

You are requested to attend a meeting of the Corporate Governance Committee to be held in The John Meikle Room, The Deane House, Belvedere Road, Taunton on 15 March 2010 at 18:15.

Agenda

- 1 Apologies.
- 2 Minutes of the meeting of the Corporate Governance Committee held on 10 December 2009 (attached).
- 3 Public Question Time.
- 4 Declaration of Interests
To receive declarations of personal or prejudicial interests, in accordance with the Code of Conduct.
- 5 Standards Committee Annual Report 2009. Report of the Chairman of the Standards Committee (attached)
- 6 Risk Management Update. Report of the Client and Performance Lead (attached)
Reporting Officer: Dan Webb
- 7 Corporate Governance Action Plan. Report of the Client and Performance Lead (attached)
Reporting Officer: Adrian Gladstone-Smith
- 8 Regulation of Investigatory Powers Act 2000. Report of the Legal and Democratic Services Manager (attached)
Reporting Officer: Tonya Meers
- 9 Regulation of Investigatory Powers Act 2000 - Policy . Report of the Legal and Democratic Services Manager. (attached)
Reporting Officer: Tonya Meers
- 10 Member/Officer Protocol. Report of the Legal and Democratic Services Manager (attached)
Reporting Officer: Tonya Meers

- 11 Code of Corporate Governance. Report of the Legal and Democratic Services Manager (attached)
Reporting Officer: Tonya Meers
- 12 Review of Internal Audit Charter. Report of the Group Auditor, South West Audit Partnership (attached)
Reporting Officer: Chris Gunn
- 13 Internal Audit Plan 2010/11. Report of the Group Auditor, South West Audit Partnership (attached)
Reporting Officer: Chris Gunn
- 14 Internal Audit Plan - Progress Review. Report of the Group Auditor, South West Audit Partnership (attached)
Reporting Officer: Chris Gunn
- 15 Health and Safety Update. Presentation by the Health and Safety Advisor
Reporting Officer: David Woodbury
- 16 Forward Plan. Future items for consideration by the Corporate Governance Committee

Tonya Meers
Legal and Democratic Services Manager

10 March 2010

Members of the public are welcome to attend the meeting and listen to the discussions.

There is time set aside at the beginning of most meetings to allow the public to ask questions.

Speaking under “Public Question Time” is limited to 4 minutes per person in an overall period of 15 minutes. The Committee Administrator will keep a close watch on the time and the Chairman will be responsible for ensuring the time permitted does not overrun. The speaker will be allowed to address the Committee once only and will not be allowed to participate further in any debate.

If a member of the public wishes to address the Committee on any matter appearing on the agenda, the Chairman will normally permit this to occur when that item is reached and before the Councillors begin to debate the item.

This is more usual at meetings of the Council’s Planning Committee and details of the “rules” which apply at these meetings can be found in the leaflet “Having Your Say on Planning Applications”. A copy can be obtained free of charge from the Planning Reception Desk at The Deane House or by contacting the telephone number or e-mail address below.

If an item on the agenda is contentious, with a large number of people attending the meeting, a representative should be nominated to present the views of a group.

These arrangements do not apply to exempt (confidential) items on the agenda where any members of the press or public present will be asked to leave the Committee Room.

Full Council, Executive, Committees and Task and Finish Review agendas, reports and minutes are available on our website: www.tauntondeane.gov.uk



Lift access to the John Meikle Room and the other Committee Rooms on the first floor of The Deane House, is available from the main ground floor entrance. Toilet facilities, with wheelchair access, are also available off the landing directly outside the Committee Rooms.



An induction loop operates to enhance sound for anyone wearing a hearing aid or using a transmitter.

For further information about the meeting, please contact Democratic Services on 01823 356382 or email d.durham@tauntondeane.gov.uk

Corporate Governance Committee Members:-

- Councillor B Denington
- Councillor A Govier
- Councillor R Henley - Leader of the Council
- Councillor A Paul
- Councillor M Whitmarsh
- Councillor J Williams
- Councillor A Beaven
- Councillor A Wedderkopp
- Councillor N Wilson
- Councillor J O'Brien
- Councillor P Critchard

Corporate Governance Committee – 10 December 2009

Present: Councillor Williams (Chairman)
Councillors Beaven, Denington, Gaines, Henley, Horsley, Paul,
Stuart-Thorn, A Wedderkopp and Mrs Wilson

Officers: Donna Durham (Democratic Services Officer), Paul Fitzgerald
(Financial Services Manager), Adrian Gladstone-Smith (Acting
Performance and Client Lead), Chris Gunn (Group Auditor, South West
Audit Partnership), Maggie Hammond (Strategic Finance Officer),
Tonya Meers (Legal and Democratic Services Manager), Richard Sealy
(Performance and Client Manager), and David Woodbury (Health and
Safety Advisor)

Also Present: Mr M Allen, Mr B Bethell and Mr T Bowditch (Audit Commission)

Other: Councillor Mullins

(The meeting commenced at 6.15 pm)

38. Apologies/Substitutions

Apologies: Councillors Critchard, Govier and Mrs Whitmarsh

Substitutions: Councillor Horsley for Councillor Critchard
Councillor Gaines for Councillor Mrs Whitmarsh

39. Minutes

The minutes of the meeting held on 30 September 2008 were taken as read and were signed.

40. Declarations of Interest

Councillor Paul declared a personal interest as a Member of Somerset County Council.

41. Regulation of Investigatory Powers Act 2000

Considered report previously circulated, concerning the authorisations that had been granted under the Regulation of Investigatory Powers Act 2000.

The Regulation of Investigatory Powers Act 2000 made provision for the interception of communications, the acquisition and disclosure of data relating to communications, the carrying out of surveillance, the use of covert human intelligence sources and the acquisition of the means by which electronic data protected by encryption or passwords might be decrypted or accessed.

Local Authorities could authorise covert surveillance but needed policies and procedures in place. Covert surveillance would be carried out as a last resort

or if it was thought to be the most appropriate way to gather information.

The Council had officers of sufficient seniority to act as authorising officers and were trained to ensure that the Council used the legislation appropriately.

The Council was inspected every three years by the Office of Surveillance Commissioners and were last inspected on 18 July 2008.

Since the last inspection, no authorisations had been granted under the Regulation of Investigatory Powers Act 2000.

Resolved that the report be noted.

42. Annual Audit and Inspection Letter 2008/2009

Mr Brian Bethell from the Audit Commission introduced Taunton Deane Borough Council's Annual Audit and Inspection Letter.

The report set out an overall summary of the Audit Commission's assessment of the Council. Its findings and conclusions had been drawn from the 2008/2009 audit and from any further inspections undertaken.

The report found that the Council had continued to make progress with the delivery of most of its priorities and had improved the performance of a number of its services.

However, the Council's lack of capacity in some key areas remained a crucial issue. The Core Council Review was likely to be completed and new structures in place by the end of the financial year. The new structures were intended to make the Council more fit for purpose, more efficient and better positioned to deliver its strategic priorities. In the short term, the restructure had caused some disruption to the management and delivery of key corporate services.

The Use of Resources score was 2 and the Council needed to give priority to addressing the weaknesses. An action plan had been agreed to help deliver the improvements.

The progress made with the Southwest One contract had been reviewed, particularly contract management and working with other partners. Amongst the findings, the following were included:

- Taunton Deane Borough Council's management capacity – it was recognised that the Council had the least resources in the partnership;
- Savings – had been modest but were ambitious in future years. Members needed to watch savings closely and ensure that targets were achieved;

- Partnerships – potential for the expansion or development of partnerships was limited due to lack of capacity;
- Audit and Financial Reporting – there had been considerable problems with budget monitoring, but the information was key.

Members were concerned that the Council was still experiencing problems invoicing and asked for an update on the DLO interface to be reported to a future meeting of the Corporate Scrutiny Committee.

Resolved that:

- (1) The areas for further improvement to the Council's arrangements identified through the use of resources judgement be responded to;
- (2) The agreed recommendations from the Audit Commission's Annual Governance Report be implemented; and
- (3) Southwest One's delivery be further monitored, to ensure that benefits realisation and the transformation of services was delivered on time and within budget.

43. Health and Safety Reporting

Mr David Woodbury, the Health and Safety Advisor, presented the Health and Safety Report updating Members on strategic issues including the DLO.

Resolved that the current position be noted.

44. Future of Internal Audit Provision

Considered report previously circulated, concerning the South West Audit Partnership.

The South West Audit Partnership was formed in April 2005 to provide an effective internal audit service to Taunton Deane Borough Council and South Somerset District Council for a period of five years.

Mendip District Council, West Somerset District Council, Sedgemoor District Council, Somerset County Council, Weymouth and Portland Borough Council, West Dorset District Council and Forest of Deane District Council had all since joined the Partnership.

The Partnership operated as a Joint Committee and the current legal agreement between the partners expired on 31 March 2010.

The Council had contributed £20,000 towards the Partnership's start up funding. The final repayment was due from the Partnership this year.

The Partnership's financial performance and business plans were robust and the Partnership had delivered against its performance targets over the first five

years.

The Partnership were drawing up a plan for the next five years and proposed that the Council's fees would remain at the 2009/2010 level of £131,600 for the next five years.

Whilst there were other options available, the Partnership had been successful and delivered the audits planned for the Council.

Resolved that it be agreed that the Council should remain within the South West Audit Partnership for the provision of its internal audit function for the five years commencing 1 April 2010.

45. Corporate Governance Action Plan

Considered report previously circulated, concerning the new Corporate Governance Action Plan.

Each year, the Council received a number of reports and assessments which resulted in recommendations for improvement. Individual action plans had proved challenging to manage and therefore, an aggregated plan would be provided.

The Corporate Governance Action Plan detailed recommendations from the following sources:

- Use of Resources 2008/2009;
- Comprehensive Area Assessment Organisation Assessment 2009;
- Annual Audit and Inspection Letter 2008 and 2009;
- Annual Governance Statement 2008/2009;
- Strategic Housing Review; and
- Partnership Audit.

Failure to implement a number of the recommendations could have a detrimental affect on next years Comprehensive Area Assessment Organisational Score.

Quarterly monitoring was undertaken by the Corporate Management Team and a summary would feature the revised performance monitoring reports commencing in April 2010.

The Corporate Governance Action Plan listed 72 actions which were submitted.

The following items were unlikely to be achieved by the targets dates:

- Corporate Governance – The update of the IT Strategies to ensure that there were clear links from these to financial planning; and
- Equalities and Diversity – The improvement of access to buildings for disabled people.

Other categories where doubts had been expressed about achieving improvement were submitted and these included the following:

- Business Continuity – To address the weaknesses identified by Internal Audit in the Council's disaster recovery arrangements;
- Equalities and Diversity – The collection of data on staff equalities issues and customer feedback on equalities issues, and the consideration of action required to address any issues arising;
- Transformation – (a) Continuing to monitor Southwest One's delivery, to ensure that benefits of realisation and the transformation of services was delivered on time and within budget; (b) The close monitoring of actual savings against profiled targets, with regular reports to Members;
- Value for Money – (a) The use of benchmarking more systematically to challenge service costs and delivery arrangements; (b) Targetting efficiency savings at those areas which currently provided poor value for money compared to other Councils.

Resolved that the report be noted.

46. National Indicator 179 – 2008/2009 Outturn

Considered report previously circulated, concerning the Council's final outturn figures and forecast information for National Indicator 179.

National Indicator 179 superseded the Annual Efficiency Statement in 2008 and was defined as 'the total net value of ongoing cash releasing value for money gains since 2008/2009'.

The Indicator focussed on the value of cashable efficiencies generated by the Council and this fed into the Local Area Agreement.

The Government target for the local authority sector had been increased in 2008 to 3% per annum from 2.5%. Taunton Deane Borough Council had included the indicator within its Local Area Agreement and had stretched its target from 3% of net revenue and capital expenditure to 3.5%. This meant a target for 2008/2009 of just over £700k per annum.

A performance report was submitted to the Executive in June 2009 and reported year gains of £574k, which led to cumulative cashable gains of

£922k. Following audits, this had been reduced in year gains of £494k with ongoing cumulative gains of £842k.

The forecast performance of cumulative gains to be achieved by March 2010 was £884k. This remained on target.

Resolved that the report be noted.

47. Internal Audit Plan 2008/2009 – Progress Report

Considered report previously circulated, which provided an update on the significant findings and recommendations since September 2009.

Details were also reported of the operational audits completed for the period between September and December 2009 which included the main issues raised and the management responses.

Details of the reviews and managed audits currently underway were also provided.

Resolved that the report be noted.

(The meeting ended at 8.17pm)

Declaration of Interests

Corporate Governance Committee

- Members of Somerset County Council – Councillors Govier, Henley and Paul

Taunton Deane Borough Council

Standards Committee – Annual Report 2009

Introduction

The Council's Standards Committee has been in operation since 2000. Although our meetings are open to the public and the minutes are available on the website, we feel it is good practice to produce an annual report so that Councillors and the public are made fully aware of our activities.

Membership

Membership of the Committee stands at 13 Members comprising seven Independent Members, three Parish Council representatives and a Councillor from each of the political groups which form the Borough Council.

We have always ensured that the Committee has a majority of Independent Members. We have also always ensured that the Chairman is chosen from those Independent Members. Although this is now a requirement of all Standards Committees, it is something we have been practising since the Committee's inception.

Anne Elder was re-appointed Chairman of the Standards Committee in July 2009 with Maurice Stanbury re-appointed as Vice-Chairman.

Following his appointment to a new role as the Executive Councillor for Environmental Services, Councillor Tim Slattery, left the Committee in July 2009. His replacement from the Liberal Democrat Group was Councillor Steve Brooks.

Jenny Hoyle, who was one of our Parish representatives, resigned from the Committee also in July 2009. Our thanks go to both Tim and Jenny for their contributions to the work of the Committee over the past couple of years.

The full membership of the Committee is as follows:-

Anne Elder (Chairman)
Maurice Stanbury (Vice-Chairman)
Dick Macey JP
W Lynn Rogers
Alan Cottrell
Peter Malim OBE
Robert Symons

Parish representatives:-
Mike Marshall

David Wilson
One vacancy

Council representatives:-
Councillor Mrs Allgrove
Councillor Brooks
Councillor House

Officer support is provided by Tonya Meers (Monitoring Officer) and Richard Bryant (Democratic Services Manager) and David Greig (Parish Liaison Officer).

Terms of Reference

The Committee's terms of reference remain unchanged, as follows:-

- (a) To advise on the adoption and monitoring of the local Code of Conduct for all Members within the Authority (Borough, Town and Parish Councillors);
- (b) To be responsible for training of all Councillors within the Authority on ethical conduct; and
- (c) To promote and maintain high standards of conduct in the Authority and assist the Authority's Members to observe the Code of Conduct.

Functions of the Committee

In accordance with Section 54 of the Local Government Act 2000, the Committee is responsible for:-

- Promoting and maintaining high standards of conduct by Councillors and co-opted Members;
- Assisting the Councillors and co-opted Members to follow the Code of Conduct;
- Advising the Council on the adoption or revision of the Code of Conduct;
- Monitoring the effectiveness of the Code of Conduct;
- Training or arranging to train Councillors and any co-opted Members on matters relating to the Code of Conduct;
- Assessing and reviewing complaints about Members;
- Conducting Determinations' Hearings;

- Granting dispensations to Councillors and any co-opted Members with prejudicial interests; and
- Granting exemptions for politically restricted posts.

Review of the Year

The Standards Committee

The full Committee has met on six occasions during the year. The operation of the Local Assessment Framework (considered in detail in the next section) has meant meetings of the Assessment, Consideration and Hearing Sub-Committees having to be held to deal with complaints against Councillors. In 2009 a total of 12 sub-committee meetings have had to be arranged.

