Statement for Leeds City Region Leaders Board Joint Committee.</p> <p>The report explains why the responsibility of approving these statements has fallen to this Committee, and outlines what assurances the Committee can rely on in approving the statements.</p>	7 - 20

Item No	Ward	Item Not Open		Page No
8			<p data-bbox="675 181 1334 248">OFFICE OF THE DIRECTOR OF PUBLIC HEALTH ANNUAL GOVERNANCE REPORT</p> <p data-bbox="675 293 1401 506">To receive a report of the Director of Public Health which provides the Committee with an annual update on Public Health's Risk management and Governance arrangements, reporting on progress since the last report was presented to members on 10 July 2014.</p>	21 - 30
9			<p data-bbox="675 584 1377 685">FINANCIAL MANAGEMENT ARRANGEMENTS IN THE PLANNING AND SUSTAINABLE DEVELOPMENT SERVICE</p> <p data-bbox="675 730 1401 1055">To receive a report of the Deputy Chief Executive which provides assurances in respect of the financial management arrangements relating to the planning service. This report sets out the financial management arrangements in the Planning and Sustainable Development Service and aims to provide assurance to members that the arrangements are fit for purpose, embedded and being complied with.</p>	31 - 40
10			<p data-bbox="675 1122 1345 1189">ANNUAL BUSINESS CONTINUITY REPORT: PHASE 2 PROGRESS UPDATE</p> <p data-bbox="675 1234 1393 1447">To receive a report of the Deputy Chief Executive which provides an update of current progress towards completion of Phase 2 by the target date of September 2015 as requested by the Corporate Governance & Audit Committee at the April 2015 meeting.</p>	41 - 46
11			<p data-bbox="675 1525 1002 1559">WORK PROGRAMME</p> <p data-bbox="675 1592 1361 1738">To receive a report of the City Solicitor which notifies Members of the Committee of the draft work programme for the 2015/16 year. The draft work programme is attached at Appendix 1.</p>	47 - 54

Item No	Ward	Item Not Open		Page No
			<p data-bbox="675 181 959 208">THIRD PARTY RECORDING</p> <p data-bbox="675 304 1401 405">Recording of this meeting is allowed to enable those not present to see or hear the proceedings either as they take place (or later) and to enable the reporting of those proceedings. A copy of the recording protocol is available from the contacts named on the front of this agenda.</p> <p data-bbox="675 477 1177 504">Use of Recordings by Third Parties– code of practice</p> <p data-bbox="675 575 1398 676">a) Any published recording should be accompanied by a statement of when and where the recording was made, the context of the discussion that took place, and a clear identification of the main speakers and their role or title.</p> <p data-bbox="675 696 1374 819">b) Those making recordings must not edit the recording in a way that could lead to misinterpretation or misrepresentation of the proceedings or comments made by attendees. In particular there should be no internal editing of published extracts; recordings may start at any point and end at any point but the material between those points must be complete.</p>	

This page is intentionally left blank

Agenda Item 6

Corporate Governance and Audit Committee

Friday, 20th March, 2015

PRESENT: Councillor G Hussain in the Chair
Councillors P Grahame, T Hanley,
E Taylor, J Bentley, J Cummins and
A McKenna

Apologies Councillors R Wood, J L Carter and J Pryor

45 Appeals Against Refusal of Inspection of Documents

There were no appeals against the refusal of inspection of documents.

46 Exempt Information - Possible Exclusion of the Press and Public

There were no resolutions to exclude the public.

47 Late Items

There were no late items submitted to the agenda for consideration.

48 Declaration of Disclosable Pecuniary and Other Interests'

No declarations were made.

49 Apologies for Absence

Apologies for absence were received from Councillors Pryor, Wood and J L Carter.

50 Minutes - 28th January 2015

RESOLVED – That the minutes be approved as a correct record subject to the following amendments:

Minute No.39, Internal Audit Update report

Existing minute: Former Aire Valley Homes Leeds and Former East North East Homes Leeds were discussed and Members were informed that issues encountered had been resolved by the integration of the ALMOs.

Draft minutes to be approved at the next meeting of the Committee

Revised minute: Former Aire Valley Homes Leeds and Former East North East Homes Leeds were discussed and Members were informed that progress with the issues encountered would be followed up by Internal Audit as part of the 2015/16 audit plan.

Minute No. 41, KPMG Certification of Grants and Returns 2013/14

Existing minute: Agree that the audit fee remain the same for 2013/14 and 2014/15 despite no requirement to undertake the NNDR work will included the cost of the additional audit work in respect of NNDR.

Revised minute: Agree the additional audit fee in respect of the 2013/14 NNDR work in line with the Audit Commissions 2014/15 planned audit fees.

Councillor J Cummins to be added to apologies for absence.

51 Matters Arising

Minute No. 39 Internal Audit Report

Members noted the information that had been circulated in advance of the meeting which updated them on the current position in relation to car hire and purchasing card use at the Council.

52 Internal Audit Plan 2015/16

The Acting Head of Internal Audit presented a report of the Deputy Chief Executive which sought Members views on the draft Internal Audit Plan for 2015/16. The Committee were informed that the plan had been developed in consultation with senior management including the Chief Officer (Financial Services) and the Deputy Chief Executive.

Members sought assurances about the number of days allocated to the continuing professional development of staff working within Internal Audit. It was confirmed that time has been allocated to continuing professional development in line with previous years but this has been removed from the operational plan days as it has not been classified as assurance work.

The Acting Head of Internal Audit assured Members that whilst in light of budget cuts, the plan presented included sufficient coverage to ensure an evidenced based opinion can be produced on the control environment

RESOLVED – The Committee resolved to note the Internal Audit Operational Plan for 2015/16 and the assurances provided.

53 Internal Audit Update Report 1st December 2014 to 31st January 2015

The Acting Head of Internal Audit presented a report of the Deputy Chief Executive. The report provided a summary of internal audit activity for the

period 1st December 2014 to 31st January 2015 and highlighted the incidence of any significant control failings or weaknesses.

Members discussed the information governance weaknesses that had been highlighted in a recent audit review of contracts. Particularly relating to data sharing arrangements with third parties and arrangements to cleanse data once contracts had expired.

RESOLVED - The Committee resolved to:

- (a) Note the work undertaken by Internal Audit from 1st December 2014 to 31st January 2015; and
- (b) Receive examples of information governance issues that have arisen in contracts in the next Internal Audit update report.

54 Leeds City Council Fraud Briefing

The Acting Head of Internal Audit presented a report of the Deputy Chief Executive. The report provided further information in relation to a Fraud Briefing provided by the Council's appointed external auditors, KPMG, and summarised the Council's counter fraud activities and performance throughout 2013/14.

Members expressed their concern that KPMG was not present to assist them in their deliberations on this item.

Members requested that they be informed of the departments that fraud has been discovered going forwards. The Acting Head of Internal Audit agreed to keep Members updated on departments affected by fraudulent activities in her regular Internal Audit update reports.

It was confirmed to Members that in relation to fraud Leeds compares well against other authorities in both prevention and detection.

RESOLVED – The Committee resolved to:

- (a) Note the contents and assurances provided within this report and agreed to receive these assurances on an annual basis going forward;
- (b) Ask that the Head of Governance Services write to KPMG on behalf of the Committee setting out their concerns that KPMG were not present at the meeting.

55 Annual Information Governance Report

The Executive Officer (Information Governance) presented a report of the Deputy Chief Executive which provided an annual report on the steps being taken to improve Leeds City Council's governance in order to provide assurance for the annual governance statement.

Members requested that a report on a six monthly basis.

Draft minutes to be approved at the next meeting of the Committee

RESOLVED – The Committee resolved to:

- (a) note the contents of the report and the assurances provided as to the Council's approach to information governance; and
- (b) Request a report on the steps being taken to implement the Information Commissioners recommendations on a six monthly basis.

56 Annual Business Continuity Report

The Principal Business Continuity Officer presented a report of the Deputy Chief Executive. The report provided assurance that the business continuity plans and arrangements in place for the Council's critical services are fit for purpose, up to date, embedded and being routinely complied with. The report also provided assurance that critical services in Phase 1 are compliant with the statutory duties detailed in the Civil Contingencies Act 2004 and that the ordinary services identified in Phase 2 are working towards achieving compliance with the Act by September 2015.

Members welcomed the report and congratulated officers for their work in this area.

Members also considered the service priorities of the Council should a disruption occur and also the time it would take to re-establish a service.

The deadline for completion of Phase 2 Business Continuity Plans in September 2015 was raised by Members and they requested a progress update in June 2015.

RESOLVED – The Committee resolved to:

- (a) note the level of assurance on the adequacy of business continuity arrangements currently implemented (phase 1);
- (b) Note that Phase 2 development is working toward completion by September 2015; and
- (c) Request an update in June 2015 as to the progress in completing Phase 2 Business Continuity Plans by September 2015.

(Councillor J Cummins left at 3pm during discussion of this item)

57 KPMG Technical Update

The Principal Finance Manager presented a report of the Deputy Chief Executive which provided members with an overview of KPMG's progress in delivering their external audit responsibilities. KPMG's report also highlighted what they consider the main technical issues which are currently having an impact on local government.

Members noted the good news in terms of the reduction of KPMG's fees.

Draft minutes to be approved at the next meeting of the Committee

Members discussed the KPMG contract with the Principal Finance Manager and were informed that the current contract runs until 2016/17, after which the Council may be able to tender the contract subject to ongoing discussions with The Department for Communities and Local Government.

RESOLVED – The Committee resolved to note the contents of KPMG’s report.

58 Work programme

The City Solicitor submitted a report which notified Members of the draft work programme for the 2015/16 year.

In reviewing the forthcoming work programme Members discussed signing off the Leeds City Region Leaders Board Accounts and the role of this Committee in that process due to the Joint Committee being wound up.

Members also noted that the financial management issues raised by Councillor Hanley are scheduled to be considered.

