Governance, Risk and Best Value

10am, Tuesday, 14 January 2020

Annual Assurance Schedule – Communities and Families

Executive/routine
Wards
Council Commitments

1.   Recommendations

1.1   To note the Community and Families directorate annual assurance schedule, submitted for scrutiny.

Alistair Gaw

Executive Director for Communities and Families

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Report

Annual Assurance Schedule – Communities and Families

2.   Background

2.1   Each year the City of Edinburgh Council requires that Executive Directors complete Certificates of Assurance that represent their view of the effectiveness and appropriateness of controls in their areas of responsibility. These Certificates support the Annual Governance Statement which is a component part of the authority's Statement of Accounts.

2.2   An Assurance Schedule, to help prompt Executive Directors and relevant Heads of Service to consider various aspects of their control environment, is circulated in advance of Certificates. The schedule will help highlight any areas of concern.

2.3   A review of the process was initiated in response to feedback received in relation to last year's exercise resulting in the implementation of a 'comply or explain' model. The format and design of documentation was also updated to reduce manual administration and implement auto-population of improvement actions. This is designed to help officers to use improvement actions to inform the corporate governance framework self-assessment exercise. The process will continue to be reviewed in line with feedback.

2.4   As at April 2019 the Communities and Families directorate employed:

- CF: FTE 7503 headcount: 9636
- S&C: FTE 493 headcount:511

2.5   The annual Budget for Communities and Families:

2019/20 budget	C&F excl SSC £m	SSC £m	C&F incl SSC £m
Employee budget	319.8	20.5	340.3
Non-staff expenditure budget	111.4	64.9	176.3

Total expenditure budget	431.2	85.4	516.6
Income budget	-45.5	-52.0	-97.5
Net budget	385.7	33.4	419.1

3. Main report

3.1 The Communities and Families schedule (appendix 1) was completed and returned to the Democracy, Governance and Resilience Service, after which a Certificate of Assurance was issued. This informed the drafting of the Annual Governance Statement, submitted to Council as part of the Unaudited Annual Accounts on 27 June 2019.

3.2 The Certificates of Assurance require Heads of Service and Executive Directors to confirm that:

3.3 They have considered the effectiveness of controls in their service area/directorate, including controls in place to mitigate major risks to their service area/directorate's objectives.

3.4 To the best of their knowledge, appropriate controls are in operation upon which they can place reasonable assurance and that there are no significant matters arising that should be raised specifically in the Annual Governance Statement (or otherwise); and

3.5 They have identified actions that will be taken to continue improvement.

3.6 The schedule is completed by the Head of Service/Executive Director or by a nominated senior manager.

3.7 Before signing their Certificate of Assurance, the Head of Service/Executive Director should ensure that the schedule has been completed accurately.

4. Next Steps

4.1 An improvement plan for Communities and Families is attached at appendix two. This includes actions in relation to identified internal control weaknesses. In each instance a responsible officer and a deadline for completion is included.

4.2 The process will continue to be reviewed in line with feedback to ensure that effective assurance is provided.

5. Financial impact

5.1 The annual assurance process and production of the annual governance statement is contained within relevant service area budgets.

6. Stakeholder/Community Impact

6.1 The assurance schedule exercise acts as a prompt for service areas to think about good governance and the internal control environment. Action plans support improvements in areas where weaknesses have been identified.

6.2 Completed schedules are reviewed by the Democracy, Governance and Resilience Senior Manager and are provided to the Chief Internal Auditor for comment.

6.3 The Annual Assurance Schedule template was drafted using input from the Council's subject matter experts. This included contributions from Resilience, Internal Audit, Health and Safety, Governance, Legal Services, Financial Services and Human Resources.

7. Background reading/external references

7.1 City of Edinburgh Council – 27 June 2019 – Unaudited Annual Accounts

8. Appendices

Appendix 1 – Communities and Families Annual Assurance Schedule

Appendix 2 – Communities and Families Action Plan

Appendix 1 2018/19 Communities and Families Schedule of Assurance

Assurance Statement

Ref	Statement	Response	If no, please explain	Actions to be taken
1	**Internal Control Environment**	**Assessment of compliance**	**If not fully compliant, please explain**	**Improvement actions**
1.1	I have internal controls and procedures in place throughout my directorate that are proportionate, robust, monitored and operate effectively.	Partially compliant	**Schools and Lifelong Learning (SLL)** have controls and procedures in place that are proportionate however our ability to fully monitor 23 secondary schools, 88 primary schools, 27 nurseries, 29 libraries, 38 community centres, plus central service teams to ensure controls are robust and operating effectively is limited by available resources and reducing available support from business partners across the Council. SLL operate an annual self-assurance framework which is essentially an annual self-attestation provided by all establishments, confirming the effectiveness of their operating controls, and is performed by completing a 'Survey Monkey' questionnaire, for which comprehensive guidance is provided and updated annually. The framework is aligned with the three lines of defence model and good practice applied in other industries. The framework was recently subject to an internal audit which highlighted weaknesses in the process due to the available support for the framework from second line business areas and partners. SLL establishments reported	**Schools and Lifelong Learning (SLL)** Support is required from second line business partners, who own and manage policies and functions that oversee or specialise in compliance or the management of risk. Support is also required from first line Business Partners who provide services across the establishments.

		on the value of the framework, as completion of the annual questionnaire requires them to be more focused on operational risk and controls; regularly assess the effectiveness of their control environment; and implement new or enhance existing controls in response to new and emerging risks.	