There have been a wide variety of topics considered by Members over the past 12 months at each main meeting. These have included:-

- (1) Providing a dispensation to Norton Fitzwarren Parish Council to allow its Members, many of whom had a prejudicial interest, to discuss forthcoming development proposals;
- (2) Issuing guidance to Councillors appointed to outside bodies;
- (3) Considering the implications of the Standards Committee (Further Provisions) (England) Regulations 2009 in respect of the suspension of Standards Committee functions in certain circumstances by Standards for England, the ability to form Joint Standards Committees with other Local Authorities and new guidance relating to the granting of dispensations;
- (4) Proposed changes to the Staff Handbook in respect of gifts and hospitality;
- (5) The carrying out of a "health check" on the Council's Ethical Governance Framework;
- (6) Probity in Planning. With regard to this item, the work undertaken by Peter Malim OBE in updating the guidance issued to Members of the Council's Planning Committee is acknowledged with thanks; and
- (7) Regular update reports on the progress being made with the complaints received against Councillors.

Local Assessment Framework

The introduction of the Local Assessment Framework in May 2008 has significantly changed the way in which the Committee now operates.

The framework placed responsibility for the standards agenda right at the heart of Local Government and upon the Members of the local Standards Committee.

Previously, all complaints made against Borough, Town and Parish Councillors in Taunton Deane were made directly to the Standards Board for

England (now called "Standards for England"). The Board would investigate the complaints, decide what action should be taken and what sanctions, if any, should be imposed.

Usually, complaints took many months (if not years) to be investigated. The Government therefore decided that complaints would be better handled by local Standards Committees and introduced The Standards Committee (England) Regulations 2008 to enable this to happen.

The new Regulations require complaints to be assessed, investigated (where appropriate), with the findings then considered to establish if the Code of Conduct has been breached and whether a formal hearing into the complaint should be held. The Standards Committee was also given a range of sanctions which it could impose on a Councillor who was found to have breached the Code.

Standards for England now only provide, support, supervision and guidance. They do however still provide the strategic vision for ethical governance.

As reported last year, a framework for dealing with complaints has been put in place and to ensure complaints are dealt with in a timely fashion, an accompanying flowchart with agreed deadlines has been developed by the Committee. As a result complaints have been dealt with much more efficiently than under the previous arrangement.

The bulk of the work involved in investigating complaints normally falls on the independent Members of the Committee who have to make up two thirds of the sub-committees which have been formed to deal with the various complaint stages.

During 2009, the Committee received a total of six complaints compared with the four which were received between May and December in the previous year. All of these complaints were made in respect of Borough Councillors.

One was withdrawn soon after receipt, whilst the other five were initially considered by an Assessment Sub-Committee comprising Independent Members and an elected Councillor. Three of the complaints were referred for investigation.

One of these complaints was particularly serious involving the mis-use of laptop computers supplied by the Council. When the outcome of the investigation was considered, it was felt the matter was one that could not be properly dealt with locally. The complaint was therefore referred to the Adjudication Panel for England.

A Hearing was subsequently held by the Adjudication Panel for England and the (by this time) ex-Councillor concerned was found to have breached the Code of Conduct and was disqualified from standing as a Councillor for a period of two years.

On the subject of Hearings, a total of three have been held locally during the year. Two resulted from complaints which had first been submitted during

2008. All three resulted in a finding that the Code had been breached and sanctions imposed included censure, the requirement to make an apology and the need for further training.

Where the Assessment Sub-Committee feel a complaint is not appropriate for investigation it has the option of considering whether what is referred to in the Regulations as “Other Action” should be applied. In practice this has resulted in the Councillor concerned being invited to meet up with the Monitoring Officer to receive further guidance in respect of the matter the subject of the complaint or appropriate additional training.

However, it should be noted that where Other Action is deemed to be the best way forward there are no findings of fact or decisions made as to whether there has been a breach of the Code of Conduct.

The Local Assessment Framework, particularly the outcomes of the hearings, has received widespread publicity during the year. In the last Annual Report it was considered that the low number of complaints received was probably due to a combination of Councillors knowing and respecting their obligations under the Code of Conduct and members of the public not yet being fully aware of the new complaints scheme.

Given the publicity that has followed Hearings, the receipt of only six complaints throughout a full 12 month period is very encouraging.

An update on the progress of all complaints is reported to every meeting of the full Standards Committee. As well as monitoring performance, the details provided also enable Members to identify any particular trends emerging.

There is no escaping the fact that the Local Assessment Framework takes considerable time and effort to ensure it is operated properly and the procedures are followed exactly. It is yet another example of a responsibility being placed upon Local Government without any resources being made available to meet the costs of its operation.

Thankfully, the level of complaint in Taunton Deane has been low. However, other authorities have not been so fortunate and dealing with a far higher level of complaints has inevitably led to costs spiralling.

Working with the Town and Parish Councils

The Committee has further developed and strengthened our links with the Town and Parish Councils during the year. This is something we have always aspired to and we consider we have made further progress in this area – a fact recognised during 2009 at national level!

Following the introduction of the new Code of Conduct in 2007, the Committee set out to emphasise to all Parish Councils that standards and the ethics and probity regime were there for the protection of both the Clerk and the Councillors themselves. We also wanted to make all Parish Councils

aware of the advice and support we were able to give them.

Rather than invite representatives of parishes into The Deane House for training sessions, which in the past were never very well supported, the decision was taken to go out to them instead.

The training has been delivered by David Greig, our Parish Liaison Officer and the vast majority of Parish Councillors and Clerks have attended the sessions provided.

This has proved a very worthwhile exercise and it is pleasing to again be able to report that since the introduction of the Local Assessment Framework no complaints against Parish Councillors have been received.

As well as the provision of training, the Independent Members of the Committee also decided to make at least one visit per year to all Parish Councils to maintain the profile of the work of the Standards Committee. These “goodwill” visits have generally been well received by the parishes and it is intended to continue to develop and strengthen this link particularly when the promised revised Code of Conduct is introduced in the coming months.

In April 2009, the Standards Committee was visited by Dr Michael Macaulay and Professor Alan Lawton who had been commissioned by Standards for England to undertake a research project into notable practice in standards.

They were particularly impressed in the way the Standards Committee here at Taunton Deane has developed such good relationships with its Parish Councils and decided to use this as an example of best practice in their final report titled “Assessing the impact of Standards Committees”.

This report was issued nationally prior to the Standards Conference in Birmingham during October. As a result of this recognition, David Greig was invited to attend the Conference as a principal speaker in a debate on “Parish Compacts”.

Both the research project and David’s appearance at the conference have featured in Standards for England’s Annual Report. In addition, Bulletin 47 a very recent document sent to all Standards Committees by Standards for England, highlights and commends the pro-active approach taken by the Authority to maintain liaison with Town and Parish Councils as ‘A Notable Practice’.

Raising the profile of the Standards Committee

Last year it was reported that the Committee was keen to become more proactive and that there were a variety of ideas aimed at raising the Committee’s profile with the Borough Council in the future.

Initial action to include the Members of the Committee in the overall “umbrella” of the Council was taken. This involved simple measures such as supplying

name badges and copies of the Yearbook and Diary to Members and extending invitations to the Committee to attend the Annual Council meeting and other high profile Civic events.

An “away morning” at the Albemarle Centre was arranged in August to enable the independent and Parish representatives on the Committee to find out more about the structure of the Council, to discuss whether the Committee’s terms of reference needed to be altered and to consider how the current relationship with the Council and Councillors could be built upon. This proved to be very successful and something which could be repeated in the future.

It is pleasing to report that the first of what will become regular meetings with the Council’s three Political Group Leaders was held during September.

In addition, arrangements were made for Taunton Deane’s Chief Executive to attend the Committee’s meeting in December where a number of matters were discussed and the possibility of a presentation about the work of the Standards Committee being made to Full Council was explored.

Following the last visits to Parish Councils in the summer, the Independent Members decided that they should make further appearances at formal meetings of the Council aimed at raising the profile of the Committee in the minds of Councillors. Attendance also gave those observing a further opportunity to gain an appreciation of the workings of the Council and its Committees and to see at first hand how Councillors dealt with matters on which they had to declare an interest. During the Autumn, an independent Member has attended at least one meeting of each of the Borough Council’s main Committees

The Committee still feels there is scope to develop our presence on the Taunton Deane website. This is currently being addressed. It is hoped that a regular supply of information to Councillors, the press and the public through the availability of the minutes of meetings and reports in the Weekly Bulletin can also be achieved.

Training

The Committee continues to be conscious of the need for its own Members to be as well trained and as up to date with developments as possible.

We were well represented at both the 5th Annual Assembly of Somerset Standards Committees held over at County Hall in January and at the South West Independent Members Group in Bristol during September where those present were able to hear the views of Dr John Chilton, the Chairman of Standards for England.

In October, two Members of the Committee, the Monitoring Officer, the Democratic Services Manager and the Parish Liaison Officer attended the annual Standards Board for England Conference in Birmingham.

All of these events have allowed us to hear first hand from Standards for England particularly in connection with the Local Assessment Framework and to share good practice with our colleagues. Feedback from the Birmingham Conference was provided to Members and it is likely that some of the new ideas and innovative practice will be implemented during the forthcoming year.

Regular updates on Standards issues are provided by Standards for England which are helpful towards broadening the knowledge of Members of the Committee.

With the introduction of the new Code of Conduct in 2007, training was equally important in relation to our Borough Councillors. Ethics and probity training sessions were provided at the time and refreshers are offered at least on an annual basis. Independent Members have been involved with the Monitoring Officer when delivering these refresher sessions.

The success of this training has been illustrated by the number of enquiries that have been forthcoming from Members and the eagerness to declare interests at meetings.

Resources

Although the Committee's duties have been undertaken to an acceptable level over the past year, there is only so much that can be achieved within the limited resources available to the Committee. In an attempt to spread the workload, Members themselves have taken on various tasks during 2009 to support the officers serving the Committee. However, should the workload increase substantially the Standards Committee must have the ability to seek further resources if we are to deliver our responsibilities fully and effectively.

It is somewhat gratifying that this potential situation was both recognised and acknowledged by the Council's Chief Executive when she attended a meeting of the Standards Committee in December.

Conclusion

Taunton Deane has a Standards Committee that is committed to promoting high standards amongst Councillors both at Borough and Parish levels. We will continue to look at ways in which we, as a Committee, can improve and serve both the Council and the community by delivering an effective service.

Anne Elder
Chairman,
Taunton Deane Standards Committee

Taunton Deane Borough Council

Corporate Governance Committee – 15th March 2010

Risk Management

Report of the Performance & Client Officer

(This matter is the responsibility of Executive Councillor Nicola Wilson)

1. Executive Summary

- 1.1 This report provides an update on progress with Risk Management.
- 1.2 The Risk Management Strategy has received some minor amendments.
- 1.3 The Corporate Risk Register has recently been reviewed and updated by the Corporate Management Team (CMT).
- 1.4 A Risk Management Action Plan is in place to support the delivery of the strategy, and is largely on course.
- 1.5 An internal audit to assess the adequacy of controls and procedures in place for risk management was undertaken in January 2010. The Audit opinion offers *“reasonable assurance as most of the areas reviewed were found to be adequately controlled”*.

2. Purpose of Report

- 2.1 The purpose of this report is to update the Committee on the following Risk Management issues:
 - Revisions to the Risk Management Strategy since its approval by the Committee and adoption in May 2009.
 - A status report on the Risk Management Action Plan
 - The current Corporate Risk Register
 - A summary of the findings and recommendations following an internal audit of Risk Management arrangements

3. Background

3.1 Introduction

Risk Management is the process by which risks are identified, evaluated and controlled and is one of the key elements of the Corporate Governance framework.

3.2 Definition

Risk management is an important element of management and in planning and providing the safe delivery of economic, efficient, and effective Council services. It is recognised as an integral part of good management practice. To be most effective, risk management should become part of the Council's culture. It should be part of the philosophy, practices and service planning rather than viewed as a separate initiative. When this is achieved, risk management becomes the business of everyone in the organisation and therefore embedded.

3.3 Roles and responsibilities

3.3.1 The role of the Corporate Governance Committee

The Corporate Governance Committee is responsible for monitoring the corporate governance of the authority. It will receive regular reports on way risk is being managed in the authority.

Member's key tasks in relation to Risk Management are:

- Approving the Risk Management Strategy and implementation plan.
- Monitoring the effectiveness of the Council's risk management and internal control arrangements.
- Reviewing the Corporate Risk Register

3.3.2 The role of the Performance & Client Team

The Theme Manager for Performance and Client will be responsible to CMT for:

- Ensuring that risk management is embedded throughout the authority
- Ensuring that Corporate Risks are reviewed by CMT on a 6 monthly basis
- Ensuring services adequately manage risk and follow the corporate standard
- Assistance, advice and training
- Reporting to the Corporate Governance Committee on the management of risk
- Reporting concerns to the Chief Executive or CMT as appropriate
- Annually reviewing the risk management strategy
- Keeping abreast of developments in the field of Risk Management and identifying and implementing best practice

4. Report

4.1 Where are we now?

Recent progress in implementing Risk Management is as follows:

- the Risk Management Strategy has been updated and approved by CMT
- a new Risk Management Action Plan has been produced and approved by CMT
- the Corporate Management Team (CMT) has reviewed the Corporate Risk Register (January and February 2010)

- A recent Internal Audit of Risk Management has been undertaken
- An annual risk reporting and management cycle has been documented and is being implemented and monitored
- A revised Risk Register and guidance notes have been included in the service plan template

4.2 Risk Management Strategy

The latest Risk Management Strategy was approved by the Corporate Governance Committee 18th May 2009. Following a review of the Strategy by the Performance & Client Officer, the following amendments have been made:

- Risk Assessment scoring matrix changed to a 5x5 system (was previously a 4x4 scoring system)
- Responsible Officers updated as a result of the Core Council Review
- New quarterly Theme Managers meeting to identify and control operational risks

The Risk Management Strategy was approved by CMT in January 2010

4.3 Risk Management Action Plan

The Risk Management action plan has been updated to take into account Strategy changes and the key recommendations arising from the internal audit in January 2010. Please refer to **Appendix A**.

The Risk Management Action Plan contains 28 actions. Progress against the target dates has revealed the following:

Completed ☺	On Target ☺	Some Concern ☹	Off Target ☹
13	12	3	0

The categories where doubts have been expressed about achieving improvement **by the target dates** are as follows:

- Review risk management arrangements with major partners
- Audit risk management status in partnerships
- Audit risk management status in projects

Please note - for the purpose of risk management, CMT has defined that the term “Partnerships” refers to the three major partner organisations, namely: Southwest One; Tone Leisure; Somerset Waste Partnership.

4.4 Corporate Risk Register

Following the regular review cycle, the Corporate Risk Register has been streamlined and updated by CMT during January and February 2010.

A copy of the current Corporate Risk Register can be found in **Appendix B**. It is recommended that the Committee review the risks and control measures, making particular note of the high risk areas, identified by a score of 15 or higher.

4.5 Internal Audit Report

As part of the 2009/10 audit plan a review was carried out in January 2010 to assess the adequacy of controls and procedures in place for risk management.

The conclusion and audit opinion states:

“I am able to offer reasonable assurance as most of the areas reviewed were found to be adequately controlled. Generally risks are well managed but some systems require the introduction or improvement of internal controls to ensure the achievement of their objectives”.

Recommendations arising from this audit have been included within the Risk Management Action Plan (Appendix A).