Members noted and provisionally agreed the 2015/16 meeting dates for the Committee.

RESOLVED – The Committee resolved to:

- (a) Note the contents of the report; and
- (b) Provisionally agree the meeting dates for the Committee in the 2015/16 municipal year as detailed within Appendix 1 of the submitted report.

59 Retiring Councillors

The Chair informed the Committee that Councillors Hanley and J L Carter would be retiring from the Council after the election in May.

The Chair thanked both Councillors for all their hard work on the Committee over the years that they have served on it.

This page is intentionally left blank

Report of the Deputy Chief Executive

Report to Corporate Governance and Audit Committee

Date: 25th June 2015

Subject: Leeds City Region Joint Committee Annual Financial Return and Annual Governance Statement 2014/15

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Summary of main issues

1. The Leeds City Region Leaders Board Joint Committee was dissolved on 31st March 2015. As a body which is covered by the Accounts and Audit Regulations, there is a statutory requirement for its closing annual financial return and annual governance statement to be approved by an appropriate body.
2. Following discussions with the Audit Commission, it was recommended that the most appropriate body to undertake approval of these statements would be Leeds City Council, as the council was the body which held the stewardship of the joint committee's assets and liabilities, and its financial activities were conducted in accordance with Leeds City Council's policies and procedures.
3. This report presents the annual financial return and the annual governance statement.

Recommendations

4. Members are asked to approve the Leeds City Region Leaders Board Joint Committee draft 2014/15 Accounting Statement and the Chair is asked to acknowledge the approval on behalf of the Committee by signing the appropriate section.
5. Members are asked to confirm that they have received and accepted the Declaration on Governance Arrangements for 2014/15 which has been provided by the Chair and the responsible officers of the former Leeds City Region Leaders Board Joint

Committee, and the Chair is asked to acknowledge this on behalf of the Committee by signing the abbreviated Annual Governance Statement.

1 Purpose of this report

- 1.1 This report accompanies the 2014/15 Annual Accounting Statement and Annual Governance Statement for Leeds City Region Leaders Board Joint Committee.
- 1.2 The report explains why the responsibility of approving these statements has fallen to this Committee, and outlines what assurances the Committee can rely on in approving the statements.

2 Background information

- 2.1 The Leeds City Region Leaders Board Joint Committee was dissolved on 31st March 2015. As a joint committee there is a requirement under the Accounts and Audit Regulations for it to produce, approve and publish accounting statements and an annual governance statement for 2014/15.
- 2.2 Leeds City Council acted as the support services authority for the joint committee and had custody of all of its assets and liabilities. The joint committee's constitution required that its financial activities were to be carried out in accordance with Leeds City Council's Financial Regulations and Contracts Procedure Rules. These activities were carried out by Leeds City Council employees using the council's financial systems.
- 2.3 When the decision was taken to wind up the joint committee, advice was sought from the Audit Commission on who should approve its closing financial statements given that the Leaders Board itself would no longer exist as a decision-making body. It was concluded that Leeds City Council would be the most appropriate body to approve the closing statements, being the body which had been responsible for the financial stewardship of the joint committee's activities. The Board determined at its meeting of 12th December 2014 to delegate the approval of its closing accounting statements to Leeds City Council.
- 2.4 The remaining assets and liabilities of the joint committee are to be allocated between Leeds City Council and the West Yorkshire Combined Authority. Broadly speaking, Leeds will retain custody of those assets which cannot be transferred for legal reasons and a small number of projects with fixed end dates which have only a few months left to run.

3 Main issues

3.1 Statutory requirements for approval of the accounting and annual governance statements

- 3.1.1 The Leeds City Region Leaders Board Joint Committee qualifies as a 'smaller relevant body' under the Accounts and Audit Regulations. The qualifying test in the regulations is that the body's gross income or expenditure (whichever is higher) is not more than £6.5m in the current year or in either of the two immediately preceding years. As the joint committee's gross income and expenditure for 2012/13 were £2.2m and £1.8m respectively, it remained qualified as a smaller relevant body for 2014/15.

- 3.1.2 As a 'smaller relevant body', the joint committee has a different statutory timetable for approving its annual financial statements from the council as a whole. It also has simpler requirements for the format of the accounting statements.
- 3.1.3 The annual accounts should be approved by the body on or before 30th June, and before they are subject to external audit. There is no requirement for the body to re-approve the final audited version of the statements before they are published. Once approved, the statements are made available for public inspection and submitted to the auditors, who this year are PKF Littlejohn LLP. Once the audit has been completed, the audited accounting statement, the audit report and the annual governance statement should be published on or before 30th September.
- 3.1.4 As a smaller relevant body, the joint committee is not required to produce a full set of accounts, but instead has to produce an annual return which consists of simplified accounting statements, a simplified annual governance statement, and a report from the body's internal auditor covering internal controls and the accounting statements.

3.2 Accounting Statements

- 3.2.1 Section 1 of the Annual Return presents the accounting statements of the body for the relevant financial year. These are prepared in accordance with proper accounting practice and have been signed by the Deputy Chief Executive in his capacity as the Responsible Financial Officer for Leeds City Region Joint Committee, to certify that they present fairly the financial position of the body and are consistent with the underlying financial records.
- 3.2.2 A review of internal controls, including those related to financial transactions, has also been carried out by Internal Audit, and their report is included as Section 4 of the attached Annual Return.
- 3.2.3 The required accounting statements are a highly simplified alternative to a full statement of accounts, showing only the body's opening balances and reserves, income and expenditure for the year, and the closing balances and reserves. The statement also discloses the body's cash position at the year end and the value of any fixed or long term assets and any borrowings.
- 3.2.4 The accounting statements show closing reserves and balances of £43,411,997, of which £460,824 are general reserves and the remaining £42,951,173 is ring-fenced to grant funded projects.

3.3 Annual Governance Statement

- 3.3.1 The required annual governance statement for a smaller relevant body is in the form of a list of arrangements which should have been in place to ensure a sound system of internal control. Since it was the responsibility of the joint committee's Board to ensure that these arrangements were in place during 2014/15, a revised two-part format has been adopted for the Annual Governance Statement. The covering statement which the Committee is asked to approve makes clear that the responsibility for governance during the year lay with the Board, and asks the Committee to confirm that it has received and accepted the assurances on

governance which are given in the Declaration on Annual Governance, which is attached to the covering statement.

3.3.2 The Declaration on Annual Governance will be published as an integral part of the Annual Governance Statement. This lists all of the points which are required to be covered by the Annual Governance Statement, and has been signed by the Chair of the Leeds City Region Joint Committee Leaders Board, its Chief Officer during 2014/15, and the Deputy Chief Executive of Leeds City Council in his capacity as the responsible financial officer for the joint committee, to confirm that they consider such assurances to have been in place during the 2014/15 financial year.

3.3.3 The Committee are also asked to note that Internal Audit have concluded that the internal control objectives set out in Section 4 of the Annual Return have been achieved throughout the financial year to a standard adequate to meet the needs of the body.

4 Corporate Considerations

4.1 Consultation and Engagement

4.1.1 The draft annual statements will be made available for public inspection as required by statute.

4.2 Equality and Diversity / Cohesion and Integration

4.2.1 There are no issues regarding equality, diversity, cohesion and integration.

4.3 Council policies and the Best Council Plan

4.3.1 As this is a factual report based on past financial performance there are no direct implications for Council policies or for the Best Council Plan.

4.4 Resources and value for money

4.4.1 There are no implications for the Council itself as regards resources and value for money.

4.5 Legal Implications, Access to Information and Call In

4.5.1 The report does not require a key decision and is therefore not subject to call-in.

4.6 Risk Management

4.6.1 The review carried out by Internal Audit has not identified any significant risks to the council.

5 Conclusions

5.1 The annual accounting statement has been signed by the Deputy Chief Executive to confirm that it presents fairly the closing financial position of the joint committee, and it is accompanied by a report from Internal Audit confirming that

they have reviewed the statements and the internal controls which were in place for the joint committee.

- 5.2 The Chair, the Chief Officer and the Responsible Finance Officer of the joint committee during 2014/15 have signed a declaration giving assurance that appropriate internal controls were in place during the year.

6 Recommendations

- 6.1 Members are asked to approve the Leeds City Region Leaders Board Joint Committee draft 2014/15 Accounting Statement and the Chair is asked to acknowledge the approval on behalf of the Committee by signing the appropriate section.
- 6.2 Members are asked to confirm that they have received and accepted the Declaration on Governance Arrangements for 2014/15 which has been provided by the Chair and the responsible officers of the former Leeds City Region Leaders Board Joint Committee, and the Chair is asked to acknowledge this on behalf of the Committee by signing the abbreviated Annual Governance Statement.

7 Background documents¹

- 7.1 None.

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.

Small Bodies in England

Annual return for the financial year ended 31 March 2015

Small relevant bodies in England with an annual turnover of £6.5 million or less must complete an annual return in accordance with proper practices summarising their annual activities at the end of each financial year.

The annual return on pages 2 to 5 is made up of four sections:

- Sections 1 and 2 are completed by the person nominated by the body.
- Section 3 is completed by the external auditor appointed by the Audit Commission.
- Section 4 is completed by the body's internal audit provider.

Each body must approve this annual return no later than 30 June 2015.

Completing your annual return

Guidance notes, including a completion checklist, are provided on page 6 and at relevant points in the annual return.

Complete all sections highlighted in red. Do not leave any red box blank. Incomplete or incorrect returns require additional external audit work and may incur additional costs.

Send the annual return, together with your bank reconciliation as at 31 March 2015, an explanation of any significant year on year variances in the accounting statements and any additional information requested, to your external auditor by the due date.

Your external auditor will identify and ask for any additional documents needed for their work. Therefore, unless requested, do not send any original financial records to the external auditor.

Once the auditor has completed their work, certified annual returns will be returned to the body for publication or public display of sections 1, 2 and 3. You must publish or display the annual return, including the external auditor's report, by 30 September 2015.