			Children's Services Further work is in progress to develop scorecard and identify new KPI measures	**Children's Services** Complete Scorecard activities, agree KPI's and data capture methods and circulate to interested parties
1.2	I have controls and procedures in place to manage the risks in delivering services through council companies, partners and third parties.	Partially compliant	**SLL** Communities and Families contracts with third parties through a standard set of conditions. Grants to third parties are subject to the Council standard conditions of grant funding. All organisations are required to provide information about service delivery using standard contract or grant monitoring templates . All grant awards have an identified monitoring officer as do contracts however there continues to be a capacity issue to achieve full coverage. There is also an issue of providing ongoing training for these officers. Within Corporate Property the PPP contract management team is responsible for managing the services provided by the two PPP providers and the consequent associated risks. The Council Observer on the Board of Edinburgh Leisure and Service Manager for Lifelong Learning participate in Board meetings but don't vote or make any decisions. Involvement in these meetings allows	**SLL** Ensure staff identified to manage grants and contracts have suitable training.

			the Council to be made aware of any risks and performance of the company. The observer has full access and awareness of company board documentation.	
			Children's Services Some contracts do not have an identified service lead officer to monitor supplier alongside commissioning officer	**Children's Services** Ensure that all contracts have a service area lead officer identified who is clear about role in monitoring supplier.

1.3	My internal controls and procedures and their effectiveness are regularly reviewed and the last review did not identify any weaknesses that could have an impact on the Annual Accounts.	Partially compliant	**Children's Services** Issues found within disability service, home to school transport controls	**Children's Services** Project team set up to redefine policy, guidance and controls
1.4	The monitoring process applied to funding/operating agreements has not identified any problems that could have an impact on Annual or Group Accounts.	Partially compliant	**Children's Services** Issues found within disability service, home to school transport controls	**Children's Services** Working team set up to redefine policy, guidance and controls
2	**Risk and Resilience**	**Assessment of compliance**	**If not fully compliant, please explain**	**Improvement actions**
2.1	I have risk management arrangements in place to identify the key risks to my directorate (and the Council).			
2.2	I have effective controls and procedures in place to record and manage the risks identified above to a tolerable level or actions are put in place to mitigate and manage the risk.	Partially compliant	**Estate & Operational Support** All School Estate Planning projects have detailed risk registers. However an overarching risk register requires to be delivered	**Estate and Operational Support** Develop School Estate Planning Risk Register by 30/6/2-19
2.3	The robustness and effectiveness of my risk management arrangements is regularly reviewed and the last review did not identify any weaknesses that could have an impact on the Annual Accounts	Compliant		
2.4	There is appropriate escalation/communication to the directorate Risk Committee and CLT Risk Committee (as appropriate) of significant issues, risks and weaknesses in risk management.	Compliant		
2.5	I have arrangements in place to promote and support the Council's policies and procedures for staff to raise awareness of risk concerns, Council wrongdoing and officer's misconduct.	Partially compliant	**Operational Support** As 2.2. above	As 2.2. above

| 2.6 | My directorate has appropriate resilience arrangements in place and my directorate's business continuity plans and arrangements mitigate the business continuity risks facing our essential activities. | Partially compliant | **SLL** work closely with our Resilience Business Partner, Kimberley Campbell, and the service area has an annual resilience workplan. Cheryl Buchanan is the Resilience Coordinator and Counterterrorism Coordinator. Resilience deputies are also in place. Building Incident Managers are in place for each staffed SLL establishment and Essential Resilience Training is provided and is included in the staff essential learning matrix.

Business Continuity Plans are regularly reviewed as part of the Business Impact Analysis (BIA) Process.

A Loss of Premises Plan is being worked on but this remains a business continuity risk. | **SLL**
Complete the loss of premises plan with resilience. |

3	Workforce Control	Assessment of compliance	If not fully compliant, please explain	Improvement actions
3.1	I have arrangements in place to ensure workforce resources are managed properly, including compliance with payroll policies, overtime controls, absence management and performance e.g. home/remote working.	Partially compliant	**SLL** Controls are in place for this however changes in the HR structure has resulted in multiple payroll and budget issues for school's devolved budgets particularly around recruitment. Issues are being resolved when they are identified and there are regular meetings between school business managers and HR senior staff	**SLL** HR continue to provide their staff with training and have offered training to new school administration staff with regard to Talentlink and the recruitment process.
3.2	I have robust controls in place to manage off-payroll workers/contractors, including agency workers and consultants, ensuring approved framework contracts have been used and that those engaged are wholly compliant with the provisions of IR35 Council guidance and procedures.	Partially compliant	**SLL** Controls are in place for this. SLL work closely with Contracts and Procurement Services to ensure compliance where individual schools/establishments have engaged with consultants, however the aggregate spend between all C&F establishments over a year means we must engage/contract differently going forward.	**SLL** Continued work with Corporate Procurement Services to identify aggregate spend and contract requirements.
3.3	I ensure that recruitment and selection is only undertaken by appropriately trained individuals and is fully compliant with Council policies and	Compliant		