5. Effect on Corporate Priorities

5.1 As this report covers the Council-wide approach to managing risk, all Corporate Priorities are affected

6. Recommendation

- 6.1 It is recommended that the Corporate Governance Committee
- Review the Corporate Risk Register
 - Note progress with Risk Management, the Internal Audit review and the actions planned

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TDBC RISK MANAGEMENT ACTION PLAN

February 2010

(Appendix A)

Item	Action	Responsible Person	Date for completion /review	Status	Notes
1	Review and Revise Risk Management Strategy, policy and procedure	SA/AGS	March 09	Completed	Use External Consultants Quintin Associates Ltd (QAL)
2	Harmonise methodology as far as practicable with Main partners	SA/AGS	March 09	Completed	Research Somerset CC methodology
3	Formally review Corporate Risk Register	CMT	Completion - March 09	Risk identification and assessment complete	Some MAPS to be completed
			6 month review – November 2009	Completed	CMT 18/1/10, and final review 15/2/10
4	Review how Risk management can be embedded in service planning and throughout the authority	DW / AGS	By April 10	ongoing	Service planning Jan – April 2010. New templates designed
5	CMT to approve revised Risk Management Strategy, policy & procedure, action plan, and confirm individual ownership of areas of risk	CMT	By Jan 2010	Complete	Approved CMT 18/1/10
6	Review link between Risk Management and Performance Management	AGS	From Dec 09	Complete	DW responsible from Dec 09

Item	Action	Responsible Person	Date for completion /review	Status	Notes
7	To review status of Risk Management within partnerships and revise as necessary	SA	March 09	Completed	Liaise with External Consultants (QAL)
8	Research new "Use of Resources" KLOES and identify Best Practice	CMT		Completed	Liaise with External Consultants (QAL)
	Consider UoR level to aim for ('getting basics right', or 'performing well')		Jan 2010	Completed	KLOE 2.4 guidance summarised
9	To Review status of Risk management within Projects and Programme Management and revise if necessary	SA		Completed	Liaise with External Consultants (QAL)
10	Train CMT in new system	SA		Completed	Use External Consultants (QAL)
11	Train CCM in new system	AGS/JB		Completed	Use External Consultants (QAL)
12	Train Corporate Governance Committee in new system	Tonya Meers	March 09	Phase 1 completed	Use External Consultants (QAL)
13	Review Risk Management arrangements with major Partners (NB – priority is for Cliented partners, ie: Southwest One; Tone Leisure; Somerset Waste Partnership)	Richard Sealy	March 10	Planned by end March 10	

Item	Action	Responsible Person	Date for completion /review	Status	Notes
14	Audit Risk Management status in Partnerships	Richard Sealy	March 10	Planned by end March 10	
15	Audit Risk Management status in Projects (NB – ref Corporate Scorecard)	CMT	March 10	Planned by end March 10	
16	Make Risk Management Strategy, Policy & Procedures available to all staff and other persons working on behalf of TDBC	DW	March 10		To be added to new Performance Sharepoint site, and Core Brief
17	Decision on Joint Risk Management Panel / Safety Committee	CMT	March 10	Complete	CMT decision (Jan 10) not to reinstate
18	Ensure all Themes / Services produce Risk Registers and Management Action Plans consistently adopting the agreed process & using revised template	DW	Theme 1 - Mar 10 Theme 2 – June 10		Performance Team to assist Managers with Service Plans & audit
19	Annual review of Risk management Strategy & Policy	CMT	April 2010	Complete	
20	Annual reappraisal of corporate risk register (strategic risks)	CMT	May 2010		
21	6 month review of corporate risk register	CMT	November 2010		
22	Theme / Service risk registers included within Service Plans	Theme Managers	Theme 1 - Mar 10 Theme 2 – June 10		

Item	Action	Responsible Person	Date for completion /review	Status	Notes
23	Theme Managers quarterly review of all service level risks (operational risks) & escalate to CMT if appropriate	Theme Managers	28 th April 2010 19 th July 2010 18 th September 10 17 th January 2011		New meetings now scheduled
24	Theme / Service risk registers – 6 month peer review	Theme Managers	September 2010		
25	Quarterly RM report to Corporate Governance Committee	DW	15 March, 28 June, 30 September, 20 December		
26	Annual internal audit of risk management arrangements – create action plan from findings	DW	January 2010		Audit report & action plan received 28/1/10
27	On-going training & development in risk management to enhance knowledge and implement best practice <ul style="list-style-type: none"> - Attendance to ALARM regional meetings & workshops - Visit other authorities / Risk Managers 	DW & LP	ALARM meetings: Jan, April, July, Sept, November		DW & LP attended ALARM meeting 22/1/10 DW to plan visit to SW ALARM chair (Pete Osborne)
28	Research RM software products & complete costs & benefits analysis	DW	April 10		DW to visit Pam Pursley (SCC)

Risk No.	Risk & descriptions	Responsible CMT Member	Consequences	Pre Control Impact	Pre Control Probability	Score	Control Measures	Post Control Impact	Post Control Probability	Score	Date identified	Status	Comments
1	Change Programme does not achieve objectives and the organisation has no obvious Plan B	Penny James	<ul style="list-style-type: none"> * Organisation not fit for purpose, and cannot meet the demands of the Government in terms of community engagement and place shaping. * Organisation has no sustainable MTFP, negative impact on Use of Resources assessment. * Organisation unable to identify & capture tangible benefits. * Organisation unable to deliver projected benefits (may impact on quality of service delivery &/or MTFP) 	Major	Very Likely	20	<ul style="list-style-type: none"> * Dedicated Risk Register for Projects * Regular communication with Members – CCR Member Steering Group, Maintaining dialogue, Good quality Member input, External speakers 	Significant	Feasible	9	Feb-10	Open	
	a) Core Council Review does not deliver												
	b) Organisation does not drive benefits realisation of change projects (leadership)												
	c) Members do not embrace the changes and resist proposals												
2	Failure to manage the growth agenda	Joy Wishlade / Tim Burton	<ul style="list-style-type: none"> * Loss of external funding * Reputation damaged - CAA * Inappropriate development (in the wrong places) * TDBC becomes a dormitory region - with residents working and finding recreational activities outside of the Deane * Local economy does not develop - lack of quality jobs created / redundancies * Transport infrastructure becomes more gridlocked * TDBC will not be able to compete with other regions in terms of attracting business growth 	Major	Very Likely	20	<ul style="list-style-type: none"> * Effective project management of LDF * Member engagement by LDF Steering Group * Good member involvement, with economic downturn - risk not as great * Project Plans in place. * Talking to HCA and developers. * Managing the community's expectations/communications strategy 	Significant	Feasible	9	Feb-10	Open	
	a) Failure to deliver a sound Core Strategy within reasonable timescales												
	b) Negative impact on managing performance and reputation with GOSW and RDA. Potential impact on use of resources												
	c) Unsustainable development proposals permitted due to lack of 5 year land supply												
	d) Community resist growth agenda												
	e) TDBC organisationally is not resourced to support this growth and the place shaping agenda												
3	Failure of Performance Management process to alert to Performance Issues	Richard Sealy	<ul style="list-style-type: none"> * Council's strategic objectives are not met. * Poor service delivery or management of services is not identified quickly. * Inefficient/waste of resources 	Significant	Likely	12	<ul style="list-style-type: none"> * New Performance Management framework * Data Quality Strategy & action plan * Risk Management Strategy & action plan * Corporate Governance Action Plan 	Significant	Slight	6	Feb-10	Open	
	a) Data is inaccurate, incomplete or out-of-date												
	b) Reporting style and cycle no longer fit for purpose												
	c) Partnership performance not included												
	d) Risk Management culture not embedded												
	e) Compliance with Corporate Requirements is patchy												
4	Failure to address the corporate aims ('TRAC')	Penny James		Major	Likely	16		Significant	Feasible	9	Feb-10	Open	
	a) Tackling Deprivation & Sustainable Community Development - Failure to produce coherent programme / lack of strategic vision & planning to address/mitigate deprivation - Lack of awareness (outside of 2 areas in Taunton) of the other "rising hotspots" within the Deane												
	b) Regeneration - Failure to produce coherent strategy and delivery plan												
	c) Affordable Housing - Failure to produce coherent strategy and delivery plan												
	d) Climate Change - Failure to have coherent programme to address impact of climate change - No plans in place to reduce carbon footprint of the organisation or the community - Failure to gain LSP partners' support												
	e) Failure to effectively deploy resources to deliver priorities (capacity) - Insufficient resources to meet expectations - Inappropriate use of resources												
5	Failure to agree sustainable MTFP that delivers Corporate Strategy (General Fund and Housing)	Shirlene Adam / Maggie Hammond	<ul style="list-style-type: none"> * Potential budget shortfall in 2011/12 * Potential adverse impact on Council's limited reserves (and financial standing score in UoR). * Potential negative Reserve Forecast * Unable to deliver priority projects * Until this figure is known the gaps to close are 	Major	Very Likely	20	Action plan to be developed	Major	Feasible	12	Feb-10	Open	
	a) Insufficient capital resources to fund Corporate Strategy objectives												
	b) Impact of Project Taunton on revenue streams from car parks to be resolved												

**Corporate
Risk
Register**

(Appendix B)

Name Taunton Deane BC
Version Date 25/02/2010
Version No. REV 1

Risk No.	Risk & descriptions	Responsible CMT Member	Consequences	Pre Control Impact	Pre Control Probability	Score	Control Measures	Post Control Impact	Post Control Probability	Score	Date identified	Status	Comments
						0				0			

GUIDANCE FOR USING RISK REGISTER

Step	Action	Column
1	Allocate a Risk Number to each risk identified	1
2	Record the risk	2
3	Identify the potential consequences of the risk	4
4	Describe the risk (this may have more than one element)	5
5	Insert the Corporate Priority attached to the risk	6
6	Click on the box in column 7 a drop down box will appear. Select the potential impact that the risk could lead to if uncontrolled	7
7	Repeat in column 8 selecting the probability of the risk being realised if uncontrolled	8
8	The uncontrolled risk score will be automatically generated in column 9	9
9	Repeat steps 6 & 7 taking into account the proposed control measures	10&11
10	The controlled risk score will now be automatically generated in column 12	12
11	Identify the control measures to be put in place	13
12	Identify the level where the risk will be managed	14
13	Identify and insert the responsible CMT member	3
14	Insert the date the risk was identified	15
15	Insert risk status eg open /closed transferred etc	16
16	Insert any comments	17
17	Collate the risks for each responsible person and copy them onto the individual Management Action Plans (MAPs)	MAPs

PROBABILITY (A) (Likelihood)	5 Very Likely	5	10	15	20	25
	4 Likely	4	8	12	16	20
	3 Feasible	3	6	9	12	15
	2 Slight	2	4	6	8	10
	1 Very Unlikely	1	2	3	4	5
		1	2	3	4	5
	Insignificant	Minor	Significant	Major	Critical	
	IMPACT (B) (Consequence)					

Corporate Governance Committee – 15 March 2010

Corporate Governance Action Plan

Report of Client and Performance Lead

(This matter is the responsibility of Executive Councillor Nicola Wilson)

Executive Summary

This report shows progress against the Corporate Governance Action Plan.

1. Purpose of Report

1.1 This report provides details of progress against the Corporate Governance Action Plan. The Corporate Governance Committee of 10 December 2009, requested quarterly updates to enable Members to monitor progress against the corporate actions mainly recommended by the external auditor.

2. Background

2.1 Each year, the Council receives a number of reports and assessments which result in recommendations for improvement. These normally contain individual action plans which can prove challenging to manage and monitor. Therefore an aggregated plan provides the Council with details, in one place, of the scale of improvements required and progress against them.

2.2 The Corporate Governance Action Plan details the recommendations from the following sources:

- Use of Resources 2008/09 (issued Dec 09)
- CAA Organisation Assessment 2009 (issued Dec 09)
- Annual Audit and Inspection Letter 2008 and 2009
- Annual Governance Statement 2008/09 (Mar 09)
- Strategic Housing Review (when finalised in Dec 09)
- Partnership Audit (Sept 09)

2.3 Members are aware that failure to implement a number of the recommendations could have a detrimental affect on the Comprehensive Area Assessment (CAA) Organisational score.

2.4 Monitoring is undertaken quarterly by CMT and a summary features in the new Performance Scorecard.

3. Progress

3.1 The Corporate Governance Action Plan lists 68 actions. Please see Appendix A. Progress monitoring against implementation by the target dates has revealed the following:

Completed 😊	On Target 😊	Some Concern 😐	Off Target 😞
11 (16%)	49 (73%)	8 (11%)	0

3.2 Good progress has been made since the last update as there are now no items off target and fewer where concerns exist. This rate of implementation demonstrates that the Council is generally moving in the right direction in respect of its governance arrangements. Obviously any consequences on the implementation of SAP may change this view.

3.3 The categories where doubts have been expressed about achieving improvement **by the target dates** are as follows:

Business Continuity

- Address the weaknesses identified by Internal Audit in the Council's disaster recovery arrangements

Corporate Governance

- Health check on ethical governance framework
- Fully review constitution

Equalities & Diversity

- Improve access to buildings for disabled people

Transformation

- Continue to monitor Southwest One's delivery, to ensure that benefits realisation and the transformation of services is delivered on time and within budget

Value for Money

- Use benchmarking more systematically to challenge service costs and delivery arrangements
- Target efficiency savings at those areas which currently provide poor value for money (vfm) compared to other councils