It should not be necessary for you to contact the external auditor for guidance.

More guidance on completing this annual return is available in the Practitioners' Guides for either local councils or internal drainage boards. These publications may be downloaded from the National Association of Local Councils (NALC) or Society of Local Council Clerks (SLCC) websites (www.nalc.gov.uk or www.slcc.co.uk) or from the members area of the Association of Drainage Authorities website (www.ada.org.uk).

Section 1 – Accounting statements 2014/15 for:

Enter name of reporting body here:

ENTER REPORTING BODY NAME HERE

	Year ending		Notes and guidance
	31 March 2014 £	31 March 2015 £	
			Please round all figures to nearest £1. Do not leave any boxes blank and report £0 or Nil balances. All figures must agree to underlying financial records.
1 Balances brought forward	37,451,769	45,474,124	Total balances and reserves at the beginning of the year as recorded in the body's financial records. Value must agree to Box 7 of previous year.
2 (+) Income from local taxation and/or levy	0	0	Total amount of local tax and/or levy received or receivable in the year including funding from a sponsoring body.
3 (+) Total other receipts	16,202,192	18,728,403	Total income or receipts as recorded in the cashbook less the taxation and/or levy (line 2). Include any grants received here.
4 (-) Staff costs	814,656	1,100,503	Total expenditure or payments made to and on behalf of all employees. Include salaries and wages, PAYE and NI (employees and employers), pension contributions and employment expenses.
5 (-) Loan interest/capital repayments	0	0	Total expenditure or payments of capital and interest made during the year on the body's borrowings (if any).
6 (-) All other payments	7,365,181	19,690,027	Total expenditure or payments as recorded in the cashbook less staff costs (line 4) and loan interest/capital repayments (line 5).
7 (=) Balances carried forward	45,474,124	43,411,997	Total balances and reserves at the end of the year. Must equal (1+2+3) – (4+5+6)
8 Total cash and short term investments	32,643,665	25,208,533	The sum of all current and deposit bank accounts, cash holdings and short term investments held as at 31 March – to agree with bank reconciliation.
9 Total fixed assets plus other long term investments and assets	12,951,089	18,040,578	The original Asset and Investment Register value of all fixed assets, plus other long term assets owned by the body as at 31 March
10 Total borrowings	0	0	The outstanding capital balance as at 31 March of all loans from third parties (including PWLB).

I certify that for the year ended 31 March 2015 the accounting statements in this annual return present fairly the financial position of the body and its income and expenditure, or properly present receipts and payments, as the case may be.

Signed by Responsible Financial Officer:

SIGNATURE: *A. Gay*

Date: 15/06/2015

I confirm that these accounting statements were approved by the body on:

DD/MM/YYYY

and recorded as minute reference:

MINUTE REFERENCE

Signed by Chair of meeting approving these accounting statements:

SIGNATURE REQUIRED

Date: DD/MM/YYYY

Section 2 Annual governance statement 2014/15

The Board of Leeds City Region Joint Committee was responsible for ensuring that there was a sound system of internal control during 2014/15, including the preparation of the accounting statements.

The Board of Leeds City Region Joint Committee was dissolved at 31st March 2015, having delegated to Leeds City Council, as the support services authority, the approval of the body's accounts for 2014/15.

We, as the members of Leeds City Council Corporate Governance and Audit Committee, have made enquiries as to the systems of internal control in place for Leeds City Region Joint Committee and, having received sufficient assurances set out in the attached schedule, confirm, to the best of our knowledge and belief, that the statements made can be relied upon for the year ended 31 March 2015.

<p>The attached declaration on the governance arrangements of the Leeds City Region Leaders' Board for 2014/15 was received and accepted by the Corporate Governance and Audit Committee and recorded as minute reference:</p> <p>Dated</p>	<p>Signed by:</p> <p>Chair</p> <p>Dated</p> <p>Signed by:</p> <p>Clerk</p> <p>Dated</p>
---	---

Leeds City Region Joint Committee

Declaration on Governance Arrangements 2014/15

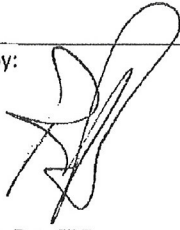
The Board of Leeds City Region was responsible for ensuring that there was a sound system of internal control during 2014/15, including the preparation of the accounting statements.

The Board of Leeds City Region was dissolved at 31st March 2015, having delegated to Leeds City Council, as the support services authority, the approval of the body's accounts for 2014/15.

We, as the Chair and the responsible officers for Leeds City Region during 2014/15 confirm, to the best of our knowledge and belief, with respect to the accounting statements for the year ended 31 March 2015, that:

	Agreed-		'Yes' means that the body:
	Yes	No	
1 We approved the accounting statements prepared in accordance with the requirements of the Accounts and Audit Regulations and proper practices.	Yes		prepared its accounting statements in the way prescribed by law.
2 The Board maintained an adequate system of internal control, including measures designed to prevent and detect fraud and corruption and reviewed its effectiveness.	Yes		made proper arrangements and accepted responsibility for safeguarding the public money and resources in its charge.
3 The Board took all reasonable steps to assure ourselves that there are no matters of actual or potential non-compliance with laws, regulations and proper practices that could have a significant financial effect on the ability of the body to conduct its business or on its finances.	Yes		has only done what it has the legal power to do and has complied with proper practices in doing so.
4 The Board provided proper opportunity during the year for the exercise of electors' rights in accordance with the requirements of the Accounts and Audit Regulations.	Yes		during the year has given all persons interested the opportunity to inspect and ask questions about the body's accounts.
5 The Board carried out an assessment of the risks facing the body and took appropriate steps to manage those risks, including the introduction of internal controls and/or external insurance cover where required.	Yes		considered the financial and other risks it faces and has dealt with them properly.
6 The Board maintained throughout the year an adequate and effective system of internal audit of the body's accounting records and control systems.	Yes		arranged for a competent person, independent of the financial controls and whether internal controls meet the needs of the body.
7 The Board took appropriate action on all matters raised in reports from internal and external audit.	Yes		responded to matters brought to its attention by internal and external audit.
8 We considered whether any litigation, liabilities or commitments, events or transactions, occurring either during or after the year-end, have a financial impact on the body and where appropriate have included them in the accounting statements.	Yes		disclosed everything it should have about its business activity during the year including events taking place after the year end if relevant.

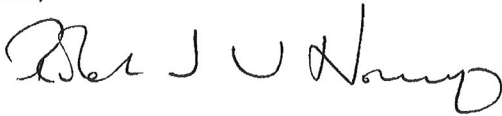
Signed by:



Clr Peter Box CBE
Chair, Leeds City Region Joint Committee Leaders Board

Dated: 15/6/15

Signed by:



Rob Norreys
Leeds City Region Enterprise Partnership Director And Head Of Economic Strategy

Dated: 15/6/15

Signed by:



Alan Gay
Deputy Chief Executive, Leeds City Council
As Responsible Financial Officer, Leeds City Region

Dated: 15/6/15

Section 3 – External auditor certificate and report 2014/15

Certificate

We certify that we have completed our review of the annual return, and discharged our responsibilities under the Audit Commission Act 1998 as transitionally saved, for the year ended 31 March 2015 in respect of:

ENTER REPORTING BODY NAME HERE

Respective responsibilities of the body and the auditor

The body is responsible for ensuring that its financial management is adequate and effective and that it has a sound system of internal control. The body prepares an annual return in accordance with proper practices which:

- summarises the accounting records for the year ended 31 March 2015; and
- confirms and provides assurance on those matters that are important to our audit responsibilities.

Our responsibility is to review the annual return in accordance with guidance issued by the Audit Commission (see note below). Our work does not constitute an audit carried out in accordance with International Standards on Auditing (UK & Ireland) and does not provide the same level of assurance that such an audit would do.

External auditor report

(Except for the matters reported below)* on the basis of our review of the annual return, in our opinion the information in the annual return is in accordance with proper practices and no matters have come to our attention giving cause for concern that relevant legislation and regulatory requirements have not been met. (*delete as appropriate).

(continue on a separate sheet if required)

Other matters not affecting our opinion which we draw to the attention of the body:

(continue on a separate sheet if required)

External auditor signature

External auditor name

Date

Note: The Audit Commission issued guidance in its Standing Guidance, which is applicable to external auditors' work on 2014/15 accounts.

Section 4 – Annual internal audit report 2014/15 to

ENTER REPORTING BODY NAME HERE

The body's internal audit, acting independently and on the basis of an assessment of risk, carried out a selective assessment of compliance with relevant procedures and controls expected to be in operation during the financial year ended 31 March 2015.

Internal audit has been carried out in accordance with the body's needs and planned coverage. On the basis of the findings in the areas examined, the internal audit conclusions are summarised in this table. Set out below are the objectives of internal control and alongside are the internal audit conclusions on whether, in all significant respects, the control objectives were being achieved throughout the financial year to a standard adequate to meet the needs of the body.

Internal control objective	Agreed? Please choose one of the following		
	Yes	No*	Not covered**
A Appropriate accounting records have been kept properly throughout the year.	✓		
B The body's financial regulations have been met, payments were supported by invoices, all expenditure was approved and VAT was appropriately accounted for.	✓		
C The body assessed the significant risks to achieving its objectives and reviewed the adequacy of arrangements to manage these.	✓		
D The annual taxation or levy or funding requirement resulted from an adequate budgetary process; progress against the budget was regularly monitored; and reserves were appropriate.	N/A		
E Expected income was fully received, based on correct prices, properly recorded and promptly banked; and VAT was appropriately accounted for.	✓		
F Petty cash payments were properly supported by receipts, all expenditure was approved and VAT appropriately accounted for.	N/A		
G Salaries to employees and allowances to members were paid in accordance with body approvals, and PAYE and NI requirements were properly applied.	✓		
H Asset and investments registers were complete and accurate and properly maintained.	N/A		
I Periodic and year-end bank account reconciliations were properly carried out.	✓		
J Accounting statements prepared during the year were prepared on the correct accounting basis (receipts and payments or income and expenditure), agreed to the cash book, were supported by an adequate audit trail from underlying records, and, where appropriate, debtors and creditors were properly recorded.	✓		

For any other risk areas identified by the body (list any other risk areas below or on separate sheets if needed) adequate controls existed:

Name of person who carried out the internal audit: LOUISE IVENS

Signature of person who carried out the internal audit: REQUIRED Date: 15/6/15

*Note: If the response is 'no' please state the implications and action being taken to address any weakness in control identified (add separate sheets if needed).