	procedures, including vacancy approvals and controls.			
3.4	I have robust controls in place to manage new starts, movers and leavers, including induction and mandatory training, IT systems security (access and removal) and access to buildings and service users' homes.	Compliant		
3.5	I have robust controls in place to ensure that statutory workforce requirements are met.	Compliant		
3.6	I have arrangements in place to manage staff health and wellbeing; ensuring that sickness absence, referral to occupational health and stress risk assessments is managed in compliance with the Council's HR policies.	Compliant		
3.7	I ensure compliance with essential training requirements and support learning and development appropriately, including professional CPD requirements.	Partially compliant	**S&SC** Issues with consistency for essential training and learning and development within SSC has been identified within some areas, which prompted the need to review all roles to ensure they were robust and tailored to the need of the postholder and service area.	**S&SC** Working alongside colleagues within Learning and Development, a review of essential training requirements and learning and development for each post within each service area in SSC will be undertaken. Our L&D colleagues will update the Orb pages with a link to requirements for each post within the service. This will be used by managers as a tool for new staff and for reviews with existing staff.

3.8	I have arrangements in place to support and manage staff performance e.g. regular 1:1/supervision meetings, performance/spotlight conversations.	Partially compliant	**SLL** Processes are in place for this and staff/managers are aware of their responsibilities.	**SLL** Work is ongoing to ensure the looking back/forward conversations and meetings between staff and managers are recorded in MyPeople as required.
3.9	I ensure compliance with the Council's HR policies and procedures across all of my service areas.	Partially compliant	**SLL** Controls are in place for this. Compliance with HR policies and procedures is included in the essential learning matrix for all staff groups. However with the number of staff and establishments in Schools and Lifelong Learning as detailed in Q1.1 it is not possible to validate full compliance.	
3.10	I regularly consult and engage with recognised trade unions.	Partially compliant	**S&SC** A more robust schedule of JCC and DJCC meetings is needed	**S&SC** Contact made with Unite and Unison to identify new representatives for SSC as some had left the Council. Meeting schedule proposed in line with C&F DJCC meeting dates to ensure they can feed into these meetings any concerns which require escalation.
4	**Council Companies**	**Assessment of compliance**	**If not fully compliant, please explain**	**Improvement actions**
4.1	I have arrangements in place for the oversight and monitoring of the Council companies I am responsible for, that give me adequate assurance over their operation and delivery for the Council.	Compliant	There are no companies for which **SSC** has responsibility	

		Assessment of compliance	If not fully compliant, please explain	Improvement actions
4.2	I have an appropriate Service Level Agreement, or other appropriate legal agreement, in place for each Arm's Length External Organisation that I am responsible for.	Compliant		
5	**Policy**	**Assessment of compliance**	**If not fully compliant, please explain**	**Improvement actions**
5.1	I have arrangements in place to ensure all directorate staff are made aware of and fully understand the implications of all relevant existing and new council policies and procedures.	Compliant		
5.2	I have arrangements in place for the annual review of policies owned by my directorate, via the relevant executive committee, to ensure these comply with the Council's policy framework.	Partially compliant	**S&SC** Reviewing of service area policy and procedures are not as robust as they could be. An internal audit of CCTV identified the need to review P&P, this is partially complete.	**S&SC** An exercise has been undertaken to compile a list of all policy and procedures, authors, creation dates and review dates and a monitoring pathway put in place. Internal Audit actions are progressing as per deadlines. CCTV P&P have been approved through the appropriate Committee and are being rolled out within the service area.
6	**Governance and Compliance**	**Assessment of compliance**	**If not fully compliant, please explain**	**Improvement actions**
6.1	I ensure directorate staff are aware of their responsibilities in relation to the Council's governance framework and that the authority, responsibility and accountability levels within my directorate are clearly defined, with proper officer designation delegated, recorded, monitored, revoked and reviewed regularly to ensure ongoing compliance with the Scheme of Delegation.	Compliant		
6.2	I ensure my directorate's activities are fully compliant with relevant Scottish, UK and EU legislation and regulations.	Compliant		