Workforce Planning

- Prepare an up to date workforce plan

4. Recommendations

4.1 It is recommended that Members scrutinise progress of the Corporate Governance Action Plan.

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CORPORATE GOVERNANCE ACTION PLAN 2009-10												
APPENDIX A												
As at February 2010												
Item	Improvement / recommendation	Activities planned	Category	Priority (H,M,L)	Target date	Lead Officer	Source	Ref	Success criteria	Progress	As at (date)	Status
A1	To formulate plans for service delivery in the loss of facilities following on from the plans developed in the event of Pandemic flu	Further work on loss of facilities. Completion of o/s pandemic plans and revision of corporate plan	Business continuity	H	Mar-10	John Lewis	Annual Governance Statement		Plans in place & tested	The majority of Pandemic Flu plans have been received. The two outstanding ones are due to internal restructuring issues. Some work has commenced on loss of facilities.	Feb-10	
A2	Address the weaknesses identified by Internal Audit in the Council's disaster recovery arrangements.	Discussion with SW1 re contractual activities	Business continuity	H	Mar-10	John Lewis	UoR 2008-09 (Draft Sept 09)	R25	Plans in place	IT Disaster Recovery Plan will be provided by Southwest One, as a development of the provisions existing within each of the Partner organizations, but benefiting from economies of scale. The Plan will reflect the business critical priority given to each service by the Partners. Plans are due from SW1 by March.	Feb-10	
A3	Ensure there is an up to date generic corporate business continuity plan and service level plans, and test these at least annually.	Continuation of plan preparation activities	Business continuity	H	Mar-10	John Lewis	UoR 2008-09 (Draft Sept 09)	R26	Plans in place & tested	The generic corporate business continuity plan for the pandemic scenario is currently being updated, following completion of revised service plans. Work has commenced on 'loss of facility' scenario planning and a draft generic corporate plan will be complete by March 2010. This will need to reflect the current restructuring of services envisaged by the Core Council Review. The parameters and timetable for testing will be an integral part of the plan.	Feb-10	
B1	To ensure that the Code of Corporate Governance is publicized internally and externally and regularly monitored to ensure that the Council is complying with it	Publicise & monitor the code	Corporate governance	L	Mar-10	Tonya Meers	Annual Governance Statement		Documents published	The booklet has now been printed in TDBC style guide and the principles will be reviewed by CMT to ensure that we are complying with the principles and that there is a co-ordinated link up with corporate governance action plan.	Feb-10	
B2	To carry out a health check on the Council's ethical governance framework	Letter and questionnaire to be sent to all members and senior officers. Results to be assessed by the Standards committee with a view to arranging workshops to cover any gaps in knowledge for members	Corporate governance	M	Dec-09	Tonya Meers	Annual Governance Statement		50% return rate on questionnaires and good attendance at subsequent workshops.	Standards Committee will be agreeing the letter and questionnaire to be sent out on the 9th December 2009. The questionnaire and letter has been approved by the Standards Committee and the Monitoring Officer is in the process of organising its release.	Feb-10	
B3	Change of the audit plan to include Governance, Fraud, and Corruption	Review what is currently in place	Corporate governance	H		Chris Gunn	Annual Governance Statement			This is now within the 2009/10 Audit Plan. All SWAP partners have included a standard range of Governance type reviews will allow partners to share best practice in terms of governance. SWAP intends to pick up on Fraud Controls as part of the annual managed audits of the Council's key financial systems.	Sep-09	Completed
B4	To further strengthen the Scrutiny function	To implement the new structure	Corporate governance	H	May-09	Tonya Meers	Annual Governance Statement			The new structure came into effect following Annual Council on 13 th May 2009. The new Scrutiny Officer took up her post in May 2009.	Sep-09	Completed
		To produce an annual report	Corporate governance	M	Jun-10	Tonya Meers	Annual Governance Statement		Completion of the report	The report is currently being prepared and will be going to the Scrutiny Committees in January/February 2010.	Feb-10	
		To implement recommendations of the IDeA peer review	Corporate governance	M	Jun-10	Tonya Meers	Annual Governance Statement			Some of the recommendations contained in the IDeA Report have now been implemented – changing our structure was one of the main ones. Other recommendations outstanding will be introduced at the appropriate time. Further work is currently being undertaken on this at the moment.	Feb-10	
B5	To take Health & Safety forward	Highlight priority issues	Corporate governance	H		David Woodbury	Annual Governance Statement			Issues have been highlighted to CMT for action.	Sep-09	Completed
		Increase knowledge and performance within the Council. Review and implement the H & S action plan	Corporate governance	H	as per 2009/10 H & S plan	David Woodbury	Annual Governance Statement		An up-to-date H & S action plan being delivered	The Health and Safety module of SAP is due to be implemented in 2010. Cllr Wilson identified as H & S Champion within Executive. H&S Forward Plan currently 15% completed and further progress will happen once the Core Council Review is in place and managers start to risk assess their responsibilities. Winter Working policy is currently out for consultation and expected to be an agenda item for CCM shortly. Ten harmonised policies will be ready for consultation by end of March 2010. Continuing high levels of corporate support is being provided by the H&S Advisor and these demands are likely to reduce end of February 2010, allowing time to be spent on the health and Safety policies and procedures and delivery of in-house training	Feb-10	
B6	To develop the Council's Asset Management arrangements	Asset Management Plan draft by mid Dec. Present AMP to CMT (Feb), to Scrutiny (March), and Exec (April)	Corporate governance	H	Apr-10	Alison North - Mark Halligan/Trevor Miles (SW1)	Annual Governance Statement		Successful AMP monitoring and governance, and aligned to TDBC needs	The SW1 Property Service has worked in conjunction with the Performance & Client Team and have implemented a new Asset Management planning and review process. AMP process has been designed and agreed. AMP working group has been formed. AMP draft is commencing the approval process: CMT 15 Feb and Asset Management Group on 26 Feb. Final approval will follow Scrutiny and Executive meetings in the new financial year. Monitoring of Asset Management arrangements is reported in the corporate performance scorecard as from Quarter 3 2009/10	Feb-10	
B7	To fully review the Constitution during 2008/09	To complete the review of the constitution	Corporate governance	H	Dec-09	Tonya Meers	Annual Governance Statement		Publication of an updated constitution	Large sections of the constitution have been approved during the last year and the aim is to complete it by the end of this year. Work is almost complete but it will not be completed by the end of December 2009. In addition further work will still need to be done in light of the core council review.	Feb-10	

Corporate Action Plan 2009-10

Item	Improvement / recommendation	Activities planned	Category	Priority (H,M,L)	Target date	Lead Officer	Source	Ref	Success criteria	Progress	As at (date)	Status
B8	Update the IT Strategies and ensure there are clear links from these to financial planning.	Establish an IT work group	Corporate governance	H	Mar-10	Alison North; & SW1	UoR 2008-09 (Draft Sept 09)	R1	Fit for purpose IT strategy	ICT Strategy is currently being produced by SW1 in consultation with services which will align for all partner organisations. Future reviews will be aligned with the MTFP and service planning processes. The is on course for the target date..	Feb-10	
B9	Update the Workforce Strategies and ensure there are clear links from these to financial planning.	Workforce strategy - see actions in L2	Corporate governance	H	tbc	Martin Griffin; & IT (SW1)	UoR 2008-09 (Draft Sept 09)	R1	Fit for purpose Workforce Development Plan - refer to L2	Workforce strategy – Ownership issues to be resolved (TDBC / SW1)	Feb-10	
B10	Update the procurement strategy to bring it in line with current practices.	To be drafted by SW1 then signed off by partners	Corporate governance	H	Dec-09	Paul Harding	UoR 2008-09 (Draft Sept 09)	R12	A new procurement strategy will be adopted	Draft strategy received from SW One, consultation took place with stakeholders and 2nd draft expected end Feb 2010 before final version available toward end March 2010	Feb-10	
B11	Use the local Code of Governance to drive improvements in governance arrangements.	To prepare a list of activities that are necessary from the local code if they have not already been done.	Corporate governance	M	Apr-10	Tonya Meers	UoR 2008-09 (Draft Sept 09)	R19		TDBC adopted 'Code of Corporate Governance' framework and use 'Annual Governance Statement' to create an action plan. (2008-09 saw many changes to staffing, committees & Local Assessment process)	Feb-10	
B12	The Standards Committee needs to adopt a more proactive role in promoting ethical behaviour.		Corporate governance	M	6 monthly review of Forward Plan (next due March 10)	Tonya Meers	UoR 2008-09 (Draft Sept 09)	R20		We are monitoring savings fortnightly, and a presentation on progress on procurement transformation was given to Change Programme Member Steering Group by Paul Harding on 27/01/10 and this has been uploaded to the members portal. Ian Connor the Chief Procurement officer of SW One will be presenting a paper on procurement transformation progress on 18th February 2010. Paul Harding and Stuart Busfield (of the SW One procurement team) have a regular slot at CMT to report progress on procurement transformation. Feedback from annual Assembly informs Forward Plan (on website). Progress being made, eg Members 'away day' training, updated protocol, forward plan for training etc. Independent members are now attending more TDBC committee meetings to raise their profile and awareness. Members of the Standards Committee will also work with the MO to carry out training and member briefings on ethical governance issues again to raise their profile and for them to be seen as proactive in their approach.	Feb-10	
B13	The Corporate Governance Committee should have a clear role in following up progress in addressing key weaknesses identified in audit reports and the Annual Governance Statement.	Produce Corporate Governance Action Plan. Report quarterly on progress to Corp Govn Committee	Corporate governance	M	Oct-09	Adrian Gladstone-Smith	UoR 2008-09 (Draft Sept 09)	R23	Key weaknesses managed and addressed	Actions identified to address key weaknesses are now included and managed via the Corporate Governance Action Plan. Progress against these actions is reported to CMT and Corp Governance Ctee on a quarterly basis. Reported to CMT on 16 Dec 09 and Corporate Governance Ctee on 10 Dec 09. Next due CMT on 1 March and CG Ctee 15 March.	Feb-10	
C1	Implement the agreed action plan from the Auditors Data Quality Review	DQ strategy being reviewed & updated	Data Quality	H	Nov-09	Adrian Gladstone-Smith	AAIL 07/08 (March 2009) / UoR 2008-09 (Draft Sept 09)	Para 8 / R15	Implementation of Audit recommendations	External Auditors recommendations have been implemented (one in progress)	Feb-10	
C2	Identify how progress in implementing the Data quality Strategy will be monitored.	Monitoring by Performance Team & quarterly reporting to CMT & Corporate Governance Committee	Data Quality	M	Nov-09	Adrian Gladstone-Smith	UoR 2008-09 (Draft Sept 09)	R16	Established monitoring & reporting framework - CMT and Corporate Governance Committee fully aware of progress	Actions identified to address key weaknesses including DQ are included and managed via the Corporate Governance Action Plan. Progress against these actions is reported to CMT and Corp Governance Ctee on a quarterly basis (see B13 above). Reported to CMT on 16 Dec 09 and Corporate Governance Ctee on 10 Dec 09. Next due CMT on 1 March and CG Ctee 15 March. Further monitoring via quality of performance data received. Members feedback. E-Learning module being rolled out. Covered in Service Planning training and member training. DQ Strategy updated annually. Responsibility of Performance & Client to embed in organisation. Training in DQ also part of Organisational Development Plan.	Feb-10	
C3	Ensure there are effective quality assurance arrangements in place for the production of all the national indicators and all those local indicators used by the Council to support delivery of its local priorities.	Confirm NI & LPI owners list. Send reminders to owners re Audit Commission guidelines & any recent updates. DQ Proformas to be completed for year end (April 10)	Data Quality	H	Nov-09	Adrian Gladstone-Smith	UoR 2008-09 (Draft Sept 09)	R17	All PI owners established, and understand & follow AC guidelines	Is being achieved through delivery of the DQ Strategy and the Performance Team working closely with NI 'owners' to support them in accurately monitoring & reporting their NIs. NI's proformas will be required for 2009/10 with greater assistance and compliance. The Performance & Client Officer attends regular meetings with the Somerset performance Officers Group (SPOG) where NIS updates are provided and cascaded through organisation.	Feb-10	
C4	Implement the agreed action plan from the internal audit report on its spot checks on a sample of national indicators.	Recommendations from Audit report to be implemented - Performance Team to confirm	Data Quality	H	Nov-09	Adrian Gladstone-Smith	UoR 2008-09 (Draft Sept 09)	R18	PIs being calculated correctly in line with AC guidance	Audit reports & recommendations for NI 155 & 179 sent to responsible Officers. Compliance has been reviewed and now understood.	Feb-10	
D1	Do more to enhance the Council's approach to Equalities and Diversity	- Training for staff & members - Build into service planning - Build into Comms / Reports - Achieve level of EFLG	Equalities & diversity	H	On-going	Simon Lewis / Lisa Redston	AAIL 07/08 (March 2009) CAA Organisational Assessment	Para 8	All staff & members trained. Target levels for EFLG standard achieved. E & D embedded within service planning, & all council comms & reports	Raising profile of E and D through Members briefings, and Council communications. Theme Manager and Leads training on EIAs in March. Theme Manager training on developing Equality Action Plans. Equality Action Plans embedded in Service Planning Process. Rolling staff training being developed with SW1. EFLG audit carried out. Revised CES produced for 2010-2013 objectives to mainstream E and D throughout services and aligned with EFLG requirements. Revised and raised profile of Translation procedure.	Feb-10	
D2	Bring the equalities and needs assessment work up to date.	Completion of Equalities Impact Assessments (core council & SW1). Community profiling work including deprivation, age profiling etc	Equalities & diversity	M	Mar-10	Simon Lewis / Lisa Redston	UoR 2008-09 (Draft Sept 09)	R9	All policies, strategies & service areas to have Equalities Impact Assessments in place	Commissioned IODA to train Managers and Leads on Equality Impact Assessments. EIA's are embedded within project planning processes (DLO, Core Strategy Consultation) Updated 13 EIA's completed in 2006. Completed 5 new EIA's. Developed forward programme of EIA's for 2010/2011. Took part in PSI pilot through SWREIP developed aligned processes with partner LAs in Somerset to carry out joint EIAs. Supporting SW1 to complete EIAs.	Feb-10	

Corporate Action Plan 2009-10

Item	Improvement / recommendation	Activities planned	Category	Priority (H,M,L)	Target date	Lead Officer	Source	Ref	Success criteria	Progress	As at (date)	Status
D3	Ensure that outcomes from equality impact assessments are reflected in decision-making.	Ensure they are within all Exec reports by Jan 2010. Training for officers in providing equalities info in reporting. Reports to be quality checked for equalities impact prior to final submission	Equalities & diversity	M	Jan-10	Simon Lewis / Lisa Redston	UoR 2008-09 (Draft Sept 09)	R10	All decisions consider equality impact assessments	Commissioned Consultant to work with Theme Leads to develop and embed Equality Action Plans into Service Plans (17/3/2010) to inform service delivery. Process developed to ensure EIAs in included in all Scrutiny/Exec reports. Senior management buy in to quality check and reject reports without EIAs, Member champions engaged.	Feb-10	
D4	Collect data on staff equalities issues and customer feedback on equalities issues, and consider action required to address any issues arising.	Customer feedback & complaints to be monitored & acted upon	Equalities & diversity	M	Customer feedback - quarterly; Staff Profile - Jan to Mar 10	Simon Lewis / Lisa Redston	UoR 2008-09 (Draft Sept 09)	R29	Staff and customer equalities data collected, and actions required considered to address issues arising	Engaging regularly with T D Disability Group and Forum for E and D in Somerset through funding and joint SLAs. Engaging with other Equality groups (Polish Association, GRT forum). Working with SIP to develop community profiles using equality data. Developed standard customer equalities monitoring forms for attendance at events, consultation responses satisfaction surveys, data to be used in EAP process/EIAs Working with retained HR to design and implement the Staff Satisfaction Survey and Workforce Strategy with E and D in mind. Equalities consultation database developed.	Feb-10	
D5	Improve access to buildings for disabled people	TDBC Building Control to provide SWOne with status reports. SWOne to produce programme and cost. TDBC to approve.	Equalities & diversity	H	Apr-10	Helen Acreman SWOne	CAA Organisational Assessment		Buildings compliant with DDA regs	SWOne are awaiting revised reports from TDBC building control before they can establish a programme of works with associated costs for approval by the Council. In the meantime any refurbishment or maintenance undertaken will consider DDA needs and incorporate these where possible	Feb-10	
E1	Review its accounting closure processes, and the resources provided to support these processes, to reduce the risk of material and other errors occurring within the financial statements presented to members for approval		Managing finances	H		Maggie hammond / SW1	AAIL 07/08 (March 2009)	Para 8				Completed
E2	To review the operation of the internal controls governing the processing of Payroll data in light of the installation of SAP	Internal audit looking at SAP internal controls	Managing finances	H	Jan-10	Maggie Hammond	Annual Governance Statement		Controls reviewed	A meeting has been set up for 7 th October to begin the review of internal controls. Internal audit have nearly completed their audit of SAP this will include payroll controls. Even though the date has slipped I am still happy to keep this green.	Feb-10	
E3	To fully review the Financial regulations	To complete review of the financial regulations	Managing finances	H	Mar-10	Maggie Hammond	Annual Governance Statement		A new financial regs document produced	The financial regulations have been partial reviewed but they need to reflect the improved control brought about by the introduction of SAP. This piece of work has been give to Ian Jamieson the current Deputy S151 to complete by 31st Mar	Feb-10	
E4	To ensure that the SW1 action plan, in response to the closure of the 2008/09 accounts is followed		Managing finances	H	Sep-09	Maggie Hammond	Annual Governance Statement			The action plan was implemented. The audit of the 2008/09 is still ongoing but no major/material issues have been identified.	Sep-09	Completed
E5	Provide greater focus on the medium term when preparing and setting the annual budget.	To seek advice from Exec on whether they support resourcing medium-term budgeting	Managing finances	H	Jul-10	Maggie Hammond	UoR 2008-09 (Draft Sept 09)	R2	Focus on medium term when budget setting	Will be reviewed during budget setting for 2011/12	Feb-10	
E6	Ensure there is adequate public consultation as part of the preparation of the annual budget.	Simon & Maggie to agree consultation process for next years budget	Managing finances	M	Sep - Oct 10	Simon Lewis / Maggie Hammond	UoR 2008-09 (Draft Sept 09)	R3	Public consulted during budget setting process	Will be reviewed during budget setting for 2011/12	Feb-10	
E7	Ensure that the Council's policy on levels of balances is supported by a robust financial analysis of the Council's key risks.	Prepare report for Scrutiny Jan 10	Managing finances	M	Mar-10	Maggie Hammond	UoR 2008-09 (Draft Sept 09)	R4	Balances supported by robust financial analysis of key risks	The GF Reserve minimum balance has been calculated on a risk basis.	Feb-10	
E8	Establish stronger links between financial and performance monitoring.	Review performance management arrangements & monitoring reports	Managing finances	M	Jan-10	Adrian Gladstone-Smith / Maggie Hammond	UoR 2008-09 (Draft Sept 09)	R7	Robust links between Finance & performance	Performance management framework agreed. Performance reporting arrangements reviewed with new Scorecard introduced in Q3. Improves links with Financial Performance. Member Training 14 & 25 Jan 10	Feb-10	
E9	Review a sample of journals processed in 2009/10		Managing finances	H	Mar-10	Maggie Hammond	AAIL 2008/09 (Dec 09)	Para 11 & 12	Sample checks done in current year	A SAP report is provide each month for the Financial Services Manager and Principal Accountant to review. These details are being held on file and I hope to review these in March 2010	Feb-10	
E9	Ensure that the accounts closure process is adequately resourced.		Managing finances	H	Apr 09 - Mar 10	Maggie hammond / Emily Collocott	UoR 2008-09 (Draft Sept 09)	R8		Should no longer be a problem	Oct-09	Completed
E10	Ensure there are up to date procedure notes and manuals for all the key financial systems.		Managing finances	M	n/a	Maggie Hammond	UoR 2008-09 (Draft Sept 09)	R24		Resolved with the introduction of SAP	Oct-09	Completed
F1	To review the Corporate Governance arrangements in relation to partnership working	To be put onto a future scrutiny agenda.	Partnerships	M	Apr-10	Tonya Meers	Annual Governance Statement		Report back to O&S	To be decided by the Co-ordinating scrutiny committee. An audit has just been carried out on partnership arrangements and there is a meeting with Tonya Meers/Brendan Cleere and Adrian Gladstone Smith to review that. A decision will then need to be made as to how this will be tackled.	Feb-10	
		Guidance to be produced to members when they sit on outside bodies.	Partnerships	M	May-09	Tonya Meers	Annual Governance Statement			The guidance went through the Standards Committee on 15 th April 2009 and was signed by Alan Wedderkopp and reported through the Weekly Bulletin. An electronic version of the guidance has been circulated to all members. In due course this will be followed up at a Member's Briefing and reinforced by the distribution of a hard copy of the guidance too.	Sep-09	Completed
		Training for members on the guidance	Partnerships	M	Apr-10	Tonya Meers	Annual Governance Statement		Members briefing	The approved guidance will be followed by a Member's Briefing and reinforced by the distribution of a hard copy of the guidance this will be done following the Task and Finish review	Feb-10	