**Note: If the response is 'not covered' please state when the most recent internal audit work was done in this area and when it is next planned, or, if coverage is not required, internal audit must explain why not (add separate sheets if needed).

Guidance notes on completing the 2014/15 annual return

- 1 You must apply proper practices for preparing this annual return. Proper practices are found in the Practitioners' Guides* which are updated from time to time and contain everything you should need to prepare successfully for your financial year-end and the subsequent audit. Both NALC and SLCC have helplines if you want to talk through any problem you may encounter.
- 2 Make sure that your annual return is complete (i.e. no empty red boxes), and is properly signed and dated. Avoid making any amendments to the completed return. But, if this is unavoidable, make sure the amendments are drawn to the attention of and approved by the body, properly initialled and an explanation is provided to the external auditor. Annual returns containing unapproved or unexplained amendments will be returned unaudited and may incur additional costs.
- 3 Use the checklist provided below. Use a second pair of eyes, perhaps a member or the Chair, to review your annual return for completeness before sending it to the external auditor.
- 4 Do not send the external auditor any information not specifically asked for. Doing so is not helpful. However, you must notify the external auditor of any change of Clerk, Responsible Financial Officer or Chair.
- 5 Make sure that the copy of the bank reconciliation which you send to your external auditor with the annual return covers all your bank accounts. If your body holds any short-term investments, note their value on the bank reconciliation. The external auditor must be able to agree your bank reconciliation to Box 8 on the Accounting statements. You must provide an explanation for any difference between Box 7 and Box 8. More help on bank reconciliation is available in the Practitioners' Guides*.
- 6 Explain fully significant variances in the accounting statements on page 2. Do not just send in a copy of your detailed accounting records instead of this explanation. The external auditor wants to know that you understand the reasons for all variances. Include a complete analysis to support your explanation. There are a number of examples provided in the Practitioners' Guides* to assist you.
- 7 If the external auditor has to review unsolicited information, or receives an incomplete bank reconciliation, or you do not fully explain variances, this may incur additional costs for which the auditor will make a charge.
- 8 Make sure that your accounting statements add up and the balance carried forward from the previous year (Box 7 of 2014) equals the balance brought forward in the current year (Box 1 of 2015).
- 9 Do not complete section 3. The external auditor will complete it at the conclusion of the audit.

Completion checklist – 'No' answers mean you may not have met requirements		Done?
All sections	All red boxes have been completed?	
	All information requested by the external auditor has been sent with this annual return? Please refer to your notice of audit.	
Section 1	Approval by the body confirmed by signature of Chair of meeting approving the accounting statements?	
	An explanation of significant variations from last year to this year is provided?	
	Bank reconciliation as at 31 March 2015 agreed to Box 8?	
	An explanation of any difference between Box 7 and Box 8 is provided?	
Section 2	For any statement to which the response is 'no', an explanation is provided?	
Section 4	All red boxes completed by internal audit and explanations provided?	

*Note: Governance and Accountability for Local Councils in England – A Practitioners' Guides, is available from NALC and SLCC representatives or Governance and Accountability for Internal Drainage Boards in England – A Practitioners' Guides, is available from the ADA at The Association of Drainage Authorities, 12 Cranes Drive, Surbiton, Surrey, KT5 8AL or from the NALC, SLCC or ADA websites - see page 1 for addresses.

Report of: The Director of Public Health

Report to: The Corporate Governance and Audit Committee

Date: 25 June 2015

Subject: Office of the Director of Public Health Annual Governance Report

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Summary of main issues

1. The Corporate Governance and Audit Committee agreed that an annual governance report of the Director of Public Health should be presented to members in order to provide them with continued assurance that the directorate has robust risk management and governance arrangements in place.
2. At its meeting on 10 July 2014, the Corporate Governance and Audit Committee received the last annual report. This informed members that following the first year of transferred commissioning responsibilities to the Local Authority, the Public Health Directorate was continuing to strengthen its risk management and governance arrangements.
3. This year's report provides continued assurance that Public Health has robust arrangements in place and has developed work further, particularly in relation to Serious Untoward Incident reporting, National Institute for Health and Care Excellence (NICE) guidance compliance and implementation of increased support for Information Governance (IG).
4. As comments were received from members at the 10 July 2014 meeting in terms of ensuring value for money was being achieved for commissioned services, this report also provides the Committee with assurance in this regard.

Recommendations

5. The Corporate Governance and Audit Committee is asked to:

- (a) receive the annual Governance report of the Office of the Director of Public Health;
- (b) note the assurance processes that the Office of the Director of Public Health has put in place since the last Annual Governance report.

1. Purpose of this report

- 1.1 This report provides the Corporate Governance and Audit Committee with an annual update on Public Health's Risk management and Governance arrangements, reporting on progress since the last report was presented to members on 10 July 2014.

2 Background information

- 2.1 The "main issues" section of the report provides assurance to the Committee that the Public Health Directorate has robust Risk Management and Governance arrangements in place, complying fully with the Council's own Risk Management Framework and Governance procedures.

3 Main issues

- 3.1 At its meeting on 10 July 2014, the Corporate Governance and Audit Committee received a report from the Director of Public Health which provided an update on Public Health's Risk management and Governance arrangements.
- 3.2 At that meeting, one key area of consideration was in relation to value for money being achieved for commissioned services and members requested that reference to this was explicit within the Terms of Reference of the Public Health Governance Group. Members are advised that the Terms of Reference was subsequently amended to reflect this request. The Committee is also asked to note the following two examples where value for money has been achieved through the recent re-commissioning of Public Health services.
- 3.3 Following approval at the Executive Board meeting held on 11 February 2015, the contract awarded to a consortium led by Developing Initiatives Supporting Communities (DISC) to deliver drug and alcohol treatment and recovery services will provide savings of £848,722 during the first full year of the contract, commencing on 1 July 2015. The new service will incur an increase in prescribing costs. In addition, the Council has to take on the costs of a new alcohol treatment mandated by the National Institute for Health and Care Excellence (NICE). All of this has been included within the agreed 2015/16 Public Health budget.
- 3.4 The Contract Award on Integrated Sexual Health Services (approved at the 11 February 2015 Executive Board meeting) also demonstrates value for money as the value for this contract award is £29,256,575.00 over a period of 5 years, offering an annual saving of £300,000. In addition, Leeds will finally have an integrated sexual health service, long requested by service users. The Local Government Association has just published a report using Leeds as a showcase example of commissioning sexual health services post transfer from the NHS. The details of both contract awards were also considered at the Scrutiny Board (Health and Wellbeing and Adult Social Care) meeting held on 24 February 2015.
- 3.5 The Corporate Governance and Audit Committee is also asked to note the following key areas of work which have been considered by the Public Health Governance Group over the past twelve months.

Public Health Governance Group

- 3.6 Since the last Public Health Annual Governance Report was presented to the Committee, four Governance Group meetings have been held, chaired by the Director of Public Health. Areas of focus by the group included the Review of the Public Health Risk Registers; NICE Guidance Compliance across the Local Authority; the management of Serious Untoward Incidents; Compliments and Complaints received by the Directorate; the findings and recommendations from the Public Health Internal Audit Report; the Review of the Director of Public Health's Sub-Delegation Scheme and Information Governance support for the directorate. Key priorities considered by the group are outlined in further detail below:

Public Health Risk Registers

- 3.7 Public Health works closely with the Risk Management Unit (a member of which attends Governance Group meetings) on its Risk Management processes. The Director of Public Health also ensures that the Elected Member for Health and Wellbeing is kept up to date on the directorate's Risk Register.
- 3.8 Public Health continues to use the risk management software in reviewing, monitoring and updating its Risk Registers. The Directorate, Programme/Major Project and Budget Risk Registers are reviewed as standing agenda items at each Governance Group meeting to ensure that its risk management arrangements continue to be strengthened and are aligned to the Council's own Risk Reporting processes.
- 3.9 Public Health currently has four risks on its Directorate Register which relate to the commissioning of Smoking Cessation Services; NHS Healthchecks; Weight Management Services and Information Governance (a key priority for the Local Authority). Appropriate actions are in place to mitigate each risk and are routinely reviewed by both the Governance Group and Risk Management Unit.
- 3.10 In terms of its Programme and Major Projects Risk Register, Public Health has two risks which relate to the commissioning of integrated sexual health services and delivery of the drug and alcohol treatment services (both rated green). In respect of Public Health's Service Level Risks, these are reviewed and monitored by each Consultant/Chief Officer leading on their individual service areas. Where a service level risk is deemed to be rated high or of a particularly contentious nature, this will be brought to the attention of the Governance Group by the Public Health Consultant for consideration as to whether this should be escalated to the Directorate Risk Register.
- 3.11 The key risks in the 2015/16 budget for the directorate are as follows:
- (a) Failure to realise sexual health and drugs and alcohol saving to meet the 15/16 drugs and alcohol budget and 16/17 recurrent saving requirement;
 - (b) Risk of increases in costs for prescribing and dispensing in relation to the new drugs and alcohol service;
 - (c) The NICE endorsed alcohol treatment provides a new treatment cost pressure for new drug nalmefene, this will be demand led where there is no previous history of cost so risk is based on demand/activity;

- (d) Public Health manages 20 contracts which are activity based. There is a potential risk of under/over trading on these contracts according to demand/activity some of which are determined by NHS tariff costs;
- (e) Risk of failure to recoup costs for genitourinary medicine (GUM) treatment for out of area provision; and
- (f) Risk of unanticipated emergency situation, such as a flu pandemic, in terms of costs that would have to be met by the council.

