

Corporate Governance and Audit Committee

Friday, 8th November, 2013

PRESENT: Councillor G Hussain in the Chair
Councillors P Grahame, N Taggart, C Fox,
E Taylor, J Illingworth, J Bentley, J Hardy
and B Anderson (as substitute for R Wood)

Apologies Councillors T Hanley and R Wood

30 Appeals Against Refusal of Inspection of Documents

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

31 Exempt Information - Possible Exclusion of the Press and Public

There were no resolutions to exclude the public.

32 Late Items

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

33 Declaration of Disclosable Pecuniary and Other Interests'

No declarations were made.

34 Apologies

Apologies for absence were received from Councillor R Wood. Councillor B Anderson was in attendance as substitute. Apologies were also received from Councillor T Hanley.

35 Minutes - 20th September 2013

RESOLVED – The minutes of the meeting held on 20th September 2013 were approved as a correct record, subject to minute 25 being amended to reflect Members request that an update on the policies and procedures governing leaving care grants be included in the next Internal Audit update report.

36 Update regarding progress with the development of Business Continuity Plans for LCC's most critical services.

The Business Continuity Programme Manager presented a report submitted by the Deputy Chief Executive. The report provided confirmation to the Committee that the 28 outstanding Business Continuity Plans for LCC's most critical services as reported in July 2013 (Minute No.9 refers) have all been completed and signed-off before the end of September deadline.

Members discussed the types of risks that could potentially cause problems in terms of business continuity such as severe weather, flooding, loss of staff due to industrial action, ICT failure and loss of buildings.

Members considered the monitoring and updating of plans with the Business Continuity Manager and were informed of how this will be managed. Members also felt it was important that any new risks were identified quickly.

The Business Continuity Manager confirmed to Members that services identified as non-critical but which would have an impact on human welfare, the environment or security should they be disrupted, are currently being identified with a view to having business continuity plans developed.

Members also noted that there will be an annual report presented to the Committee in 2014.

RESOLVED – The Committee resolved to note that all 67 of the Council's most critical services reported in July 2013 have Business Continuity Plans in Place.

37 Update - Shared Service Partnership with Calderdale Metropolitan Borough Council to meet Adult Social Care Technology Requirements

The Chief Officer (Resources and Strategy) presented a report of the Director of Adult Social Services which provided an update on the progress of the ASC Systems Review Programme. It informed the Committee of the challenges that have been faced in the last six months and the steps that are being taken to effectively implement and provide effective technology solutions within Adult Social Care.

The Senior Project Manager (Resources) and the Chief ICT Officer of Calderdale Council were also in attendance to answer Members questions.

Members discussed the report in detail and stressed the importance of Leeds needing to have a system in place that could meet the demands of a large council. Calderdale's Chief ICT Officer provided assurance to the Committee that the demands of Leeds would be met by the new system.

Consideration was given to the future with Members commenting that ideally there would be fewer paper files held by social services and that new technology such as the 'Cloud' system could help facilitate this. A note of

caution was expressed in terms of where data would be stored in the future and the need for security in terms of accessibility.

Members discussed the involvement of operational staff in the planning and preparation for the new system and the difficulties that had been encountered in setting up a dedicated social work team to work on the implementation.

Members expressed a wish to be kept informed of the implementation of the project and requested a report be brought to the January meeting of the Committee.

RESOLVED – The Committee resolved to:

- (a) Note the report and the progress that has been made, as well as the challenges that have been encountered; and
- (b) Request to receive a further report on the progress of the programme at the January meeting of the Committee.

38 Office of the Director of Public Health Risk Management Arrangements

To receive a report of the Director of Public Health providing the Committee with assurance that the Office of the Director of Public Health has appropriate Risk Management processes in place and is working closely with colleagues within the Risk Management Unit to ensure that these processes are aligned with the Council's Risk Management Framework, complying fully with the Corporate Risk Management Policy. The report also informed the Committee of the Public Health Clinical Governance arrangements in place within the overall Public Health risk management arrangements.

Members commented that arrangements for the delivery of public health services need to be kept line with the governance arrangements of the Council.

Members discussed the budgetary pressures faced by public health services provided by the Council and how discretionary services will continue to be delivered. Members were informed that the Council has the authority to decide what discretionary services it provides.

Members discussed balancing the competing objectives of meeting the demands of the Health and Social Care Act 2012 and operating within financial constraints of the budget provided to the Council to deliver services.

Members established that decisions for determining what services are provided are taken by the Executive Board.

RESOLVED – the Committee resolved to:

- (a) Acknowledge that further work will be undertaken on Public Health's risk Management arrangements to strengthen these and fully align them to the Council's Risk Management Framework;
- (b) Note the information on Public Health's clinical governance arrangements;
- (c) Note the Public Health Governance Group will provide assurance to the Committee that it has sound Risk Management arrangements in place;
- (d) Agree that the annual report will be presented to the Committee in July 2014; and
- (e) Request a further report to update the Committee on the progress of aligning Public Health's clinical governance arrangements to those maintained by the rest of the Council.

39 Community Asset Transfer Due Diligence

The Community Assets Officer presented a report of the Asset Management Service. The report provided details of the due diligence processes undertaken for community asset transfer projects, particularly around governance, insurance and financial management.

Members discussed the handover process and how this could possibly be completed more quickly. However the importance of undertaking thorough due diligence before any handover was noted.

Members asked about the management of transferring assets and the monitoring that is undertaken after an asset has been transferred.

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

40 Public Sector Internal Audit Standards

The Chief Officer (Audit and Investment) submitted a report of the Deputy Chief Executive. The report informed the Committee of the new Public Sector Internal Audit Standards and provided assurance on compliance with the new standards. It was noted that the new standards apply across the whole public sector; the previous standards being specific to the local government sector. The report also sought approval of the Internal Audit Charter and asked that the Internal Audit Quality Assurance and Improvement Programme required by the Public Sector Internal Audit Standards (PSIAS) be noted.

Members questioned the differences between current practice and the new charter. Members were informed that the principles inherent in the charter were currently documented in Financial Procedure Rules and the Chief Officer (Audit and Investment) highlighted some of the new requirements such as confirmation of organisational independence and compliance with the PSIAS.

Members discussed the different ways that Internal Audit could be provided at the Council. The Chief Officer (Audit and Investment) informed the committee

that there is a statutory requirement for the Council to have an internal audit function but that the Council had discretion on how to deliver that function.

RESOLVED – The Committee resolved to:

- (a) Note the Action Plan attached at Appendix 1 to the submitted report;
- (b) Approve the Internal Audit charter attached at Appendix 2 to the submitted report; and
- (c) Note the Quality Assurance and Improvement programme attached at Appendix 3 to the submitted report.

41 Treasury Management Governance Report 2013

The Chief Officer Audit and Risk presented a report submitted by the Deputy Chief Executive. The report outlined the governance framework for the management of the Council's treasury management function. The report provided a review of compliance with the updated CIPFA guidance notes for practitioners on the Prudential Code for Capital Finance in Local Authorities issued in 2013.

RESOLVED – The Committee resolved to:

- (a) note the assurance provided that Treasury Management continues to adhere to the CIPFA Code of Practice and the Prudential Code;
- (b) note that Treasury Management complies with revised CIPFA guidance notes issues in 2013; and
- (c) note the updated delegations in respect to Treasury Management as outlined at Appendix A to the attached report.

42 Work programme

The City Solicitor submitted a report notifying Members of the work programme.

The Committee reviewed its forthcoming work programme.

RESOLVED - The Committee resolved to note the work programme.