Corporate Action Plan 2009-10

Item	Improvement / recommendation	Activities planned	Category	Priority (H,M,L)	Target date	Lead Officer	Source	Ref	Success criteria	Progress	As at (date)	Status
F2	Ensure that Councillors are kept fully informed of any significant contract issues as the arise and that appropriate action is taken to address any shortcomings. Contract monitoring and management, and the realisation of the expected benefits from the contract, remain a high priority	As part of our general restructuring of our Performance Monitoring processes we will be reviewing & enhancing the processes that currently exist for reporting on our key partnerships (SW1, SWP, Tone Leisure & SWAP). The aim is to have a consistent, appropriate & regular reporting mechanism for all partnerships.	Partnerships	H	Mar-10	Richard Sealy	AAIL 08/09 (Dec 2009)	Para 41	Mechanism in place for regular reporting to members	Pre-existing regular reporting mechanisms are already in place in respect of the SWP, Tone Leisure & SWAP partnerships. We are in the process of enhancing the PIs to be monitored & reported in respect of Tone Leisure. We are introducing new performance monitoring arrangements for SW1 which will include 6-monthly reporting to members led by SW1. Progress against the transformation projects continues to be monitored fortnightly by the Members Steering Group. Additional high level reporting on key partnerships & trans projects is included within the quarterly monitoring reports to senior management & members.	Feb-10	
F3	Compile a register and regularly review authority's partnerships	1. Compile comprehensive partnership register. 2. Confirm involvement and they meet authority's aims and objectives. 3. Introduce protocol for establishing membership prior to commitment. 4. Establish framework and categorisation of partnerships. 5. Widen scope of Members Task & Finish Group re membership on outside bodies	Partnerships	M	Sep-10	Tonya Meers	SWAP Partnership Arrangements Audit (Sept 09)		Partnerships adequately controlled and managed	Members Task and Finish group to be formed in new year.	Feb-10	
F5	Improve robustness of SWOne clienting arrangements for monitoring the SWOne contract.	1. CCR to restructure and commit more resources. 2. Appoint staff. 3. Review robustness of clienting arrangements. 4. Identify & agree with the SCC & ASP Client teams areas for improving joint working arrangements	Partnerships	H	Mar-10	Alison North	AAIL 08/09 (Dec 09) verbal update at CG Ctee 10 Dec 09		SWOne partnership adequately controlled and managed and with other partners	1. CCR Restructure of Theme 1 complete. 2. Vacancies filled. 3/4. The partnership management framework has been reviewed (CMT 1 Feb 10) for the key partnerships including SWOne, Tone Leisure and SWP. In respect of SWOne significant progress has been made: TDBC have produced a joint work plan, including SCC, to more proactively manage the contract and service delivery. Joining the Police with this plan is currently being investigated. Additional specialist resources are being used to client ICT (SCC Client), which will be formalised in new financial year. Obtaining client Property expertise is being investigated. Performance management has been reviewed resulting in monthly meetings being streamlined and more focussed on delivery.	Feb-10	
G1	Review the arrangements for use of resources in the context of the new framework for 2008/09		Performance	M		Richard Sealy	AAIL 07/08 (March 2009)	Para 8		Draft UoR Audit report received Sept 09	Sep-09	Completed
G2	Performance Management and review of partnerships are being strengthened through the Strategy & Corporate theme	Workshops planned with 2 key partners (Tone Leisure, & SWP) to discuss the formalising of new performance monitoring arrangements. Partnership audit report received - action plan to be agreed	Performance	H	Mar-10	Richard Sealy	Annual Governance Statement		Appropriate performance framework and measures in place	See F2; F5; G4	Feb-10	
G3	To implement improvements following the external auditors use of resources assessment 2007/08		Performance	H		Richard Sealy	Annual Governance Statement			Improvements have been made on the statement of accounts which affect the use of resources score.	Sep-09	Completed
G4	Provide more focus on partnerships in the quarterly performance monitoring reports.	New performance Scorecard to be agreed with CMT & Members by Jan 10	Performance	H	Mar-10	Adrian Gladstone-Smith	UoR 2008-09 (Draft Sept 09)	R14	CMT & Members have up-to-date key performance information on all partnerships	We are currently implementing new corporate performance reporting processes which will include mechanisms for reporting on the various key partnerships. Corporate Scorecard also contains a section on key partnerships.	Feb-10	
G5	Provide members with regular reports which allow them to assess how well the Council's major risks are being managed.	2009 Risk Management Strategy action plan being reviewed and updated. Risk management to be embedded including reporting to Members (Corporate Governance Committee)	Performance	H	Mar-10	Adrian Gladstone-Smith	UoR 2008-09 (Draft Sept 09)	R21	An up-to-date Corporate Risk Management Strategy & Risk Register is maintained, and regularly monitored for progress against key mitigation actions to prevent major risks being realised	Risk Management Action Plan was updated and discussed with CMT 18/1/10. Revisions to the current Risk Management Strategy were also agreed by CMT and the corporate risk register was refreshed. Corporate Governance Committee will receive a risk management report 15/3/10, and at each quarterly meeting	Feb-10	
G6	Identify reporting arrangements in respect of service risk registers, and establish a monitoring arrangement to ensure these are regularly updated.	2009 Risk Management Strategy action plan being reviewed and updated. Risk management to be embedded including Service monitoring arrangements	Performance	H	Jan-10	Adrian Gladstone-Smith	UoR 2008-09 (Draft Sept 09)	R22	Up-to-date Service Risk Registers are maintained and regularly monitored for progress against key mitigation actions to prevent major risks being realised	Theme / Service Managers have been issued a new template for service planning 2010-11 which includes a standard risk register template. These are due for completion by end March 2010 (Theme 1) or end June 2010 (Themes 2 & 4). The Performance Team will ensure these are completed consistently and in compliance with the risk management policies and guidance. Theme / Service risk registers will be monitored and reviewed at quarterly Theme Manager meetings as agreed at CMT on 18 Jan 2010 and with Theme Managers group 9th Feb. An internal audit on risk management was conducted in Jan/Feb 2010 and concluded that "risk management controls offer 'reasonable assurance' as most areas reviewed were found to be adequately controlled. Generally risks are well managed ...". The recommendations are currently being agreed and will be incorporated in the authority's overall risk management plan.	Feb-10	
G7	Improve performance management: monitoring arrangements; challenging and tackling poor performance.	Implement new performance framework	Performance	H	Apr-10	Adrian Gladstone-Smith	CAA Organisational Assessment		Create a performance culture that ensures the Council is focussed on delivering its priorities, knows where it must improve & provides excellent value for money	The new corporate performance management process has been agreed by Corporate Scrutiny and the Executive. Details require finalising and will be fully implemented by 1 Apr 2010. New Monitoring report (Scorecard) introduced ahead of schedule in Q3 2009/10. Senior Officer and member Training also undertaken. See details of Scrutiny action from Q2 monitoring reports. Long debate on performance and request for further detailed reports on two areas of under performance: staff absence and sundry debtors collection.	Feb-10	

Item	Improvement / recommendation	Activities planned	Category	Priority (H,M,L)	Target date	Lead Officer	Source	Ref	Success criteria	Progress	As at (date)	Status
H1	To finalize the Risk Management strategy and embed processes to ensure it's fit for purpose	To finalise the strategy (refer to G5 & G6)	Risk management	H	Mar-10	Adrian Gladstone-Smith	Annual Governance Statement		Ref G5	A consultant was commissioned in 2009 to take forward Risk Management within the organization. This has resulted in a revised Risk Management Strategy and new corporate Risk Register with CMT action. Recent work has also been undertaken to further improve Risk Management in the Council and an updated strategy & action plan was agreed by CMT 18-1-10 and is now in place for 2010. Key risk management reviews are contained within the RM Strategy and summarised in a Risk management Annual Cycle, which is monitored by the Performance & Client Officer and reported to the Corporate Governance Committee. Within the Performance & Client team the Insurance Officer has been identified as an additional resource and specialist expertise in helping services improve risk management arrangements. An internal audit on risk management was conducted in Jan/Feb 2010 and concluded that "risk management controls offer 'reasonable assurance' as most areas reviewed were found to be adequately controlled. Generally risks are well managed". The recommendations are currently being agreed and will be incorporated in the	Feb-10	
I1	Ensure that the Council maintains focus on continued improvement of services for citizens during the forthcoming period of structural change	Performance management framework improvements, including monitoring reports, service planning, & VFM / benchmarking	Service improvement	H	Sep-10	Penny James	AAIL 07/08 (March 2009)	Para 8	Services continue to improve	The new corporate performance management process has been agreed by Corporate Scrutiny and the Executive. Details require finalising and will be fully implemented by 1 Apr 2010. Service Planning process has been agreed with CMT with new template produced with completion deadline of end March 10. We are currently investigating the most effective means of undertaking benchmarking with a view to building regular benchmarking into our new corporate performance management processes.	Feb-10	
I2	Continue to address issues relating to housing	As per Housing Report	Service improvement	H	Various	Martin Daly	AAIL 07/08 (March 2009) CAA Organisational Assessment	Para 8		Final version of Audit Commission "Critical Friend" Housing Inspection Report published December 2009. Since then, Improvement Project Team has met 6 times, produced a draft performance management framework, timetabled key improvements, and started to assemble evidence base to inform strategy work.	Feb-10	
I3	Ensure that the programme of service reviews covers all service areas.	Corporately - to identify those services which may require VFM analysis (Corporate Strategy). With Somerset Councils, identify and benchmark poor value services. Examine Audit Commission findings re poor VFM services identified	Service improvement	M	Jan-10	Richard Sealy	UoR 2008-09 (Draft Sept 09)	R11	An understanding of the VFM of all services	VFM work for TDBC being undertaken by SCC. This together with the AC's annual profiles will provide a basis for further detailed reporting on most services. In the meantime the Somerset Performance Officers Group (SPOG) are examining 3 services for benchmarking. Planning is one of them which was identified by the AC as an area of low VFM.	Feb-10	
I4	Address speed of determining smaller planning applications	On-going monitoring	Service Improvement	H		Tim Burton	CAA Organisational Assessment		Planning performance targets met	Improvement from 65.2% in 2007-08 to 75% in 2008-09. Government targets were met. Further improvement shown in 2009/10 Quarter 2 results = 83%	Nov-09	Completed
I5	Reduce carbon emissions at Deane House	Various initiatives	Service Improvement	H	Mar-10	Kevin Toller	CAA Organisational Assessment		Co2 reduction	Action plan agreed by Scrutiny April 09 - actions being implemented. TDBC committed to 10:10 campaign and carbon neutral aspiration. Updated carbon reduction plan to be presented to Scrutiny and Executive for approval during March 2010.	Feb-10	
J1	To ensure the Council realizes some benefits from the transformation projects, Pioneer Somerset and SW1.	Ensure there is adequate risk management system in place to ensure that the governance arrangements are fit for purpose	Transformation	H	Mar-10	Richard Sealy / Kevin Toller	Annual Governance Statement		Benefits realised	There is a process in place to monitor the savings resultant from the Procurement Transformation project. A benefits tracking tool has been designed in connection with the SAP transformation projects. This will be implemented once all of the SAP implementation is complete. The Lead officer for Transformation within the Performance & Client team started in October and will focus specifically on realizing the benefits from the transformation projects. The Pioneer Somerset project has now been disbanded, but the principles of cross-authority partnership working are being taken forward by the Chief Execs	Feb-10	
J2	Continue to monitor Southwest One's delivery, to ensure that benefits realisation and the transformation of services is delivered on time and within budget	Implementing a Benefits tracking Tool to monitor progress against Transformation Project	Transformation	H	Mar-10	Paul Harding	AAIL 07/08 (March 2009)	Para 8	Regular monitoring & reporting. Tracking tool used and updated	There are regular SW One performance reports. The Benefits Tracking Tool is available to be populated. Require engagement from SW One in process and commercial sensitivities to be overcome in order that relevant metrics can be captured.	Feb-10	
J3	Closely monitor actual savings against profiled targets, and report regularly to Members	Determine the appropriate audience / forum for monitoring reports	Transformation	H	Mar-10	Paul Harding	AAIL 08/09 (Dec 2010)	Para 37	Reports produced for members	We are monitoring savings fortnightly, and a presentation on progress on procurement transformation was given to Change Programme Member Steering Group by Paul Harding on 27/01/10 and this has been uploaded to the members portal. Ian Connor the Chief Procurement officer of SW One will be presenting a paper on procurement transformation progress on 18th February 2010. Paul Harding and Stuart Busfield (of the SW One procurement team) have a regular slot at CMT to report progress on procurement transformation.	Feb-10	
K1	Use benchmarking more systematically to challenge service costs and delivery arrangements.	Benchmarking analysis	Value for money	H	Mar-10	Adrian Gladstone-Smith	UoR 2008-09 (Draft Sept 09)	R5	Better understanding of relative service performance and cost	We are currently investigating the most effective means of undertaking benchmarking with a view to building regular benchmarking into our new corporate performance management processes following the Council reorganisation which has significantly forced service cut backs in non priority areas. In the meantime we have commissioned SCC to undertake VFM analysis which will shortly be considered by CMT. The Somerset Performance Officers Group have identified 3 services where further detailed benchmarking is required. TDBC were consulted in the selection.	Feb-10	
K2	Target efficiency savings at those areas which currently provide poor vfm compared to other councils.	Benchmarking analysis	Value for money	H	Jun-10	Maggie Hammond / Adrian Gladstone-Smith	UoR 2008-09 (Draft Sept 09)	R6	Better value for money	This will flow from the benchmarking exercise although services have been reorganised and further cut both in 2009/10 and 2010/11.	Feb-10	