3.12 When Public Health transferred from the Primary Care Trust to Leeds City Council in April 2013, the Risk Management Unit undertook a risk workshop with the directorate's Leadership and Senior Management Team (consisting of 18 members of staff) later that year on 26 September 2013. The workshop provided an overview of the Council's risk management arrangements, the roles and responsibilities of elected members and council staff, and the various reporting arrangements. Given that Public Health is now fully embedded within the Local Authority, a further workshop will be facilitated for all 95 members of staff during 2015/16 in order to strengthen Public Health's current risk management arrangements and to remind staff of the current risks facing the directorate.

Business Resilience

- 3.13 The Resilience and Emergencies Team has completed work with the services and functions within Public Health, establishing a business impact analysis to identify the most critical services. Business continuity plans have been developed and implemented as part of Phase 1 of the Business Continuity Programme.
- 3.14 Work has also been completed to look at the business continuity requirements of services commissioned by Public Health. Business continuity requirements are requested during the procurement process and as part of on-going contract monitoring.
- 3.15 Led by the Emergency Planning Officer (Health Protection), a multi-agency Leeds Pandemic Influenza Task and Finish Group has been set up to ensure each partner organisation has the appropriate plans in place and to draw these together through the development of the overarching Leeds Pandemic Influenza Response Plan. The Resilience and Emergencies Team have subsequently facilitated an Exercise to test the plan and the final Response Plan incorporating the key outcomes from the Exercise which will be submitted to the Leeds Health Protection Board for approval and sign-off in Autumn 2015.
- 3.16 A Public Health Directorate Resilience Group has been formed, chaired by the Director of Public Health, which meets on a six monthly basis. The work of the Directorate Resilience Group is informed by the West Yorkshire Resilience Forum and the West Yorkshire Community Risk Register, ensuring that Public Health is aware of both internal and wider risks and ensuring they have the capability to respond to risks which may threaten Council, City and West Yorkshire resilience.

Serious Untoward Incident (SUI) Reporting

- 3.17 Within the NHS, there is an established Serious Incident Framework which outlines a systematic process for responding to serious incidents in NHS funded care. This framework gives Provider and Commissioning organisations details of

the process and procedures to be followed so that Serious Untoward Incidents are identified correctly, investigated thoroughly and learned from to prevent the likelihood of similar incidents happening again.

- 3.18 Prior to Public Health transferring over to the Local Authority, the reporting of Serious Untoward Incidents within commissioned services was managed and monitored by the Primary Care Trust. Following its transfer in April 2013, the Council, via Public Health has new commissioning responsibilities for NHS services and therefore has to comply with the national framework outlined above.
- 3.19 During the past twelve months, the Public Health Governance Group has reviewed how the Directorate is made aware of and responds to Serious Untoward Incidents (SUIs) within those Public Health services commissioned by Leeds City Council.
- 3.20 Within the Council, the management of SUIs is included as part of the service specifications held by NHS providers and Voluntary and Community Sector Forum services. Providers are aware that serious and untoward incidents should be reported to the Commissioner, i.e. Leeds City Council within two working days.
- 3.21 The Governance Group has ensured that a formal reporting procedure is incorporated into all service contracts so that, following the transfer of the Public Health function to the Local Authority, providers are explicitly aware of the approach for reporting incidents. This would also help to ensure that the requirements of NHS England's Serious Incident Framework would be met.
- 3.22 As NHS Leeds West Clinical Commissioning Group (CCG) has access to the Strategic Executive Information System (STEIS) database (please note that the Local Authority does not have the authority to access this information) where Serious Untoward Incidents are formally reported by the provider, Public Health developed a Serious Incident Reporting Procedure in conjunction with the CCG to ensure that a seamless process is in place for the reporting and subsequent management of SUIs. This procedure was approved by the Governance Group at its meeting on 8 April 2015.
- 3.23 As the Strategy and Commissioning Team transferred over to Public Health in April 2014 from Environments and Housing which has its own procedure for the reporting of serious incidents, the Governance Group agreed that the two procedures should be kept separate as they are quite different in terms of their approach in responding to/the definitions used in order to identify a Serious Untoward Incident.
- 3.24 An internal Public Health Serious Incident Review Panel has also been established to consider investigation reports submitted by providers when a serious incident occurs. The Panel works closely with Leeds West CCG, reporting to the Public Health Governance Group. Full details of all Serious Incidents relating to Public Health commissioned services are shared with the Executive Member for Health, Wellbeing and Adults. The Communications team is also informed in order to manage any potential press coverage which may arise from the reported incident.

- 3.25 Members are asked to note that since transferring over to Leeds City Council, one Serious Untoward Incident has been formally reported to the Director of Public Health (in September 2014). An investigation report was received from the provider and the Public Health Serious Incident Review Panel was satisfied that lessons had been learned, appropriate steps had been taken to ensure that a similar incident would not occur, and subsequent action plans had been established by the provider. A rigorous and robust process was followed by both the Office of the Director of Public Health and Leeds West CCG. Members can therefore be assured that the Public Health Serious Incident Reporting Procedure was fully complied with in the management and formal closure of this Serious Untoward Incident. A robust reporting process is therefore in place to respond to any future Serious Untoward Incidents which may occur.

NICE Guidance Compliance

- 3.26 As members are aware, NICE Public Health guidance makes recommendations for populations and individuals on activities, policies and strategies that can help prevent disease or improve health. The Public Health Governance Group recognised the importance of effectively disseminating new NICE Public Health guidance, ensuring that it was effectively implemented by Providers, members of Public Health staff and communicated to Leeds City Council colleagues.
- 3.27 The Public Health Directorate ensures that its providers adhere to the guidance through quarterly commissioning meetings and identify the necessary service developments to ensure that services are operating in line with the most recent evidence and guidance.
- 3.28 However, further work is being undertaken to review Public Health Guidance which is pertinent to the work of the teams within the directorate. Of those which are relevant, evidence is being gathered to confirm which elements of the guidance have been complied with and how the directorate is demonstrating improvements through compliance with the guidance.
- 3.29 Details of new NICE Guidance are communicated to the lead Consultant/Chief Officer and also communicated more widely as part of a general newsletter to Public Health staff.

Public Health Compliments and Complaints

- 3.30 Services commissioned by Public Health follow their own provider organisational complaints policy in line with Council and Contract requirements. Providers have a duty through their contractual arrangements to report complaints and these would be discussed at quarterly contract meetings. Public Health recognises the importance of its providers maintaining high quality and effective services, whilst continuing to demonstrate good value for money. Providers would therefore be expected to comply with their contractual obligations and share details of complaints they have received at the contract meetings.
- 3.31 The Corporate Governance and Audit Committee is asked to note that the Directorate continues to adhere to the Council's Compliments and Complaints Policy for all other complaints which are received (non-commissioned activity).

- 3.32 As previously confirmed to members, the Public Health Governance Manager is the Directorate's Departmental Customer Relations Officer and all members of staff are aware of what procedure should be followed, along with the timescales involved in receiving and responding to either a compliment or complaint. Within the 2014/15 financial year, a total of fourteen compliments and two complaints were received and responded to. Both complaints were dealt with within the Council's specified deadline of 15 working days (from receipt).
- 3.33 An update on all compliments and complaints received by Public Health is presented to the Governance Group as a standing agenda item, one of the reasons for this being that members can monitor emerging themes/concerns within the directorate.

Public Health Information Governance Support

- 3.34 Information Governance support has been provided by the Public Health Intelligence team. As part of a Council wide review of Information Governance and in conjunction with the central and corporate team, work has been carried out to scope out both business requirements and demand management looking to the future. Central and corporate has identified the need for an Information Compliance Officer role and a records management role for Public Health. These roles have been agreed and aligned with the IM&T reviews happening across central and corporate areas.
- 3.35 Public Health has worked closely with the central and corporate team to ensure relevant IG clauses are included in new contracts and existing Public Health contracts have been reviewed to ensure all providers are clear on their data controller/data processor status.
- 3.36 Freedom of Information (FOI) / Subject Access Requests (SARs) are handled by the Public Health Intelligence team who have achieved 100% compliance with all FOIs and SARs dealt with within the Information Commissioners Office timescale standards.

Public Health Internal Audit Report

- 3.37 In August 2014, an Internal Audit review of Public Health was undertaken. The findings of that review were finalised in January 2015 and a summary is provided for members below.

Internal Audit Opinion	Control Environment	Acceptable Assurance
	Compliance	Good Assurance
	Organisational Impact	Moderate

- 3.38 The review found that there were effective processes in place within the directorate for identifying, recording and communicating principal statutory requirements. All service plans had links to the Joint Health and Wellbeing

Strategy and Council priorities. The review found that there were a number of key controls in place for the directorate which included effective budget monitoring/performance management arrangements, close working relationships with relevant elected members and specialist areas within the Council (e.g. Financial Management, Human Resources, Legal Services and the Risk Management Unit). There was also clear evidence that Public Health complied with the “risk management vision” set out in the Corporate Risk Management Policy.

3.39 The Public Health Leadership Team will ensure that all recommendations made as a result of the Internal Audit opinion will be progressed accordingly.

3.40 Given that Public Health had been integrated into the Council for 18 months when this internal audit review commenced, the Director of Public Health is satisfied that the directorate has sound corporate governance processes and principles and is content with the observations and recommendations made within the Internal Audit report.

4 Corporate Considerations

4.1 Consultation and Engagement

4.1.1 The Public Health Governance Group and Risk Management Unit have been fully engaged in the preparation of this report.