7	Information Governance	Assessment of compliance	If not fully compliant, please explain	Improvement actions
7.1	I ensure directorate staff are made aware of their responsibilities in relation to the proper management of Council information, including the need to adhere to relevant legislation, Council policies, procedures and guidance around: information governance; records management; data quality; data breaches and privacy impact assessments; information rights; information compliance; information security; and ICT acceptable use.	Partially compliant	**SLL** Information Governance training is included within the essential learning matrices for staff. Guidance on the changes to information handling following the introduction of GDPR was cascaded to staff and followed up by briefings to staff groups including school business managers etc. A DPIA board has been established to control the use of IT systems and Apps in schools. Work is ongoing to ensure all staff have a solid understanding of their responsibilities.	
7.2	I ensure data sharing arrangements with third parties are recorded, followed and regularly reviewed throughout all service areas in my directorate.	Partially compliant	**SLL** As above	
8	Health and Safety	Assessment of compliance	If not fully compliant, please explain	Improvement actions
8.1	Directorate staff are made aware of their responsibilities under relevant H&S policies and procedures and I have appropriate arrangements in place for the identification and provision of H&S training necessary for all job roles, including induction training.	Partially compliant	**SLL** The guidance notes that accompanies the annual self-assurance questionnaire provides links to all the key health and safety policies and procedures so staff are aware of their general responsibilities however at an operational level we know from the H&S audit reports and the thematic findings highlighted in the quarterly H&S dashboard reports that there are areas of control weakness such as the quality of the risk assessments,	**SLL** Clarification of roles and responsibilities and the implementation of the Service Level Agreement for FM is helping to address areas of weakness but more work needs to be done.

			completion of H&S training, and the recording of statutory inspections.	
8.2	I have the necessary arrangements in place to establish, implement and maintain procedures for ongoing hazard identification, risk assessment and the determination of necessary controls to ensure all H&S risks are adequately controlled.	Partially compliant	**SLL** There are appropriate processes in place to identify and manage risk. A suite of example risk assessments for schools was issued in Aug 2018 to assist schools with this process, although they are still required to make each risk assessment site specific.	**SLL** Within existing C&F resources it is difficult to robustly monitor all establishments and we require the help of business partners across the Council, as the second line of defence, to assist with this work.
8.3	I have competencies, processes and controls in place to ensure that all service areas in my directorate, and other areas of responsibility, operate in compliance with all applicable H&S laws and regulations.	Compliant		
8.4	I have a robust governance and reporting structure for H&S in my directorate.	Compliant		

9	Performance	Assessment of compliance	If not fully compliant, please explain	Improvement actions
9.1	I have arrangements in place for reporting to CLT, Committee and/or Council when performance monitoring identifies inadequate service delivery or poor value for money and ensure that improvement measures to address these issues are implemented and monitored.	Compliant		
9.2	I have appropriate arrangements in place throughout my directorate for recording, monitoring and managing customer service complaints and customer satisfaction.	Compliant		
10	Commercial and Contract Management	Assessment of compliance	If not fully compliant, please explain	Improvement actions
10.1	I ensure all goods, services and works are procured and managed in compliance with the Contract Standing Orders.	Partially compliant	**SLL** Controls are in place for this with individual SLL and CS establishments with devolved budgets comply with Contract Standing Orders. Issues arise where aggregate spend across schools exceeds compliance limits.	
		Partially compliant	**Children's Services** There are still a small number of services being procured that are not compliant or where retrospective waivers are being put in place.	**Children's Services** Commissioning Team to work with Procurement and Commercial Services to identify non-compliant spend and address issues with service area officers as appropriate
11	Change and Project Management	Assessment of compliance	If not fully compliant, please explain	Improvement actions

11.1	All projects and programmes have a clear business justification, as a minimum this should articulate outcomes and benefits; have appropriate governance in place to support delivery; effective controls in place to track delivery progress and to take corrective action if required; have a robust benefits management framework in place; and ensure that a formal closure process is undertaken.	Compliant		
12	**Financial Control**	**Assessment of compliance**	**If not fully compliant, please explain**	**Improvement actions**
12.1	The operation of financial controls in my directorate is effective in ensuring the valid authorisation of financial transactions and maintenance of accurate accounting records.	Compliant		
12.2	I am confident that the arrangements in place to monitor expenditure/budget variances would identify control problems or variances that could have an effect on the Annual Accounts.	Compliant		
12.3	I have arrangements in place to ensure all material commitments and contingent liabilities (i.e. undertakings, past transactions or events resulting in future financial liabilities) are notified to the Chief Financial Officer.	Compliant		
12.4	I have arrangements in place to review and protect assets against theft, loss and unauthorised use; identify any significant losses; and, ensure the adequacy of insurance provision in covering the risk of loss across my directorate.	Compliant		

		Assessment of compliance	If not fully compliant, please explain	Improvement actions
12.5	I have arrangements in place for identifying any weaknesses in my directorate's compliance with Council financial policies or statutory/regulatory requirements.	Partially compliant	**SLL** As detailed in 1.1, SLL operate an annual self-assurance framework in which SLL establishments self-attest to any problems or control weaknesses. As finance and internal audit are not currently undertaking financial audits as a second line of defence, SLL are limited by the resources available to them. However, training and guidance is provided to staff and the finance team support the devolved school budget process in schools, calling out any areas of concern so that immediate action can be taken to control financial risk.	The **SLL** quality improvement team are considering ways to include financial probity as part of their support and challenge in schools.
12.6	I have arrangements in place for identifying any internal control, risk management or asset valuation problems within my directorate's service areas that could affect the Annual Accounts.	Compliant		
13	**Group Accounts (Resources only)**	**Assessment of compliance**	**If not fully compliant, please explain**	**Improvement actions**
13.1	I have arrangements in place for identifying and reviewing any developments during the year that should lead to additions, deletions or amendments to the companies included in the Group Accounts.	Compliant		
13.2	I have arrangements in place to identify and review any internal control, risk management or asset valuation problems with Council companies that could affect the Group Accounts.	Compliant		
14	**National Agency Inspection Reports**	**Assessment of compliance**	**If not fully compliant, please explain**	**Improvement actions**
14.1	I have arrangements in place to identify any reports relating to my directorate and can confirm that there were no inspection reports that could impact	Compliant		