Item	Improvement / recommendation	Activities planned	Category	Priority (H,M,L)	Target date	Lead Officer	Source	Ref	Success criteria	Progress	As at (date)	Status
K3	Reduce costs of planning and council tax collection services	Council restructure re Planning	Value for money	H	Mar-10	Brendan Cleere	CAA Organisational Assessment		Lower costs of service	Planning costs will reduce following the Core Council Review. Council Tax Collection is part of the SWOne contract and the charge for these services reduces annually. A more detailed examination will be undertaken as part of the VFM/Benchmarking review.	Feb-10	
L1	To complete the Core Council Review and thematic working	1. Recruitment to new posts in themes 2 and 4 2.) Selection of a preferred future business model for DLO services. 3) Thematic working OD plan agreed and being implemented	Workforce planning	H	Mar-10	Brendan Cleere	Annual Governance Statement		To contribute to the aims of the CCR of making significant efficiency savings and enabling the Council to address its corporate priorities	Proposals for themes 2 and 4 have been agreed and recruitment activity is now under way. Turner and Townsend will bring recommendations on a future business model for the DLO in January 2010 (Corp Scrutiny)	Feb-10	
L2	Prepare an up to date workforce plan.	1.Planning Meeting on 24/11/09 2.Outline Plan to CMT by 31/12/09 including member and staff engagement actions 3.Engagement with SW1 HR to support the development of the Plan. 4.Background data and structure of Draft Plan to be completed by 28/02/10 5.Results from Staff Survey to be taken into account by 30/04/10 6.Final Draft Plan to CMT by 31/05/10 7. Member approval sought by 30/06/10	Workforce planning	H	Jun-10	Martin Griffin	UoR 2008-09 (Draft Sept 09)	R27	Fit for purpose Workforce Development Plan which complements the English Local Authority Workforce Strategy and has been assessed by GOSW. A detailed Action Plan For the period 2010-2013 has been agreed and funded.	Plan will evolve from Workforce Strategy (see B8). Activity 1 and 4 completed. Due to SAP OM Project additional resources being provided.	Feb-10	
L3	Gather up to date information on staff attitudes and use this to develop an action plan to address any areas of concern.	1.Planning Meeting on 7/12 with SW1 2.Outline Plan and draft survey to CMT by 31/01/10 following consultation with CCM and UCF 3.Survey completed by 31 March 2010 4.Analysis completed by 30/04/10 for incorporation in IIP Plans and Workforce Development Plan.	Workforce planning	H	Mar-10	Martin Griffin	UoR 2008-09 (Draft Sept 09)	R28	High percentage completion by staff. Clarity on staff attitudes and morale translated into actions within Service Plans, IIP Plan and Workforce Development Plan	In discussion with SCC & ASC re a Joint Survey 09-10 – outcome should influence Workforce Strategy & Plan. Joint survey only with SW1, CMT and UNISON consulted on draft survey and on target for completion by 31 March 2010.	Feb-10	
L4	Continue monitor progress in reducing sickness absence rates.	1.Planning meeting held with SW1 in early November 2009. 2. Action Plan due by 30 November 2009 to be considered by CMT in December 2009. 3. Action plan to be undertaken over agreed period.	Workforce planning	H	On-going Quarterly	Martin Griffin	UoR 2008-09 (Draft Sept 09)	R30	Stronger emphasis on sickness absence management across the organisation. Revised policies and procedures and additional training. Lower sickness absence during 2010/11	Part of 2009-10 Service Delivery Plans, and plans to report sickness % as part of Quarterly Corporate Performance. Activities 1 and 2 completed in addition to report to Scrutiny drafted and agreed.	Feb-10	



Corporate Governance Committee – 15th March 2010

REGULATION OF INVESTIGATORY POWERS ACT 2000

Report of LEGAL & DEMOCRATIC SERVICES MANAGER

(This matter is the responsibility of Councillor Ross Henley, Leader of the Council)

1. Purpose of the Report

1.1 To note the new statutory instruments and the effects for the council.

2. Background

2.1 On the 6th April 2010 a range of statutory instruments come into force.

2.2 These regulations are listed as follows:-

- The Regulation of Investigatory Powers (Directed Surveillance and Covert Human Intelligence Sources) Order 2010 (SI 521)
- The Regulation of Investigatory Powers (Communications Data) Order 2010 (SI 480)
- The Regulation of Investigatory Powers (Covert Surveillance and Property Interference: Code of Practice) Order 2010 (SI 463)
- The Regulation of Investigatory Powers (Covert Human Intelligence Sources: Code of Practice) Order 2010 (SI 462)
- The Regulation of Investigatory Powers (Extension of Authorisation Provisions: Legal Consultations) Order 2010 (SI 461)
- The Regulation of Investigatory Powers (Covert Human Intelligence Sources: Matters subject to Legal Privilege) Order 2010 (SI 123)

2.3 SI 461 relating to the extension of legal consultations will not apply to this authority as that will amount to intrusive surveillance and as a local authority we are not permitted to carry this type of surveillance.

2.4 SI 123, dealing with Covert Human Intelligence Sources, matters subject to legal privilege provides that any authorisation can only be given by the Surveillance Commissioner should it be required, this would be unlikely to be required.

2.5 With regard to SI's 521 and 480, these set out the level of authorising officer that are permitted to grant such authorisations. These regulations stipulate that only the Chief Executive, Director, Head of Service or service manager or their equivalent are permitted to grant authorisations under this legislation.

- 2.6 Following the Core Council Review the levels of posts are being reviewed in order to ensure that the Council's policy complies with these regulations and therefore only officers at Theme Manager and above will be authorised to grant authorisations.
- 2.7 The regulations relating to the issue of revised codes of practice have been issued to give effect to the 2010 regulations.

3. Recommendation

- 3.1 To note the new regulations.

For further information please contact Tonya Meers, Legal & Democratic Services Manager on 01823 356391 or t.meers@tauntondeane.gov.uk



Corporate Governance Committee – 15th March 2010

REGULATION OF INVESTIGATORY POWERS ACT 2000

Report of LEGAL & DEMOCRATIC SERVICES MANAGER

(This matter is the responsibility of Councillor Ross Henley, Leader of the Council)

1. Purpose of the Report

1.1 To authorise the RIPA policy for this Authority.

2. Background

2.1 Every local authority is required to have a policy under this legislation in order to ensure that all the relevant processes and procedures are in place to carry out covert surveillance. This policy should be regularly reviewed and members will note the dates for this to occur.

2.2 Following a recent consultation process it has been suggested that members should have more involvement in this process in terms of a strategic and scrutiny role in connection with this legislation. Therefore it was felt appropriate that this Committee should authorise this Council's policy rather than it being the Chief Executive. This will give members ownership of the policy and should form the basis of any scrutiny role that members wish to undertake.

2.3 It should be noted that in addition to the monitoring by this committee the Council is subject to regular three yearly inspections by the Office of Surveillance Commissioners and it is anticipated that a further inspection will taken place sometime next year.

3. Recommendation

3.1 To authorise the RIPA policy.

For further information please contact Tonya Meers, Legal & Democratic Services Manager on 01823 356391 or t.meers@tauntondeane.gov.uk



CORPORATE POLICIES AND PROCEDURES ON THE REGULATION OF INVESTIGATORY POWERS ACT 2000 (RIPA)

ISSUE DETAILS	
TITLE:	RIPA Policy & Procedures Guide
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OWNER	Legal & Democratic Services Manager
APPROVED By:	
REVIEW DATE	(1) September 2010 (2) March 2012

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CONTENTS PAGE

	Page No
A Introduction and Key Messages	3
B Council Policy Statement	4
C Effective Date of Operation and Authorised Officer Responsibilities	5
D General Information on RIPA	6
E What RIPA Does and Does Not Do	7
F Types of Surveillance	8
G Conduct and Use of a Covert Human Intelligence Sources (CHIS)	11
H Authorisation Procedures	13
I Working with / through Other Agencies	17
J Records Management	18
K Material obtained during investigations	19
L Amendments to this document	20
M Complaints Handling	21
N Useful Contacts	22
O Concluding Remarks of the Legal and Democratic Services Manager	23
Appendix 1 - List of Authorised Officer Posts	24
Appendix 2 - RIPA Flow Chart	25
Appendix 3 - RIPA Certificate of RIPA Eligibility	26
Appendix 4 - RIPA A forms: Directed Surveillance	27
Appendix 5 - RIPA B forms: Covert Human Intelligence Source (CHIS)	46
Appendix 6 - Examples of Covert Surveillance	67

A. Introduction and Key Messages

1. This Policy & Procedures Document is based upon the requirements of the Regulation of Investigatory Powers Act 2000 ('RIPA') and the Home Office's Code of Practices on Covert Surveillance and Covert Human Intelligence Sources (covert surveillance would be used only rarely and in exceptional circumstances).
2. The authoritative position on RIPA is, of course, the Act itself and any Officer who is unsure about any aspect of this document should contact, at the earliest possible opportunity, the Legal and Democratic Services Manager, for advice and assistance.
3. Copies of this document and related forms will be placed on the intranet, once this Document has been approved by the Council and the Office of Surveillance Commissioners. This guide (but not the RIPA forms or the list of Authorising Officers) will be placed on the TDBC website.
4. The Legal and Democratic Services Manager will maintain (and check) the Corporate Register of all RIPA authorisations, reviews, renewals, cancellations and rejections. However, it is the responsibility of the relevant Authorised Officer to ensure that the Legal and Democratic Services Manager receives a copy of the relevant forms within 1 week of authorisation, review, renewal, cancellation or rejection.
5. RIPA and this document are important for the effective and efficient operation of the Council's actions with regard to covert surveillance and Covert Human Intelligence Sources. This document will, therefore, be kept under 12-monthly review by the Legal and Democratic Services Manager. Authorised Officers must bring any suggestions for the improvement of this document to the attention of the Legal and Democratic Services Manager at the earliest possible opportunity. The Council takes responsibility for ensuring that RIPA procedures are continuously improved.
6. The Legal and Democratic Services Officer is the Council's nominated Single Point of Contact (SPOC) Officer who will be the normal point of contact for the Surveillance Commissioner and will field enquiries relating to RIPA.
7. If you are in any doubt on RIPA, this document or the related legislative provisions, please consult the Legal and Democratic Services Manager or at the earliest possible opportunity.

B. Council Policy Statement

1. The Council takes its statutory responsibilities seriously and it will at all times act in accordance with the law and take action that is both necessary and proportionate to the discharge of such statutory responsibilities. In that regard, the Legal and Democratic Services Manager is duly authorised by the Council to keep this document up to date and to amend, delete, add or substitute relevant provisions, as necessary. For administrative and operational effectiveness, the Legal and Democratic Services Manager is also authorised to add or substitute Officers authorised for the purposes of RIPA.

C. Effective Date of Operation : 1 March 2009 and Authorised Officer Responsibilities

1. The Corporate Policy, Procedures and the forms provided in this document will become operative with effect from the date of the Policy's approval.
2. Prior to the operative date, the Legal and Democratic Services Manager will ensure that sufficient numbers of Authorised Officers are (after suitable training on RIPA and this document) duly certified to take action under this document.
3. Authorised Officers will also ensure that staff who report to them follow this Policy & Procedures Document and do not undertake or carry out any form of surveillance without first obtaining the relevant authorisations in compliance with this document.
4. Authorised Officers must also pay particular attention to Health and Safety issues that may be raised by any proposed surveillance activity. Under no circumstances should an Authorised Officer approve any RIPA form unless and until s/he is satisfied that the health and safety of Council employees has been suitably addressed, and/or risks minimised so far as is possible, and that those health and safety considerations and risks are proportionate to/with the surveillance being proposed. If an Authorised Officer is in any doubt, s/he should obtain prior guidance.
5. Authorised Officers must also ensure that when sending copies of any forms to the Legal and Democratic Services Manager, (or any other relevant authority), the same are sent in SEALED envelopes and marked 'Strictly Private & Confidential'.

D. General Information on RIPA

1. The Human Rights Act 1998 (which brought much of the European Convention on Human Rights and Fundamental Freedoms 1950 into UK domestic law) requires the Council (and organisations working on its behalf) to respect the private and family life of citizens, their home and their correspondence. See Article 8 of the European Convention.
2. The European Convention did not, however, make this an absolute right, but a qualified right. Accordingly, in certain circumstances, the Council may interfere with the citizen's right mentioned above, if such interference is:
 - (a) in accordance with the law;
 - (b) necessary (as defined in this document); and
 - (c) proportionate (as defined in this document).
3. The Regulation of Investigatory Powers Act 2000 ('RIPA') provides a statutory mechanism (i.e. 'in accordance with the law') for authorising covert surveillance and the use of a 'covert human intelligence source' ('CHIS') - e.g. undercover agents, informers. It seeks to ensure that any interference with an individual's right under Article 8 of the European Convention is necessary and proportionate. In doing so, RIPA seeks to ensure that both the public interest and the human rights of individuals are suitably balanced.
4. Directly employed Council staff and external agencies working for the Council are covered by RIPA during the time they are working for the Council. Therefore, all external agencies must comply with RIPA and work carried out by agencies on the Council's behalf must be properly authorised by one of the Council's designated Authorised Officers. Authorised Officers are those whose posts appear in Appendix (1) to this document (as added to or substituted by the Legal and Democratic Services Manager).
5. If the correct procedures are not followed, evidence may be disallowed by the courts, a complaint of maladministration may be made to the Ombudsman, and/or the Council may be ordered to pay compensation. Were this to happen the good reputation of the Council will be damaged and it will undoubtedly be the subject of adverse press and media interest. Therefore, it is essential that all involved with RIPA comply with this document and any further guidance that may be issued from time to time by the Legal and Democratic Services Manager.
6. A flowchart of the procedures to be followed appears at Appendix (2).

E. What RIPA Does and Does Not Do

1. RIPA does:
 - require - prior authorisation of directed surveillance.
 - prohibit - the Council from carrying out intrusive surveillance.
 - require - authorisation of the conduct and use of a CHIS.
 - require - safeguards for the conduct and use of a CHIS.

2. RIPA does not:
 - make unlawful conduct which is otherwise lawful.
 - prejudice or disapply any existing powers available to the Council to obtain information by any means not involving conduct that may be authorised under RIPA. For example, it does not affect the Council's current powers to obtain information via the DVLA or to get information from the Land Registry as to the ownership of a property.

3. If the Authorised Officer or any Applicant is in any doubt, s/he should ask the Legal and Democratic Services Manager before any directed surveillance and/or CHIS is authorised, renewed, cancelled or rejected.

F. Types of Surveillance

1. 'Surveillance' includes
 - monitoring, observing, listening to people, watching or following their movements, listening to their conversations and other such activities or communications.
 - recording anything mentioned above in the course of authorised surveillance.
 - surveillance by, or with the assistance of, appropriate surveillance device(s).

Surveillance can be overt or covert.

2. Overt Surveillance

Most of the surveillance carried out by the Council will be done overtly - there will be nothing secretive, clandestine or hidden about it. In many cases, Officers will be behaving in the same way as a normal member of the public and/or will be going about Council business openly.