4.2 Equality and Diversity / Cohesion and Integration

4.2.1 This is an assurance report and not a decision so due regard is not directly relevant.

4.3 Council policies and Best Council Plan

4.3.1 Under principle 4 of the Council’s Code of Corporate Governance, the authority should take “informed and transparent decisions which are subject to effective scrutiny and risk management”. Public Health’s commitment to comply with the Council’s Risk Management Framework supports this principle.

4.4 Resources and value For money

4.4.1 These arrangements are resourced through existing teams across the Council and therefore have no specific resource implications.

4.5 Legal Implications, Access to Information and Call In

4.5.1 Without robust risk management arrangements in place, the Council could be in breach of the Accounts and Audit Regulations 2015 which require us to have a “sound system of internal control which facilitates the effective exercise of its functions and the achievement of its aims and objectives”. The regulations also require effective arrangements in place for the management of risk. The Public Health directorate therefore has a duty to ensure that the Council is fully compliant in this area by agreeing its key risks, agreeing actions to mitigate against those

risks and ensuring that a robust process is in place for regularly reviewing/updating those risks.

4.6 Risk Management

- 4.6.1 Without robust internal risk management arrangements, there is a danger that the most significant risks and issues that could impact upon the Council and the Best Council Plan objectives are not appropriately identified and managed accordingly.

5 Conclusions

- 5.1 The Office of the Director of Public Health continues to strengthen its robust governance arrangements in respect of its budget management, contract management/business planning and commissioning responsibilities. As outlined above, work is ongoing to build upon the Directorate's current arrangements for Serious Untoward Incidents and dissemination/implementation of new NICE guidance. With continued support from the Risk Management Unit, the Directorate continues to monitor and update its Risk Registers in line with the Council's formal reporting arrangements. The Directorate also adheres to the principles outlined in the Council's policy on Compliments and Complaints and works with the Customer relations Department to ensure full compliance with Council procedures.

6 Recommendations

- 6.1 The Corporate Governance and Audit Committee is asked to:

- (a) receive the annual Governance report of the Office of the Director of Public Health; and
- (b) note the assurance processes that the Office of the Director of Public Health has put in place since the last Annual Governance report.

7 Background documents¹

- 7.1 None.

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.



Report author: Simon
Criddle/Tim Hill x50619

Report of the Deputy Chief Executive

Report to Corporate Governance and Audit Committee

Date: 25th June 2015

Subject: Financial Management Arrangements in the Planning and Sustainable Development Service

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Summary of main issues

1. Corporate Governance and Audit Committee have requested a report which considers assurances to the committee in respect of the financial management arrangements relating to the Planning and Sustainable Development Service.
2. The Council's Responsible Financial Officer has established appropriate overarching controls for the financial management of the Council's affairs.
3. These controls are subject to a number of independent assessments. In particular Internal Audit has reviewed and given substantial assurance on the council's main financial processes, the integrity of the accounts and the accuracy of the major financial systems.
4. External Audit also gives independence assurance on the accounts and accounting practice; the Authority arrangements to ensure value for money and the controls on the Authority's key financial systems.
5. Financial Management arrangements in the Planning Service follow the established controls for the financial management of the Council's affairs as determined by the Council's Responsible Financial Officer.

Recommendations

6. Members of Corporate Governance and Audit Committee are asked to note the assurances provided that the appropriate systems and procedures are in place to ensure that the Council delivers sound financial management and planning.

1 Purpose of this report

- 1.1 Members of Corporate Governance and Audit Committee have requested assurances in respect of the financial management arrangements relating to the planning service.
- 1.2 This reports sets out the financial management arrangements in the Planning and Sustainable Development Service and aims to provide assurance to members that the arrangements are fit for purpose, embedded and being complied with.

2 Background information

- 2.1 Financial procedures and controls are put in place by the Responsible Financial Officer. The main assurance that can be given to the Committee around the appropriateness and effectiveness of financial management arrangements is that such procedures and controls are in place and followed in the Planning and Sustainable Service.
- 2.2 Budget monitoring is a continuous process which operates at a variety of levels throughout the Council. Whilst the Director of City Development is ultimately responsible for the delivery of the directorate budget, operationally these responsibilities are devolved down to individual budget holders in City Development. Responsibility for delivery of the Planning and Sustainable Development budget is devolved firstly to the Chief Officer Planning and Sustainable Development and then to the various Heads of Service as the main budget holders.
- 2.3 There is a clear line of responsibility in terms of managing the Planning and Sustainable Development budget and this is supported by the City Development Financial Management Team in terms of financial reporting and regular budget holder meetings. Within City Development the overall directorate financial position is reported and monitored on a monthly basis at the City Development Directorate meeting. This includes reviewing the financial position and discussing and agreeing appropriate actions.

3 Main issues

- 3.1 This Committee receives an annual report each September which provides assurances on the overall Financial Management arrangements across the Council. The latest such report, on the 19th September 2014, concluded that appropriate overarching financial controls were in place and the main financial processes of budget setting; budget monitoring and closure of accounts were effective. The report also identified a number of independent assurances on these financial arrangements provided by External and Internal Audit.
- 3.2 In terms of setting the budget for the Planning and Sustainable Development Service the Chief Officer and Heads of Service are involved in discussions around resource requirements and the likely trends on activity levels e.g. planning application numbers and assumptions on income. The budget is also set in the context of the Council's financial strategy and the Directorate's budget strategy

and staffing levels, income assumptions, fees and charges and other expenditure budgets are all reviewed as part of the budget setting process. Planning fee charges are set by the Government whilst building fees are set by the service.

- 3.3 The Planning and Sustainable Development budget has two key components, the cost of staffing and external income, mainly from external planning and building control fees. Income levels can fluctuate significantly between years depending on activity levels in the development and construction sectors and generally reflect the prevailing local economic conditions. These factors are considered when determining the budget requirement. A key budget consideration each year is the alignment of staffing resources to the expected level of income and workloads.
- 3.4 On a monthly basis budget holders in the Planning and Sustainable Development Service review spend and income to date against the approved estimates and against the profiled estimate. In addition, budget holders are also required to predict the end of year position which is done with the assistance of directorate finance staff. These monthly projections are reviewed by the Chief Officer and appropriate Heads of Service and any appropriate actions identified and agreed. The financial position by service is reported monthly to the City Development Directorate through a Directorate Financial Dashboard which shows the projected year end position by service, a commentary by service and also provides graphs showing monthly income for key income streams which for City Development includes planning and building fees. The Directorate dashboard is reported to the Deputy Chief Executive and reviewed and challenged by the Finance Performance Group (FPG). The projected financial position is also reported monthly to the Corporate Leadership Team and the Executive Board. The Directorate also maintains a budget risk register which is reviewed and reported on a quarterly basis. This includes a number of budget risk areas that are in the Planning Sustainable Development Service including the staffing budget, planning and building fees and the cost of planning appeals.
- 3.5 The above processes ensure that any budget issues including projected overspends and under achievement of income assumptions are identified at an early stage and action plans developed to deal any such issues. Income from planning and building fees can be volatile and difficult to predict although the trend in planning application numbers provides a reasonable guide as to income levels over the immediate period.
- 3.6 Financial management arrangements in the service are considered to fully comply with the established controls for the financial management of the Council's affairs as determined by the Council's Responsible Financial Officer.
- 3.7 The Planning and Sustainable Development Service had a net revised budget of £3,882k in 2014/15 and the service spent a net £3,731k, an underspend of £151k. The net spend in 2014/15 was also £328k less than the net spend in 2013/14. Income from planning and building fees was £134k above the budget and staffing expenditure was £34k under budget. A breakdown of the budget by each service area within Planning and Sustainable Development is attached at Appendix 1. Planning fee income is shown in the Planning Services budget and is not apportioned to other service areas such as Sustainable Development, Forward Planning and E-Planning which all have a role in the planning process. Building

Standards operates in a competitive market and fees are set taking account of market conditions.

3.8 In relation to performance, Members are asked to note the following:

- Customer Service Excellence has recently been retained for the whole service following a two-day inspection; Leeds remains one of few local planning authorities to meet this standard;
- 2014/15 saw substantial improvements across all categories of application against the key measure of speed of decision-making from the position in 2013/14, as below. We remain well ahead of the government’s target for the determination of major applications (now set at 40%);

Application performance in time

Year	Majors	Minors	Others	Householders
2013/14	73.3%	70.3%	83.3%	85.5%
2014/15	88.7%	85.1%	91.8%	90.2%

- We made a total of 4119 decisions in the year compared to 3977 in 13/14. We received a total of 4511 applications in the year;
- Our appeals performance dipped slightly last year from 71% being dismissed to 66%, which is however in line with the performance in 2012/13. We remain well ahead of the government’s target for appeal performance against major applications;
- Leeds supports over 30 designated Neighbourhood Forums working towards the preparation and adoption of Neighbourhood Plans. This is one of the highest workloads in the country and significantly more than other Core Cities;
- The Core Strategy was found sound by the Inspector following Public Examination and was adopted formally by the Council in 2014. Work is now well advanced on preparing the Draft Site Allocations Plan which will be considered by Executive Board in July.

3.9 The planning control service was subject to a major external review by Arup in 2014 which concluded in terms of efficiency and value for money that “the appropriateness of resources and workload volume have been assessed. Current resources appear adequate if efficiency savings can be realised although there is a need to debate the implications of corporate working in terms of other functions such as pre-application discussions, member liaison, appeals and policy-making”. Overall the conclusion was that the service had improved substantially since the previous review in 2007.

3.10 Based on the above it is concluded that the planning service provides value for money.

4 Corporate Considerations

4.1 Consultation and Engagement

4.1.1 No consultation or engagement has been carried out in relation to the contents of this report.

4.2 Equality and Diversity / Cohesion and Integration

4.2.1 There are no equality and diversity implications arising from this report.

4.3 Council policies and City Priorities

4.3.1 As expressed within the Council Business Plan 2011-2015, spending money wisely is one of the Council's values, with the priority being for directorates to keep within their budgets. Ensuring that the Council has appropriate financial management systems and procedures in place is clearly a key aspect and as such this report does provide some assurances that money is being spent wisely.