			If not fully compliant, please explain	Improvement actions
	on the signing of the Annual Governance Statement.			
14.2	I have arrangements in place that adequately monitor and report on the implementation of recommendations.	Compliant		
15	**Internal Audit, External Audit and Review Reports**	**Assessment of compliance**	**If not fully compliant, please explain**	**Improvement actions**
15.1	I have arrangements in place to ensure that all recommendations from any internal audit, external audit or review report published during the year, that have highlighted high, medium or significant control deficiencies, have been (or are being) implemented and that this is monitored effectively.	Compliant		
16	**Progress**	**Assessment of compliance**	**If not fully compliant, please explain**	**Improvement actions**
16.1	All outstanding issues or recommendations arising from this exercise, commissioned reviews, committee reports and other initiatives in previous years have been addressed satisfactorily.	Compliant		

Appendix 2 – Communities and Families Action Plans

Action Plan for Partially Compliant - Assurance for the Annual Governance Statement (for the year end 31 March 2019)

Safer and Stronger Communities (SSC) - *Updated 11.11.19*

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Internal Control Environment				
I ensure compliance with essential training requirements and support learning and development appropriately, including professional CPD requirements.	Jackie Irvine	*Working alongside colleagues within Learning and Development, a review of essential training requirements and learning and development for each post within each service area in SSC will be undertaken. Our L&D colleagues will update the Orb pages with a link to requirements for each post within the service. This will be used by managers as a tool for new staff and for reviews with existing staff.*	The review of essential training requirements and learning and development for every SSC post was undertaken. The link to all the Essential Learning spreadsheets for Safer and Stronger Communities is

Safer and Stronger Communities Essential Learning

It is acknowledged that there will need to be amendments over time as services, staff and training needs change. SSC managers are aware of how this can be undertaken.

Managers are aware that they are responsible for ensuring staff are trained in line with the requirements for their post. Induction packs include information and checklists for new starts' essential training, CPD requirements and appropriate learning and development. Line managers include within their looking forward conversations required training and learning and development for the upcoming year. Team meetings include discussions on training and learning and development and bespoke requirements for their team. | June 2019 |

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Internal Control Environment				
I regularly consult and engage with recognised trade unions.	Jackie Irvine	*Contact made with Unite and Unison to identify new representatives for SSC as some had left the Council. Meeting schedule proposed in line with C&F DJCC meeting dates to ensure they can feed into these meetings any concerns which require escalation.*	Union Representatives were identified for SSC and in April 2019, the first SSC JCC meeting took place and a schedule is now in place for quarterly meetings. The meeting schedule was drafted in line with the Communities and Families DJCC to ensure progression is timeously.

Union colleagues meet with the SSC Management Team and Chair or the SSC H&S Working Group regarding Health and Safety quarterly.

Any issues within SSC in relation to Health and Safety are fed in through the H&S Working Group (which union colleagues attend) and escalated to the Communities and Families Health, Safety and Wellbeing Committee. If appropriate these are fed into the Council Health and Safety Group.

A Terms of Reference (TOR) was developed in conjunction with the trade unions which outlined the purpose and schedule for the meetings. In respect of the agenda, it was agreed union members would raise issues with line managers in the first instance. If no satisfactory resolution, these would be escalated to the JCC meeting. | June 2019 |

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Internal Control Environment				
I have arrangements in place for the annual review of policies owned by my service area, via the relevant executive committee, to ensure these comply with the Council's policy framework.	Jackie Irvine	*Reviewing of service area policy and procedures are not as robust as they could be.* *An internal audit of CCTV identified the need to review P&P, this is partially complete.* An exercise has been undertaken to compile a list of all policy and procedures, authors, creation dates and review dates and a monitoring pathway put in place. Internal Audit actions are progressing as per deadlines.	An audit of review dates for all Safer and Stronger Communities (SSC) Policies and Procedures commenced in summer 2019. This resulted in a redesign of the way we monitor and manage our policies and procedures. Our business support team have worked with Senior Managers and work is underway to align all policies and procedures to ensure they are reviewed in accordance with their individual review period. Senior Managers have ensured groups that meet to monitor performance, develop policy, and review policy applications are fit for purpose and undertaking tasks assigned. A new process is in place to ensure authors are given timely reminders of upcoming review dates and sign to say whether P&Ps are still 'live' or 'current'. Communication is sent out to authors (copying in Service and Senior Managers) in advance of the review date with a link to the template CCTV P&P have been approved through the appropriate Committee and are being rolled out within the service area. All Internal Audit actions for CCTV are now completed and closed.	October 2019