3. Similarly, surveillance will be overt if the subject has been told it will happen.

4. Covert Surveillance

Covert Surveillance is carried out in a manner calculated to ensure that the person subject to the surveillance is unaware of it taking place. (Section 26(9)(a) of RIPA).

5. RIPA regulates two types of covert surveillance (Directed Surveillance and Intrusive Surveillance) plus the use of Covert Human Intelligence Sources (CHIS).

6. Directed Surveillance

Directed Surveillance is surveillance which:-

- is covert; and
- is not intrusive surveillance (see definition below - the Council must not carry out any intrusive surveillance);
- is not carried out in an immediate response to events which would otherwise make seeking authorisation under the Act unreasonable, e.g. spotting something suspicious and continuing to observe it; and

- is undertaken for the purpose of a specific investigation or operation in a manner likely to obtain private information about an individual (whether or not that person is specifically targeted for purposes of an investigation). (Section 26(10) of RIPA).

7. Private information in relation to a person includes any information relating to his private and family life, his home and his correspondence. The fact that covert surveillance occurs in a public place or on business premises does not mean that it cannot result in the obtaining of private information about a person. Prolonged surveillance targeted on a single person will undoubtedly result in the obtaining of private information about him/her and others that s/he comes into contact or associates with.
8. Similarly, although overt town centre CCTV cameras do not normally require authorisation, authorisation will be required if the camera is tasked for a specific purpose which involves prolonged surveillance on a particular person. The way a person runs his/her business may also reveal information about his or her private life and the private lives of others.
9. For the avoidance of doubt, only those Officers designated and certified to be 'Authorised Officers' for the purpose of RIPA can authorise 'Directed Surveillance' if, and only if, the RIPA authorisation procedures detailed in this document are followed. If an Authorised Officer has not been 'certified' for the purposes of RIPA, s/he cannot carry out or approve/reject any action set out in this Corporate Policy & Procedures Document.

Further, an Authorised Officer for RIPA purposes cannot delegate his/her power of authorisation to another officer unless that officer is also an Authorised Officer for RIPA purposes (and listed in Appendix 1), in which case that officer would be authorising in his own right. If in doubt, check with the Legal and Democratic Services Manager. Officers will bear personal responsibility for ensuring correct RIPA authorisation procedures.

10. Surveillance that is unforeseen and undertaken as an immediate response to a situation normally falls outside the definition of directed surveillance and therefore authorisation is not required. However, if a specific investigation or operation is subsequently to follow, authorisation must be obtained in the usual way before it can commence. In no circumstance will any covert surveillance operation be given backdated authorisation after it has commenced.

11. **Intrusive Surveillance**

This is when surveillance:

- is covert;
- relates to residential premises and private vehicles; and

- involves the presence of a person in the premises or in the vehicle or is carried out by a surveillance device in the premises/vehicle. Surveillance equipment mounted outside the premises will not be intrusive, unless the device consistently provides information of the same quality and detail as might be expected if they were in the premises/vehicle.

12. Intrusive surveillance can be carried out only by police and other law enforcement agencies. Council Officers must not carry out intrusive surveillance.

13. **Examples of different types of Surveillance**

Type of Surveillance	Examples
Overt	<ul style="list-style-type: none"> - Police Officer or Parks Warden on patrol. - Signposted Town Centre CCTV cameras (in normal use). - Most test purchases (where the officer behaves no differently from a normal member of the public).
Covert but not requiring prior authorisation	<ul style="list-style-type: none"> - CCTV cameras providing general traffic, crime or public safety information.
Directed (must be RIPA authorised)	<ul style="list-style-type: none"> - Officers follow an individual or individuals over a period, to establish whether s/he is working when claiming benefit or genuinely on long term sick leave from employment. - Test purchases where the officer has a hidden camera or other recording device to record information which might include information about the private life of a shop-owner, e.g. where s/he is suspected of running his business in an unlawful manner.
Intrusive - (Council cannot do this)	<ul style="list-style-type: none"> - Planting a listening or other device (bug) in a person's home or in their private vehicle.
(See Appendix 6)	(Examples of different types of surveillance)

G. Conduct and Use of a Covert Human Intelligence Source (CHIS)

Who is a CHIS?

1. Someone who establishes or maintains a personal or other relationship for the covert purpose of covertly using or covertly disclosing information obtained by that relationship. In common parlance, an informer or 'under cover' Council Officer.
2. RIPA does not apply in circumstances where members of the public volunteer information to the Council as part of their normal civic duties, or where the public contact telephone numbers set up by the Council to receive information.

What must be authorised?

3. The Conduct or Use of a CHIS require prior authorisation.
 - Conduct of a CHIS = Establishing or maintaining a personal or other relationship with a person for the covert purpose of (or incidental to the covert purpose of) obtaining and passing on information.
 - Use of a CHIS = Covers inducing, asking, or assisting a person to act as a CHIS and the decision to use a CHIS in the first place.
4. The Council can use CHIS's if, and only if, the RIPA procedures, detailed in this document are followed.

Juvenile Sources

5. Special safeguards apply to the use or conduct of juvenile sources (i.e. under 18 years of age). On no account can a child under 16 years of age be authorised to give information against his or her parents.

Vulnerable Individuals

6. A Vulnerable Individual is a person who is or may be in need of community care services by reason of mental or other disability, age or illness and who is or may be unable to take care of himself or herself, or unable to protect himself or herself against significant harm or exploitation.
7. A Vulnerable Individual will only be authorised to act as a source in the most exceptional of circumstances.

Test Purchases

8. Carrying out test purchases will not (as highlighted above) require the purchaser to establish a relationship with the supplier for the covert purpose of obtaining information and, therefore, the purchaser will not normally be a CHIS. For example, authorisation would not normally be required for test purchases carried out in the ordinary course of business (e.g. walking into a shop and purchasing a product over the counter).
9. By contrast, developing a relationship with a person in the shop to obtain information about the seller's suppliers of an illegal product (e.g. illegally imported products) will require authorisation as a CHIS. Similarly, using mobile hidden recording devices or CCTV cameras to record what is going on in the shop will require authorisation as directed surveillance. A combined authorisation can be given for a CHIS and also for directed surveillance.

Anti-social behaviour activities (e.g. noise, violence, race etc.)

10. Persons who complain about anti-social behaviour (such as playing music too loudly) and who are asked to keep a diary of incidents will not normally be a CHIS, as they are not required to establish or maintain a relationship for a covert purpose. Recording the level of noise (e.g. the decibel level) will not normally capture private information; therefore, it does not require authorisation.
11. Recording sound on private premises could constitute intrusive surveillance unless it is done overtly. It will be possible to record noise levels without it being intrusive surveillance if the noisemaker is given written warning that such recording or monitoring will occur. (Such a warning should be repeated at least every 2 months if the operation is on-going). Placing a stationary or mobile video camera outside a building to record anti-social behaviour on residential estates will require prior authorisation.

Noise recordings should only ever be made from a complainant's property or land that is open to the public. Covert recording within the premises of the alleged noise-maker would constitute Intrusive Surveillance, and is not permitted for Council Staff.

H. Authorisation Procedures

1. Directed surveillance and the use of a CHIS can only be lawfully carried out if properly authorised and in strict accordance with the terms of the authorisation. Appendix (2) provides a flow chart of the authorisation process from application consideration to recording of information.

Authorised Officers

2. Forms can only be signed by Authorised Officers who hold a Certificate of RIPA Eligibility from the Legal and Democratic Services Manager as shown in Appendix (3). Authorised Officer posts are listed in Appendix (1). This Appendix will be kept up to date by the Legal and Democratic Services Manager and added to as needs require. The Legal and Democratic Services Manager has been duly authorised to add, delete or substitute posts listed in Appendix (1).
3. As already mentioned, RIPA authorisations are for specific investigations only, and they must be renewed or cancelled once the specific surveillance is complete or about to expire. The authorisations do not lapse with time!

Training Records

4. Proper training will be given or approved by the Legal and Democratic Services Manager before Authorised Officers are issued with a Certificate of RIPA Eligibility enabling them to sign any RIPA forms. The issue of a Certificate of RIPA Eligibility will also have the dual purpose of confirming that the Officer has been RIPA trained and a Corporate Register of all those individuals who have been issued with such Certificates will be kept by the Legal and Democratic Services Manager.
5. If the Legal and Democratic Services Manager feels at any time that an Authorised Officer has not complied fully with the requirements of this document, or the training provided to him, the Legal and Democratic Services Manager is duly authorised to retract that Officer's Certificate of RIPA Eligibility until s/he has undertaken further approved training. Were this to happen the Officer could no longer authorise RIPA Procedures.

Application Forms

6. Only the approved RIPA forms set out in this document must be used.
7. **'A Forms' (Directed Surveillance) - See Appendix (4)**

Form A 1	Application for Authority for Directed Surveillance
Form A 2	Renewal of Directed Surveillance Authority
Form A 3	Review of Directed Surveillance Authority
Form A 4	Cancellation of Directed Surveillance

8. 'B Forms' (CHIS) - See Appendix (5)

Form B 1	Application for Authority for Conduct and Use of a CHIS
Form B 2	Renewal of Conduct and Use of a CH IS
Form B 3	Review of Conduct and Use of a CHIS
Form B 4	Cancellation of Conduct and Use of a CHIS

Grounds for Authorisation

9. Directed Surveillance ('A' Forms) or the Conduct and Use of the CHIS ('B' Forms) can be authorised by the Council only for the prevention or detection of crime.

Assessing the Application Form

10. Before an Authorised Officer signs a form, s/he must:
- (a) Be mindful of this Policy & Procedures Document, the training provided or approved by the Legal and Democratic Services Manager and any other guidance issued, from time to time, by the Legal and Democratic Services Manager on such matters;
 - (b) Satisfy his/herself that the RIPA authorisation is:
 - (i) in accordance with the law;
 - (ii) necessary in the circumstances of the particular case on one of the grounds mentioned in paragraph 9 above; and
 - (iii) proportionate to what it seeks to achieve.
 - (c) In assessing whether or not the proposed surveillance is proportionate, consider other appropriate means of gathering the information. The least intrusive method will be considered proportionate by the courts.
 - (d) Take into account the risk of intrusion into the privacy of persons other than the specified subject of the surveillance (Collateral Intrusion). Measures must be taken wherever practicable to avoid or minimise (so far as is possible) unnecessary collateral intrusion into the lives of those not directly connected with the investigation or operation. This matter may be an aspect of determining proportionality;
 - (e) Set a date for review of the authorisation and review on only that date;
 - (f) Allocate a Unique Reference Number (URN) for the application as follows:
Year / Group / Number of Application
 - (g) Ensure that the RIPA Service Register is duly completed, and that a copy of the RIPA forms (and any review/cancellation of the same) is forwarded to the Legal and Democratic Services Manager for inclusion in the Corporate Register within one week of the relevant authorisation, review, renewal, cancellation or rejection.

Additional Safeguards when Authorising a CHIS

11. When authorising the conduct or use of a CHIS, the Authorised Officer must also:
 - (a) be satisfied that the conduct and/or use of the CHIS is proportionate to what is sought to be achieved;
 - (b) be satisfied that appropriate arrangements are in place for the management and oversight of the CHIS and these arrangements must address health and safety issues through a risk assessment;
 - (c) consider the likely degree of intrusion of all those potentially affected;
 - (d) consider any adverse impact on community confidence that may result from the use or conduct or the information obtained; and
 - (e) ensure records contain particulars and that they are not available except on a need to know basis.

Urgent Authorisations

12. Urgent authorisations should not be necessary. However, in exceptional circumstances, urgent authorisations may be given orally if the time that will elapse before a written authorisation can be granted will be likely to endanger life or jeopardise the investigation or operation for which the authorisation is being given.
13. It will not be urgent or an exceptional circumstance where the need for authorisation has been neglected or the situation is of the Officer's own making.
14. Urgent authorisations last for no more than 72 hours. They must be recorded in writing on the standard form as soon as practicable and the extra boxes on the form must be completed to explain why the authorisation is urgent.

Duration

15. The form must be reviewed in the time stated, and cancelled once it is no longer needed. The 'authorisation' to carry out/conduct the surveillance lasts for 3 months (from date of authorisation) for Directed Surveillance, and 12 months (from date of authorisation) for a CHIS. Any adjustments to the time period must be made by means of either a cancellation or a renewal.

However, whether or not the surveillance is carried out/conducted in the relevant period has no bearing on the authorisation becoming spent. In other words, the forms do not expire! The forms have to be reviewed and/or cancelled (once they are no longer required).

16. An urgent oral authorisation (if not already ratified in a written authorisation) will cease to have effect after 72 hours, beginning with the time when the authorisation was granted.
17. Authorisations can be renewed in writing when the maximum period has expired. The Authorising Officer must consider the matter afresh, including taking into account the benefits of the surveillance to date and any collateral intrusion that has occurred.
18. The renewal will begin on the day when the authorisation would have expired. In exceptional circumstances, renewals may be granted orally in urgent cases (but see above) and they last for a period of seventy-two hours.

I. Working With / Through Other Agencies

1. When another agency has been instructed on behalf of the Council to undertake any action under RIPA, this document and its forms must be used by the Council Officers concerned (in accordance with the normal procedure), the agency advised and kept informed of the various RIPA requirements. They must be made explicitly aware of what they are authorised to do, preferably in writing (with a copy of the written instructions countersigned by the agency by way of acknowledgement of their instructions and returned to the instructing officer). If for reasons of urgency oral instructions are initially given, written confirmation must be sent and acknowledged within 4 working days. Officers must be satisfied that agencies are RIPA competent & RIPA trained before they are used.
2. When some other agency (e.g. Police, Customs & Excise, Inland Revenue etc):
 - (a) Wish to use the Council's resources (e.g. CCTV surveillance systems), that agency must use its own RIPA procedures and before any Officer agrees to allow the Council's resources to be used for the other agency's purposes s/he must obtain a copy of that agency's completed RIPA form for the Council's records (a copy of which must be passed to the Legal and Democratic Services Manager for the Corporate Register) or relevant extracts from the agencies RIPA form which are sufficient for the purposes of protecting the Council and use of its resources;
 - (b) Wish to use the Council's premises for their own RIPA action, the Council Officer concerned should normally co-operate with such a request, unless there are security or other good operational or managerial reasons as to why the Council's premises should not be used for the agency's activities. Suitable insurance or other appropriate indemnities may need to be sought from the other agency to protect the Council's legal position (the Council's insurance officer and/or the Legal and Democratic Services Manager can advise on this issue). In such cases the Council's own RIPA forms should not be used as the Council is only 'assisting' and not being 'involved' in the RIPA activity of the external agency.
3. With regard to 2(a) above, if the Police or other agency wish to use Council resources for general surveillance (as opposed to specific RIPA operations) an appropriate letter requesting the proposed use (and detailing the extent of remit, duration, who will be undertaking the general surveillance and the purpose of it) must be obtained from the Police or other agency before any Council resources are made available for the proposed use. The insurance/indemnity considerations mentioned above may still need to be addressed.
4. In addition should any officer wish to work in partnership with any other agency where the Council intend to share with that other agency any evidence obtained through surveillance activities then the advice of the Head of Legal & Democratic Services should be first sought.
5. If in doubt, please consult with the Legal and Democratic Services Manager at the earliest opportunity.

J. Records Management

1. The Council must keep a detailed record of all authorisations, renewals, cancellations and rejections generated by officers and a Corporate Register of all Authorisation forms will be maintained and monitored by the Legal and Democratic Services Manager.