4.4 Resources and value for money

4.4.1 This report concerns financial management arrangements in Planning and Sustainable Development and is aimed at providing assurance to members as to their fitness for purpose.

4.5 Legal Implications, Access to Information and Call In

4.5.1 The statutory responsibilities of the Council's responsible financial officer are defined under the Local Government Act 2007 and Accounts and Audit Regulations 2011. The report does not require a key or major decision and is therefore not subject to call-in.

4.6 Risk Management

4.6.1 A full register of all budget risks in accordance with current practice is maintained and subject to quarterly review. Any significant and new risks are contained in the budget monitoring reports submitted to each meeting of the Executive Board, together with any slippage on savings.

4.6.2 The Council's external auditors provide a risk assessment on the Council's financial resilience and the accounts process as part of their interim audit. As part of the interim report, officers are able to outline the processes put in place to mitigate these risks.

5 Conclusions

5.1 Overall, financial management arrangements in the service are considered to fully comply with the established controls for the financial management of the Council's affairs as determined by the Council's Responsible Financial Officer.

6 Recommendations

6.1 Members of Corporate Governance and Audit Committee are asked to note the assurances provided that the appropriate systems and procedures are in place to ensure that the Council delivers sound financial management and planning.

7 Background documents¹

7.1 None

¹ The background documents listed in this section are available for inspection on request for a period of four years following the date of the relevant meeting. Accordingly this list does not include documents containing exempt or confidential information, or any published works. Requests to inspect any background documents should be submitted to the report author.

This page is intentionally left blank

Planning and Sustainable Development Actual 2013/14 and 2014/15 Budget and actual

Planning Services	Actual 13/14	Budget 14/15	Out-turn 14/15	
Expenditure				
Salaries and employment	3,701,989	4,006,850	4,003,249	
Supplies and Services	343,273	175,310	190,018	
Transport	53,636	53,380	50,756	
Internal charges	499,853	486,290	334,323	Dec recharge no longer actioned
	<u>4,598,751</u>	<u>4,721,830</u>	<u>4,578,346</u>	
Income				
Recharges to capital	6,375	-	816	
Dec recharge	266,370	321,990	-	Dec recharge no longer actioned
Local land charges	127,690	112,990	125,915	
Community planner	40,000	24,000	24,000	
Internal planning fees	93,028	147,070	119,237	
External planning fees	3,495,728	3,238,140	3,256,140	
Legal recovery	20,439	-	41,098	
\$106 management fees	90,216	90,000	92,661	
Other	9,036	4,070	7,151	
	<u>4,148,882</u>	<u>3,938,260</u>	<u>3,667,018</u>	
Total budget	<u>449,869</u>	<u>783,570</u>	<u>911,328</u>	
Building Standards				
Expenditure				
Salaries and employment	1,399,928	1,396,820	1,396,248	
Premises	39,121	70,000	8,052	
Supplies and Services	28,736	26,360	21,471	
Transport	70,355	74,630	81,497	
Bad debts provision	18,230	-	21,135	
Internal charges	69,240	67,620	46	Dec recharge no longer actioned
	<u>1,625,610</u>	<u>1,635,430</u>	<u>1,486,179</u>	
Income				
Internal building fees	97,070	112,660	140,334	
Building fees	1,087,630	1,075,000	1,207,022	
Other fees eg dangerous structures)	69,931	124,960	47,728	
	<u>1,254,631</u>	<u>1,312,620</u>	<u>1,395,084</u>	
Total budget	<u>370,979</u>	<u>322,810</u>	<u>91,095</u>	
Sustainable Development				
Expenditure				
Salaries and employment	1,093,338	1,076,800	1,077,626	
Supplies and Services	107,635	256,450	241,463	
Transport	15,275	15,140	13,286	
Internal charges	19,266	16,000	-	Dec recharge no longer actioned
	<u>1,235,514</u>	<u>1,364,390</u>	<u>1,332,375</u>	
Income				
Internal income	9,552			
Other income	70,938	10,990	14,391	
RSPB CENTRE	-	200,000	202,626	
	<u>80,490</u>	<u>210,990</u>	<u>217,017</u>	
Total budget	<u>1,155,024</u>	<u>1,153,400</u>	<u>1,115,358</u>	

Forward planning				
Expenditure				
Salaries and employment	1,617,251	1,591,320	1,528,436	
Premises costs	11,117	-	15,828	
Supplies and Services	482,791	105,440	413,772	Includes s106 no virement see income
Transport	4,836	5,220	5,709	
Internal charges	111,941	22,240	875	Dec recharge no longer actioned
	<u>2,227,936</u>	<u>1,724,220</u>	<u>1,964,620</u>	
Income				
Internal income	4,506		15,668	
Neighbourhood grants	80,580	116,300	100,575	
S106 Paymmets	266,482	150,000	455,913	Includes s106 no virement see expenditure
Other income	751	51,810	4,110	
	<u>352,319</u>	<u>318,110</u>	<u>576,266</u>	
Total budget	<u>1,875,617</u>	<u>1,406,110</u>	<u>1,388,354</u>	
E-planning				
Expenditure				
Salaries and employment	176,185	172,700	167,762	
Supplies and Services	48,612	45,700	40,702	
	<u>224,797</u>	<u>218,400</u>	<u>208,464</u>	
Income				
Internal income	9,962	2,000	1,747	
Other income	7,578	-	-	
	<u>17,540</u>	<u>2,000</u>	<u>1,747</u>	
Total budget	<u>207,257</u>	<u>216,400</u>	<u>206,717</u>	
Civic architect				
Salaries	-	-	18,006	
Total Planning and Sustainable Development	4,058,746	3,882,290	3,730,858	

Report of Deputy Chief Executive

Report to Corporate Governance & Audit Committee

Date: 25th June 2015

Subject: Annual Business Continuity Report: Phase 2 Progress Update

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Summary of main issues

1. The Business Continuity Programme comprises of two phases.

Phase 1 was completed September 2013 and focussed on the Council's 'critical' services. Critical services are those that if disrupted would have an impact on human welfare and security of the community and its environment and would require recovery within 24 hours (or less) of the disruption occurring.

Phase 2 is to develop and implement business continuity plans for Council services identified as 'ordinary'. Ordinary services are those that if disrupted would have an impact on human welfare and security of the community and its environment but do *not* need to be recovered within 24 hours. Phase 2 is work in progress with a completion target date of September 2015.

The work completed in Phase 1 and Phase 2 will update the Council's existing business continuity arrangements in alignment with good practice guidance contained within ISO 22301 and maintain compliance with the statutory duties required under the Civil Contingencies Act 2004.

This report sets out the current progress towards completion of Phase 2 by the target date of September 2015.

Recommendations

2. The Committee to note the progress made to date with completion of Phase 2, and that the target completion date of September 2015 currently remains achievable.

Purpose of this report

- 1.1 To provide an update of current progress towards completion of Phase 2 by the target date of September 2015 as requested by the Corporate Governance & Audit Committee at the April 2015 meeting.

2 Background information

- 2.1 The Civil Contingencies Act 2004 made it a statutory duty of all councils to have in place plans and arrangements to be able to continue to deliver critical aspects of their day to day functions in the event of an emergency, to ensure that any impact on the community is kept to a minimum. Although Business Continuity Plans have been in place for our most critical services since the publication of the Act, the plans have in many cases have not been maintained, nor were they developed using the good practice guidance contained within ISO 22301 Business Continuity Management System Requirements (published 2012).
- 2.2 In order for the Council to maintain compliance with the Act, a centrally managed Business Continuity Programme was initiated in 2012. The aim of the programme is to replace existing plans and identify any requirements for new plans all to be developed using the good practice guidance contained within ISO 22301. The BC Programme comprised of two phases:
- 2.3 Phase 1 was completed September 2013 and focussed on the Council's 'critical' services. Critical services are those that if disrupted would have an impact on human welfare and security of the community and its environment and would require recovery within 24 hours (or less) of the disruption occurring.
- 2.4 Phase 2 is to develop and implement business continuity plans for Council services identified as 'ordinary'. Ordinary services are those that if disrupted would have an impact on human welfare and security of the community and its environment but do *not* need to be recovered within 24 hours.
- 2.5 Phase 2 is work in progress with a completion target date of September 2015.

3 Main issues

- 3.1 **Phase 2 Scope.** A total of 27 'ordinary' services were originally identified by the Directorate Resilience Groups as forming the scope of Phase 2 (this has since reduced to the current total of 23). The following are examples of some of the services identified for Phase 2:

Children's Services: Integrated Safeguarding Unit, Family Information Service, Adoption, Fostering & Family Placement, Multi-Systemic Therapy.

City Development: Highway Network Management, Technical Services (Flood Management), Events Team.

Citizens & Communities: Localities Teams, Registrars, Digital Access.

Strategy & Resources: Insurance & Claims.

Civic Enterprise Leeds: Facilities Service (Mail Room), Planned Maintenance (Water Management).

Adult Social Care, Environment & Housing, Public Health and Legal Services did not identify any services for inclusion in Phase 2. All captured in Phase 1.

- 3.2 **Phase 2 Progress.** At the April 2015 meeting, the Corporate Governance & Audit Committee requested that a further progress update be provided for the June meeting. The following is the current progress as at 15 June:

Phase 2 Business Continuity Programme	Total Number of Business Continuity Plans Required	Number of Business Impact Analysis Completed	Number of Business Continuity Plans in Development	Number of Business Continuity Plans Completed
Totals	23 (27)	23 (13)	16 (7)	7 (0)
April figures in brackets				

- 3.3 The reduction from 27 to 23 business continuity plans required in Phase 2 is the result of (a) restructures resulting in services being merged into combined plans or (b) the completion of a business impact analysis identifying that the development of a business continuity plan is not required.
- 3.4 The progress made since the April meeting aims to provide the Committee with confidence that the September 2015 target date currently remains achievable.
- 3.5 In order to achieve the target date, there is a dependency on managers to complete the review, revision and return of draft documents within reasonable timescales. Officers responsible for the review and revision of draft documents are emailed a reminder every 2 – 3 weeks. The September target date for completion of Phase 2 has been noted at CLT.