Action Plan for Partially Compliant - Assurance for the Annual Governance Statement (for the year end 31 March 2019)

Estate and Operational Control - *Updated 22.11.19*

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Risk and Resilience				
I have effective controls and procedures in place to record and manage the risks identified above to a tolerable level or actions are put in place to mitigate and manage the risk. I have arrangements in place to promote and support the Council's policies and procedures for staff to raise awareness of risk concerns, Council wrongdoing and officer's misconduct.	Crawford McGhie	Complete the risk register.	I can confirm in relation to the partially compliant items at 2.2 and 2.5 that the Learning Estate Planning team risk register has been completed, the improvement actions have therefore been carried out and we are now fully compliant.	November 2019

Action Plan for Partially Compliant - Assurance for the Annual Governance Statement (for the year end 31 March 2019)

Schools, Lifelong Learning and Children's Services

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Internal Control Environment				
I have internal controls and procedures in place throughout my directorate that are proportionate, robust, monitored and operate effectively.	Andy Gray	**Schools and Lifelong Learning** (SLL) Support is required from second line business partners, who own and manage policies and functions that oversee or specialise in compliance or the management of risk. Support is also required from first line Business Partners who provide services across the establishments.	Both service areas work on a continuous basis with Business Partners across the authority with regards to the management of risk (robustness of the internal control environment). Two Operations Managers (Risk) and (Resources) were appointed in May 2019 to support the management of risk in Children's Services/Schools and Lifelong Learning This year meetings have taken place with all Business Partners relating to the Self-Assurance Questionnaire. Andy Gray (Head of Schools and Lifelong Learning) and Michelle McMillan (Operations Manager) have asked that colleagues update questions and validation information in the context of any changes to the risk profile of the Council and service to ensure colleagues have the advice and support they need to manage risk. An example of this is that the 2019/20 questionnaire has additional sections on fire	Ongoing

		safety and playground management. We continue to develop the questionnaire and guidance in a dynamic way annually to ensure we are managing risk through an appropriate supportive control environment.	
	Bernadette Oxley	**Children's Services** Complete Scorecard activities agree KPI's and data capture methods and circulate to interested parties	Strategy and Insight are currently developing Head of Service score cards. Children's Services will be part of this direction when reporting is in place for services ensuring a Council wide approach	

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Internal Control Environment				
I have controls and procedures in place to manage the risks in delivering services through council companies, partners and third parties.	Andy Gray	**SLL** Ensure staff identified to manage grants and contracts have suitable training	Robust approaches to contracts and grant management are being out in place for example through Corporate Procurement where colleagues across the Council are responsible for monitoring. Specific training needs can be undertaken as required.	Ongoing
	Bernadette Oxley	**Children's Services** Ensure that all contracts have a service area lead officer identified who is clear about role in monitoring supplier.	Contracts – we have an interim arrangement in place utilising professional staff. However we need more employee specialist resource to ensure we are monitoring contracts. We have presented a business case and hope to have a contract monitoring officer in place. That person will ensure all those who are monitoring contracts are trained and will keep an oversight of contract monitoring. We are currently looking at essential activities across the service to focus on where assurance on resilience arrangements is required. Advice is required from the Resilience Unit to establish what resilience assurance we should seek to ensure we are part of a council wide approach, so for example we may end up using a contract resilience checklist.	

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Internal Control Environment				
My internal controls and procedures and their effectiveness are regularly reviewed and the last review did not identify any weaknesses that could have an impact on the Annual Accounts	Bernadette Oxley	**Children's Services** Issues found - home to school transport controls	1.3 and 1.4 Home to school transport a new assisted travel policy and guidelines was agreed at the E,C&F Committee on 21 May 2019 and has been implemented. All allocations for individual taxis are now discussed by the new travel allocation panel prior to approval. See: https://democracy.edinburgh.gov.uk/Data/Education,%20Children%20and%20Families%20Committee/20190521/Agenda/item_74_-_assisted_travel_policy_and_guidelines_-_home_to_school.pdf	Ongoing

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Internal Control Environment				
The monitoring process applied to funding/operating agreements has not identified any problems that could have an impact on Annual or Group Accounts.	Bernadette Oxley	**Children's Services** Issues found - home to school transport controls	**Children's Services** Working team set up to redefine policy, guidance and controls	Ongoing

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Risk and Resilience				
My directorate has appropriate resilience arrangements in place and my directorate's business continuity plans and arrangements mitigate the business continuity risks facing our essential activities.	Andy Gray	**SLL** work closely with our Resilience Business Partner, Kimberley Campbell, and the service area has an annual resilience workplan. Michelle McMillan is the Resilience Coordinator and Counterterrorism Coordinator. Resilience deputies are also in place. Building Incident Managers are in place for each staffed SLL establishment and Essential Resilience Training is provided and is included in the staff essential learning matrix. Business Continuity Plans are regularly reviewed as part of the business continuity cycle. A Loss of Premises template is being worked on but this remains a business continuity risk.	**SLL** Completed the loss of premises template with resilience. The Children's Services/Schools and Lifelong learning template is due to roll out in January 2020. Engagement sessions are taking place with School Business managers through Business Manager forums. It is anticipated that templates will be completed and tested by establishments by September 2020. The Resilience Unit and Michelle McMillan Operations Manager who has a responsibility for Resilience Coordination will support establishment colleagues in this.	Ongoing

			A "Buddy Map" used by schools which shows capacity for loss of premises incidents across the school estate is in situ to be used as required. This was updated and shared December 2019.	