4 Corporate Considerations

4.1 Consultation and Engagement

The services proposed for inclusion in Phase 2 of the BC Programme were identified by the Directorate Resilience Groups prior to any developmental work commencing.

4.2 Equality and Diversity / Cohesion and Integration

- 4.2.1 Instruction is included when completing business impact analyses and business continuity plans for managers to take account of any potential impacts for staff and/or customers who may have general or specific access requirements in particular those characteristics protected by the Equality Act 2012.

4.3 Council policies and the Best Council Plan

- 4.3.1 The LCC Business Continuity Policy sets out the requirements placed upon all directorates and services.
- 4.3.2 Business continuity is linked to the outcomes and priorities of the Best Council Plan and City Ambitions.

4.4 Resources and value for money

- 4.4.1 No implications.

4.5 Legal Implications, Access to Information and Call In

- 4.5.1 The Civil Contingencies Act 2004 requires Category 1 responders (local authorities) to maintain plans to ensure that they can continue to perform their key functions in the event of an emergency, so far as is reasonably practicable.
- 4.5.2 Many of the LCC services covered by business continuity plans have a duty of care or a regulatory requirement to provide their service. This extends to maintaining services during an emergency or disruptive incident.

4.6 Risk Management

- 4.6.1 The Corporate risks LCC 1 City Resilience and LCC 2 Council Resilience are both 'standing' risks on the Corporate Risk Register 'unlikely to ever go away' for which CLT require quarterly assurances on how the risk is being mitigated and managed.
- 4.6.2 The West Yorkshire Community Risk Register provides an assessment of the risks agreed by the West Yorkshire Resilience Forum as a basis for supporting the preparation of emergency and business continuity plans.

5 Conclusions

- 5.1 This update report evidences that progress has been made since April towards achieving the September 2015 Phase 2 target completion date.
- 5.2 Completion of Phase 2 will replace existing plans and identify any requirements for new plans all to be developed using the good practice guidance contained within ISO 22301. This will continue to maintain the Councils compliancy with the requirements of the Civil Contingencies Act 2004 in relation to business continuity planning.

- 5.3 It must be noted that in order to achieve the target date, there is a dependency on managers to complete the review and revision of draft plans/documents within reasonable timescales. As with completion of Phase 1, the continued support and influence of the Committee is acknowledged and appreciated towards achieving the September 2015 Phase 2 completion target date.

6 Recommendations

- 6.1 The Committee to note the progress made to date towards completion of Phase 2, and that the target completion date of September 2015 currently remains achievable.

7 Background documents¹

- 7.1 None.

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.

This page is intentionally left blank

Report of City Solicitor

Report to Corporate Governance and Audit Committee

Date: 25th June 2015

Subject: Work Programme

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is the decision eligible for Call-In? .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

1 Purpose of this report

1.1 The Purpose of this report is to notify Members of the Committee of the draft work programme for the 2015/16 year. The draft work programme is attached at Appendix 1.

2 Background information

2.1 The work programme provides information about the future items for the Corporate Governance and Audit Committee agenda, when items will be presented and which officer will be responsible for the item.

3 Main issues

3.1 Members are requested to consider the draft work programme attached at Appendix 1 and determine whether any additional items need to be added to the work programme.

3.2 Members are asked to consider and note the provisional dates for meetings of the Committee in the 2015/16 municipal year; these have been set out in such a way as to enable the Committee to fulfil its functions and responsibilities in a reasonable and proportionate way.

3.3 Corporate Considerations

3.1 Consultation and Engagement

3.1.1 This report consults seeks Members views on the content of the work programme of the Committee, so that it might meet the responsibilities set out in the committee's terms of reference.

3.2 Equality and Diversity / Cohesion and Integration

3.2.1 There are no equality and diversity or cohesion and integration issues arising from this report.

3.3 Council policies and the Best Council Plan

3.4 The work programme provides a balanced number of reports and assurances upon which the committee can assess the adequacy of the council's corporate governance arrangements.

3.5 Resources and value for money

3.5.1 It is in the best interests of the Council to have sound control arrangements in place to ensure effective use of resources, these should be regularly reviewed and monitored as such the work programme directly contributes to this.

3.5.2 Legal Implications, Access to Information and Call In

3.5.1 This report is not an executive function and is not subject to call in.

3.6 Risk Management

3.6.1 By the Committee being assured that effective controls are in place throughout the Council the work programme promotes the management of risk at the Council.

3.6.2 The work programme adopts a risk based approach to the significant governance arrangements of the Council.

4 Conclusions

4.1 The work programme of the Committee should be reviewed regularly and be updated appropriately in line with the risks currently facing the Council.

5 Recommendations

5.1 Members are requested to:

5.2 (a) consider the work programme attached at Appendix 1 and determine whether any additional items need to be added to the work programme; and

5.3 (b) and note the provisional dates for the 2015/16 municipal year.

6 Background documents¹

6.1 N/A

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.

This page is intentionally left blank

**CORPORATE GOVERNANCE AND AUDIT COMMITTEE
WORK PROGRAMME**

25th June 2015		
Approval of Leeds City Region Accounts	To receive a report requesting approval of the LCC Accounts	Chief Officer (Financial Services) Doug Meeson
Financial Management Arrangements In the Planning and Sustainable Development Service	To receive a report providing assurance in respect of the financial planning arrangements relating to the planning service	Tim Hill (Chief Planning Officer)
Business Continuity Management	To receive a report updating the Committee as to the progress in completing Phase 2 Business Continuity Plans by September 2015.	Mariana Pexton Chief Officer (Strategy and Improvement)
9th July 2015		
Release of Accounts for Public Inspection	To receive a report releasing the Accounts for public inspection.	Chief Officer (Financial Services) Doug Meeson
Internal Audit Charter	To receive a report presenting the Internal Audit Charter to the Committee	(Acting Head Of Internal Audit) Sonya McDonald
Annual Internal Audit	To receive the Annual Internal Audit Report	(Acting Head Of Internal Audit) Sonya McDonald
Annual Report on Performance and Risk Management	To receive a report regarding the Council's risk management arrangements.	(Chief Officer Strategy and Improvement) Mariana Pexton
Internal Audit Update Report	To receive the Internal Audit quarterly report	(Acting Head Of Internal Audit) Sonya McDonald

CORPORATE GOVERNANCE AND AUDIT COMMITTEE WORK PROGRAMME

KPMG – Interim Audit report	To receive the KPMG Interim audit report	Chief Officer (Financial Services) Doug Meeson
Annual Decision Making Report (Including Licensing / Planning)	To receive a report presenting the outcome of the monitoring process relating to decisions taken at the Council	Head of Governance Services Andy Hodson
18th September 2015		
KPMG – Report to Those Charged With Governance	To receive a report giving the opinion on the financial statements, value for money conclusion and audit certificate.	Chief Officer (Financial Services) Doug Meeson
Approval of LCC Accounts	To receive a report requesting approval of the LCC Accounts	Chief Officer (Financial Services) Doug Meeson
Annual Governance Statement	To receive and approve the Annual Governance Statement	Head of Governance Services Andy Hodson
Internal Audit Update Report	To receive the Internal Audit update report	(Acting Head Of Internal Audit) Sonya McDonald
Compliments and complaints Annual summary report	To receive the annual compliment and complaints summary report	Chief Officer (Customer Access) Lee Hemsworth
Annual Financial Management Report (Incorporating Capital)	To receive the annual report reviewing the Financial Planning and Management Arrangements at the Council	Chief Officer (Financial Services) Doug Meeson
Business Continuity Report (Phase 2 Plans)	To receive a report reviewing the Councils Business Continuity planning in relation to Phase 2 Plans	(Chief Officer Strategy and Improvement) Mariana Pexton

CORPORATE GOVERNANCE AND AUDIT COMMITTEE WORK PROGRAMME

28th January 2016		
KPMG – Annual Audit Letter – including opinion	To receive a report certifying grants and returns and to consider the Audit Fee letter.	Chief Officer (Financial Services) Doug Meeson
KPMG – Certification of Grant Claims and Returns	To receive a report certifying grants and returns and to consider the Audit Fee letter.	Chief Officer (Financial Services) Doug Meeson
KPMG – Approval of External Audit Plan	To receive a report requesting approval of the external audit plan	Chief Officer (Financial Services) Doug Meeson
Internal Audit Update Report	To receive the Internal Audit quarterly report	(Acting Head Of Internal Audit) Sonya McDonald
Treasury Management Annual Report	To receive the annual Treasury Management Report providing assurance on the processes used by the department	Chief Officer (Financial Services) Doug Meeson
18th March 2016		
Internal Audit Plan	To receive a report informing the Committee of the Internal Audit Plan for 2016/17	(Acting Head Of Internal Audit) Sonya McDonald
Internal Audit Update Report	To receive the Internal Audit quarterly report	(Acting Head Of Internal Audit) Sonya McDonald
Information Security Annual Report	To receive a report on the Council's Information Security arrangements.	(Chief Officer Strategy and Improvement) Mariana Pexton

**CORPORATE GOVERNANCE AND AUDIT COMMITTEE
WORK PROGRAMME**

Annual Business Continuity Report	To receive the annual report reviewing the Councils Business Continuity planning.	(Chief Officer Strategy and Improvement) Mariana Pexton
Annual Report of the Committee	To receive the Annual report of the Committee reviewing the work completed over the last year	Head of Governance Services Andy Hodson