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Workforce Control				
I have arrangements in place to ensure workforce resources are managed properly, including compliance with payroll policies, overtime controls, absence management and performance e.g. home/remote working.	Andy Gray	**SLL** Controls are in place for this however changes in the HR structure has resulted in multiple payroll and budget issues for school's devolved budgets particularly around recruitment. Issues are being resolved when they are identified and there are regular meetings between school business managers and HR senior staff	**SLL** HR continue to provide their staff with training and have offered training to new school administration staff with regard to Talentlink and the recruitment process HR training offered and taken up by colleagues on an ongoing basis. SLL are creating a HR Forum for Business Managers which will meet early 2020. This forum will include school business managers as well as colleagues from the HR service. Engagement sessions have been held with Business Managers, and the service is finalising arrangements for quarterly meetings.	**Ongoing**

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Workforce Control				
I have robust controls in place to manage off-payroll workers/contractors, including agency workers and consultants, ensuring approved framework contracts have been used and that those engaged are wholly compliant with the provisions of IR35 Council guidance and procedures	Andy Gray	SLL Controls are in place for this. SLL work closely with Contracts and Procurement Services to ensure compliance where individual schools/establishments have engaged with consultants, however the aggregate spend between all C&F establishments over a year means we must engage/contract differently going forward.	SLL Continued work with Corporate Procurement Services to identify aggregate spend and contract requirements. Procurement facilitate a Procurement Forum that Establishment Managers and the Operations Managers for Schools and Lifelong learning attend on a regular basis. The focus of this meeting is to look at how procurement is managed in terms of risks and opportunities. Risk Matters is available for Procurement colleagues to send key directive messages on how procurement should be managed. The 2019/20 Self Assurance questionnaire has a new section on Procurement with validation information. Procurement colleagues have engaged with headteacher and business manager forums in terms of presenting how they can support and advising on procurement rules (for example waivers). A procurement forum operates quarterly and discusses all aspects of procurement management. Business Managers and Procurement colleagues attend this forum.	**Ongoing**

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Workforce Control				
I have arrangements in place to support and manage staff performance e.g. regular 1:1/supervision meetings, performance/spotlight conversations.	Andy Gray	SLL Processes are in place for this and staff/managers are aware of their responsibilities.	SLL Work is ongoing to ensure the looking back/forward conversations and meetings between staff and managers are recorded in MyPeople as required. Reminders have been sent from Heads of Service within Schools and Lifelong Learning / Children's Services with regards to the importance of recording meetings on MyPeople. Andy Gray has also relayed this message at headteacher/business manager forums. The service is seeking ways to improve for example through regular communication/reminders	**Ongoing**

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Workforce Control				
I ensure compliance with the Council's HR policies and procedures across all of my service areas			SLL Controls are in place for this. Compliance with HR policies and procedures is included in the essential learning matrix for all staff groups. However with the number of staff and establishments in Schools and Lifelong Learning as detailed in Q1.1 it is not possible to validate full compliance.	Ongoing

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Information Governance				
I ensure directorate staff are made aware of their responsibilities in relation to the proper management of Council information, including the need to adhere to relevant legislation, Council policies, procedures and guidance around: information governance; records management; data quality; data breaches and privacy impact assessments; information rights; information compliance; information security; and ICT acceptable use I ensure data sharing arrangements with third parties are recorded, followed and regularly reviewed throughout all service areas in my directorate.		Ensure that all staff understand their information governance roles and responsibilities and support available.	SLL Information Governance training is included within the essential learning matrices for staff. Guidance on the changes to information handling following the introduction of GDPR was cascaded to staff and followed up by briefings to staff groups including school business managers etc. A DPIA board has been established to control the use of IT systems and Apps in schools. Work is ongoing to ensure all staff have a solid understanding of their responsibilities.	Ongoing Ongoing

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Health and Safety				
Directorate staff are made aware of their responsibilities under relevant H&S policies and procedures and I have appropriate arrangements in place for the identification and provision of H&S training necessary for all job roles, including induction training.	Andy Gray	SLL The guidance notes that accompanies the annual self-assurance questionnaire provides links to all the key health and safety policies and procedures so staff are aware of their general responsibilities however at an operational level we know from the H&S audit reports and the thematic findings highlighted in the quarterly H&S dashboard reports that there are areas of control weakness such as the quality of the risk assessments, completion of H&S training, and the recording of statutory inspections.	SLL Clarification of roles and responsibilities and the implementation of the Service Level Agreement for FM is helping to address areas of weakness but more work needs to be done. A cleaning review is currently underway (lead by Corporate Facilities Management) to look at professionalising the service across the city, it is hoped that this will ensure higher levels of standard in terms of cleaning. Regular meetings take place between the service and Facilities Management where discussions on risks/issues and incidents take place. Fortnightly meetings between Schools and Lifelong Learning and Facilities Management are enabling these discussions. If areas of concern are raised with regards to service levels these are taken up directly with Corporate Facilities Management. The self-assurance questionnaire has a section on Facilities Management, this allows colleagues to call out areas where they may feel the service is not adequate, this would be shared with Facilities Management colleagues in terms of improvements required to service.	Ongoing

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Health and Safety				
I have the necessary arrangements in place to establish, implement and maintain procedures for ongoing hazard identification, risk assessment and the determination of necessary controls to ensure all H&S risks are adequately controlled.	Andy Gray	SLL There are appropriate processes in place to identify and manage risk. A suite of example risk assessments for schools was issued in Aug 2018 to assist schools with this process, although they are still required to make each risk assessment site specific.	SLL Within existing C&F resources it is difficult to robustly monitor all establishments and we require the help of business partners across the Council, as the second line of defence, to assist with this work Schools and Lifelong Learning and Children's Services have two Health and Safety Working Groups, one is for schools and the other is for non-schools (meetings are held every 8 weeks). The working groups are the "doing" groups, using the risk management proceed to identify and manage health and safety risks. Communities and Families has a Health, Safety and Wellbeing Committee that meets quarterly, this group approves work carried out within the working groups. This year it has been decided that a main focus for working groups is the development of SHE, the Councils incident management portal and risk assessment and strategies are being developed with Corporate Health and Safety to maintain robust arrangements, another area of focus is Risk Assessment ensuring colleagues know their roles and responsibilities and where guidance is. The self-assurance framework questionnaire includes the questions asked when Corporate	Ongoing

| | | | | Health and Safety undertake establishment audits, using this approach means colleagues in establishments are very clear on what they have to do to manage health and safety and provides an opportunity to "call out" areas where more support may be required.

Risk Matters the risk communication banner used to advise colleagues across the service on risk management is used to send all health and safety advice to establishments. When a Risk Matters is received there is a team talk about it to enable understanding, the Risk Matters also goes in a Risk Matters folder within the establishment and on the health and safety notice board if it is health and safety advice.

The Behaviours of Concern Group chaired by (S&LL Senior Manager - Quality and Curriculum) meets monthly to monitor and manage approaches. This group includes union representation. The annual self-assurance questionnaire now includes a section directing staff to key policies / guidance/ training in the management of pupil behaviour. | |

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Commercial and Contract Management				
I ensure all goods, services and works are procured and managed in compliance with the Contract Standing Orders.	Andy Gray	**SLL** Controls are in place for this with individual SLL and CS establishments with devolved budgets comply with Contract Standing Orders. Issues arise where aggregate spend across schools exceeds compliance limits. **Children's Services** There are still a small number of services being procured that are not compliant or where retrospective waivers are being put in place.	**Children's Services** Commissioning Team to work with Procurement and Commercial Services to identify non-compliant spend and address issues with service area officers as appropriate. 10.1 non-compliant spend – the commissioning team are monitoring this.	Ongoing

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Commercial and Contract Management				
I have arrangements in place for identifying any weaknesses in my directorate's compliance with Council financial policies or statutory/regulatory requirements.	Andy Gray	**SLL** As detailed in 1.1, SLL operate an annual self-assurance framework in which SLL establishments self-attest to any problems or control weaknesses. As finance and internal audit are not currently undertaking financial audits as a second line of defence, SLL are limited by the resources available to them. However, training and guidance is provided to staff and the finance team support the developed school budget process in schools, calling out any areas of concern so that immediate action can be taken to control financial risk. The SLL quality improvement team are considering ways to include financial probity as part of their support and challenge in schools.	A thematic review by QIOs and officers is planned for January 2020 which will examine how schools manage various funding streams including DSM and PEF. This will involve visits to 5 schools and a survey to gather more information. Once complete, analysis will provide clear next steps which will include training, guidance and improved governance	Ongoing

Statement	Action Owner	Improvement Action	Actions Completed	Completion Date
Financial Control				
I have arrangements in place for identifying any weaknesses in my directorate's compliance with Council financial	Andy Gray	**SLL** As detailed in 1.1, SLL operate an annual self-assurance framework in which SLL establishments self-attest to any problems or control weaknesses. As finance and internal	The SLL quality improvement team are considering ways to include financial probity as part of their support and challenge in schools	Ongoing

policies or statutory/regulatory requirements		audit are not currently undertaking financial audits as a second line of defence, SLL are limited by the resources available to them. However, training and guidance is provided to staff and the finance team support the devolved school budget process in schools, calling out any areas of concern so that immediate action can be taken to control financial risk		