2. **Records maintained by individual services**

The following documents must be retained:

- a copy of any completed application form together with any supplementary documentation and notification of the approval given by the Authorised Officer;
 - a record of the period over which the surveillance has taken place;
 - the frequency of reviews prescribed by the Authorised Officer;
 - a record of the result of each review of the authorisation;
 - a copy of any renewal of an authorisation, together with the supporting documentation submitted when the renewal was requested;
 - a copy of any cancellation of an authorisation;
 - the date and time when any instruction was given by the Authorised Officer;
 - the Unique Reference Number for the authorisation (URN).
3. Each form will have a URN. The cross-referencing of each URN takes place within the forms for audit purposes. The relevant code to be followed is shown in Appendix 1. Rejected forms will also have URN's.

Corporate Register maintained by the Legal and Democratic Services Manager

4. Authorised Officers must forward details of each form to the Legal and Democratic Services Manager for the Corporate Register within 1 week of the authorisation, review, renewal, cancellation or rejection. The Legal and Democratic Services Manager will monitor the same and give appropriate guidance from time to time or amend this document, as necessary.
5. The Council will retain records for a period of at least three years from the ending of the authorisation. The Office of the Surveillance Commissioners (OSC) can audit/review the Council's policies and procedures, and individual authorisations.

K. Material obtained during investigations

1. Generally, all material (in whatever media) obtained or produced during the course of investigations subject to RIPA authorisations should be processed, stored and destroyed in accordance with the requirements of the Data Protection Act 1998, the Freedom of Information Act 2000, any other legal requirements including those of confidentiality. The following paragraphs give guidance on some specific situations, but advice should be sought from the Legal and Democratic Services Manager or the Data Protection Officer where appropriate.
2. Where material is obtained during the course of an investigation which might be relevant to that investigation, or another investigation, or to pending or future civil or criminal proceedings, then it should not be destroyed, but retained in accordance with legal disclosure requirements.
3. Where material is obtained, which is not related to a criminal or other investigation or to any person who is the subject of the investigation, and there is no reason to suspect that it will be relevant to any future civil or criminal proceedings, it should be destroyed immediately.
4. Material obtained in the course of an investigation may be used in connection with investigations other than the one that the relevant authorisation was issued for. However, the use or disclosure of such material outside the Council, unless directed by any court order, should only be considered in exceptional circumstances, and in accordance with advice from the Monitoring Officer or the Head of Legal Services.
5. Where material obtained is of a confidential nature then the following additional precautions should be taken:
 - Confidential material should not be retained or copied unless it is necessary for a specified purpose;
 - Confidential material should only be disseminated in accordance with legal advice that it is necessary to do so for a specific purpose;
 - Confidential material which is retained should be marked with a warning of its confidential nature. Safeguards should be put in place to ensure that such material does not come into the possession of any person where to do so might prejudice the outcome of any civil or criminal proceedings;
 - Confidential material should be destroyed as soon possible after its use for the specified purpose.

If there is any doubt as to whether material is of a confidential nature, advice should be sought from the Legal and Democratic Services Manager.

L. Amendments to this guidance document

1. The Legal and Democratic Services Manager is duly authorised to keep this guidance document up to date, and to amend, delete, add or substitute any provisions as s/he deems necessary. For administrative and operational effectiveness, s/he is also authorised to amend the list of ‘Authorising Officer Posts’ set out in Appendix 1, by adding, deleting or substituting any posts.
2. The RIPA Corporate Officers Working Group shall supplement any training requirements with exchanges of experiences in the operation of this document and any recommendations to improve this document will be considered by the Council’s Monitoring Officer.

M. Complaints Handling

1. Taunton Deane Borough Council's Surveillance Complaints Procedure

Complaints concerning breaches of the code may be made to the Council's Chief Executive, Taunton Deane Borough Council, The Deane House, Belvedere Road, Taunton, Somerset, TA1 1HE.

If a complaint is received from a member of the public or a person who has been subject to any form of surveillance the complaint will be referred to the Legal and Democratic Services for investigation.

Thereafter a decision will be taken, as to what action, if any, should be taken in line with the Council's Complaints Policy.

2. Independent Tribunal

The Regulation of Investigatory Powers Act 2000 also establishes an independent tribunal made up of Senior Members of the Judiciary and the Legal Profession and is independent of the government. The tribunal has full powers to investigate and decide any case within its jurisdiction. If a complaint is therefore received from an individual who has been subject to surveillance or by a member of the public then that person or persons should be referred immediately to the Investigatory Powers Tribunal.

The address for the Investigatory Powers Tribunal is PO Box 33220 London SW1H 9ZQ.

N. Useful contacts

- 6.1 Local Authorities Coordinators of Regulatory Services (LACORS) -
www.lacors.gov.uk
- 6.2 Association of Council Secretaries and Solicitors –
www.acses.org.uk
- 6.3 Office of the Surveillance Commissioner –
www.surveillanccommissioners.gov.uk
- 6.4 RIPA website -
<http://security.homeoffice.gov.uk/ripa/>
- 6.5 RIPA forms-
<http://security.homeoffice.gov.uk/ripa/publication-search/ripa-forms/>
- 6.6 RIPA Q&A for Local Authorities-
http://www.surveillanccommissioners.gov.uk/advice_ripa.html
- 6.7 RIPA codes of practice-
<http://security.homeoffice.gov.uk/ripa/publication-search/ripa-cop/>

O. Concluding Remarks of the Legal and Democratic Services Manager/Solicitor to the Council/Monitoring Officer

1. Where there is an interference with the right to respect for private and family life guaranteed under Article 8 of the European Convention on Human Rights, and where there is no other source of lawful authority for the interference, or if it is held not to be necessary or proportionate to the particular circumstances, the consequences of not obtaining or following the correct authorisation procedure set out in RIPA and this document may be that the action taken (and the evidence obtained) will be held to be unlawful by the Courts pursuant to Section 6 of the Human Rights Act 1998. This could result in the Council losing a case and having costs (and possibly damages) awarded against it.
2. Obtaining an authorisation under RIPA and following the procedures set out in this document will ensure that the particular action taken is carried out in accordance with the law and subject to stringent safeguards against abuse of anyone's human rights.
3. Authorised Officers will be suitably trained and they must exercise their minds every time they are asked to sign a form. They must never sign or rubber stamp form(s) without thinking about both their personal responsibilities and the Council's responsibilities under RIPA and the European Convention.
4. Any boxes not needed on the form(s) must be clearly marked as being 'NOT APPLICABLE', 'N/A' or a line put through the same. Great care must also be taken to ensure that accurate information is used and inserted in the correct boxes. Reasons for any refusal of an application must also be kept on the form and the form retained for future audits.
5. Those carrying out surveillance must inform the Authorising Officer if the investigation or operation unexpectedly interferes with the privacy of individuals who are not covered by the authorization.
6. For further advice and assistance on RIPA, please contact the Legal and Democratic Services Manager (who is also the Monitoring Officer). Details are provided on the front of this document.

APPENDIX 1

List of Authorised Officer Posts

OVERALL RESPONSIBILITY: KEVIN TOLLER, STRATEGIC DIRECTOR
MONITORING OFFICER: TONYA MEERS, SOLICITOR TO THE COUNCIL/
LEGAL AND DEMOCRATIC SERVICES MANAGER

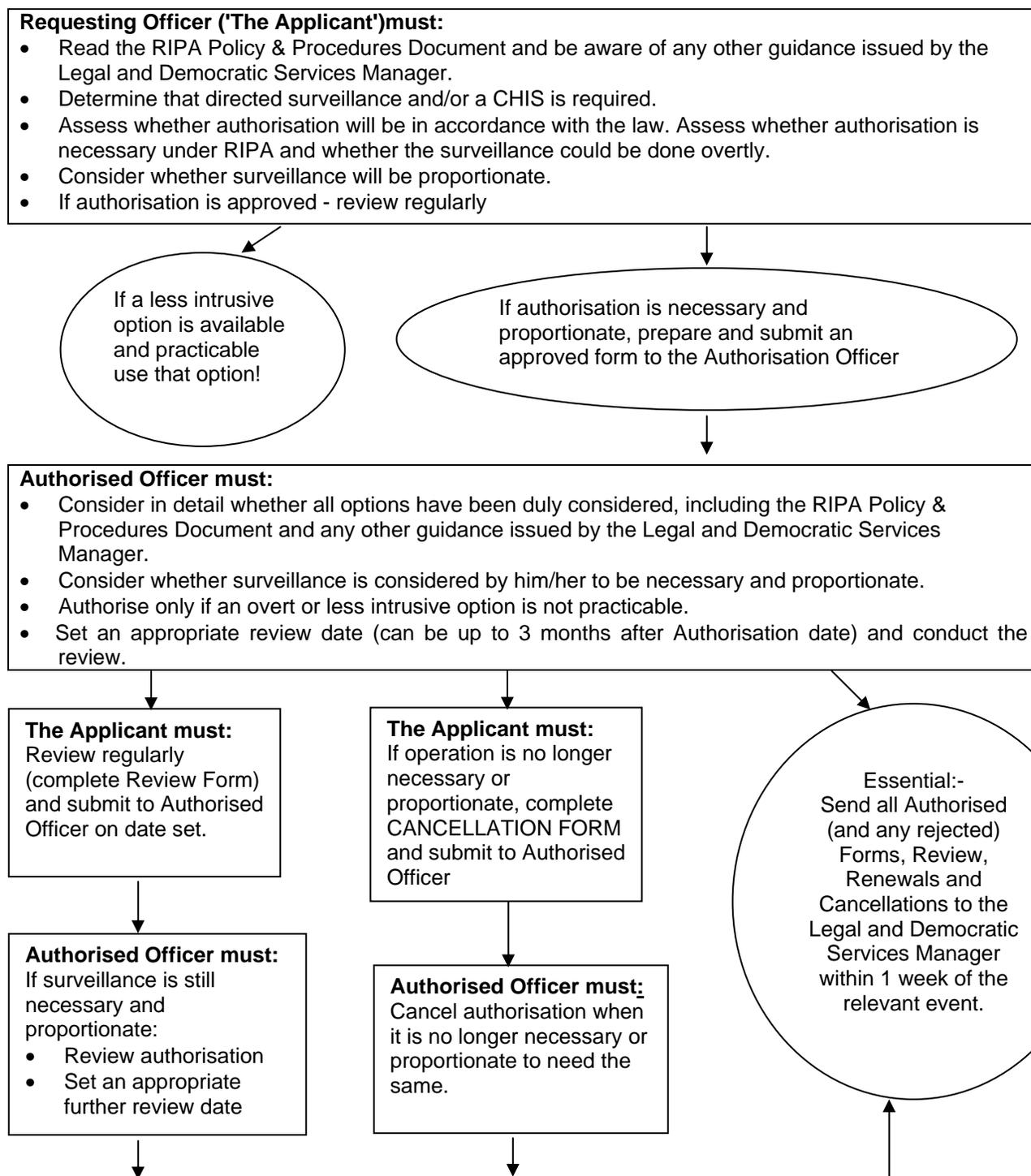
Department	Authorising Officer's Name	Designation
Environmental Health	James Barra	Chief Environmental Health Officer
Environmental Health	Nigel Kerr	Operations Manager, Environmental Protection
Revenues and Benefits	Heather Tiso	Revenues and Benefits Manager
Housing	John Williams	Housing Operations Manager
Audit	Chris Gunn	Group Auditor
Directorate	Penny James	Chief Executive

IMPORTANT NOTES

- A. Even if a post is identified in the above list the persons currently employed in such posts are not authorised to sign RIPA forms (including a renewal or cancellation) unless s/he has been certified by the Legal and Democratic Services Manager to do so by the issue of a Certificate of RIPA Eligibility.
- B. Only the Chief Executive and the Legal and Democratic Services Manager (Tonya Meers as of March 2009) are authorised to sign forms relating to Juvenile Sources and Vulnerable Individuals (see paragraph G of this document).
- C. Particular care should be taken in cases where the subject of the investigation or operation might reasonably expect a high degree of privacy, or where confidential information is involved. Confidential information consists of matters subject to legal privilege, confidential personal information or confidential journalistic material. In cases where through the use of surveillance it is likely that knowledge of confidential information will be acquired, the use of surveillance is subject to a higher level of authorization; such authorisations will only be given by the CEO or by Kevin Toller.
- D. If in doubt, ask the Legal and Democratic Services Manager before any directed surveillance and/or CHIS is authorised, renewed, rejected or cancelled.

APPENDIX 2

RIPA FLOW CHART



NB: If in doubt, ask the Legal and Democratic Services Manager before any directed surveillance and/or CHIS is authorised, renewed, cancelled, or rejected.



TAUNTON DEANE BOROUGH COUNCIL

RIPA AUTHORISING OFFICER CERTIFICATE

No. [] / 200-

I HEREBY CERTIFY that the Officer whose personal details are given below is an Authorising Officer for the purposes of authorising covert surveillance and the use and/or conduct of Covert Human Intelligence Sources ('CHIS') under the provisions of the Regulation of Investigatory Powers Act 2000.

It is further certified that this Officer has received training to perform such authorisation procedures.

Certificate issued to:
[Full name of Officer] _____

Job Title: _____

Service: _____

Location: _____

Certificate date: _____

(signed) _____

Tonya Meers
Monitoring Officer/Solicitor to the Council/Legal & Democratic Services Manager
(Taunton Deane Borough Council)

(Please note:- This certificate and the authorisation granted by it is personal to the officer named in it and cannot be transferred. Any change in personal details must be notified in writing to the Legal and Democratic Services Manager immediately. This certificate can be revoked at any time by the Legal and Democratic Services Manager by written revocation issued to the officer concerned. It is the named officer's personal responsibility to ensure full compliance with RIPA authorisation procedures and to ensure that s/he is fully trained in such procedures and that such training is kept up to date).

APPENDIX 4

RIPA 'A' FORMS: DIRECTED SURVEILLANCE

Form A1 : Application for authorisation to carry out directed surveillance.

Form A2 : Application for Renewal of Form A1.

Form A3 : Review of Form A1.

Form A4 : Cancellation of Form A1.



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**FORM A1
APPLICATION FOR AUTHORISATION TO CARRY OUT
DIRECTED SURVEILLANCE**

**PART II OF THE REGULATION OF INVESTIGATORY
POWERS ACT 2000 (RIPA)**

Guidance Note:

1. After [] only Authorised Officers who have been certified by the Legal and Democratic Services Manager will be allowed to sign RIPA forms.
2. Applicants and Authorised Officers must comply, in full, with the Act and the Council's RIPA Policy & Procedures Document and any other guidance issued by the Legal and Democratic Services Manager. If in doubt, contact Tonya Meers, Legal and Democratic Services Manager, The Deane House, Belvedere Road, Taunton, TA1 1HE. Tel: 01823 356406
3. Copies of completed forms must be sent (once authorised or rejected) to the Legal and Democratic Services Manager within one week of the authorisation, rejection, renewal or cancellation for the Corporate Register.
4. All boxes in this form must be completed. 'not applicable', N/A or lines must be put through irrelevant boxes.

SECTION 1 (to be completed by the Applicant)

Subject of surveillance		Unique Identification Number (UNI):	/ /
			Year / Group / Number

Name of Applicant:		Unit/Division:	
Full Address:			
Contact Details:			
Investigation/Operation Name (if applicable):			

1. Give Job Title of Authorised Officer:

2. Describe the conduct to be authorised and the purpose of the investigation or operation

3. Identify under which grounds the directed surveillance is necessary under Section 28(3) of RIPA: (delete as necessary)

- In the interests of national security;
- For the purpose of preventing or detecting crime or of preventing further disorder;
- In the interests of the economic well-being of the United Kingdom;
- In the interests of public safety;
- For the purpose of protecting public health;
- For the purpose of assessing or collecting any tax, duty, levy or other imposition, contribution or charge payable to a government department

4. Explain why directed surveillance is necessary in this particular case:

5. Explain why the directed surveillance is proportionate to what it seeks to achieve:

6. The nature of the surveillance to be authorised, including any premises or vehicles involved:

7. Investigation or operation to be carried out. The identities, where known, of those to be the subject of the directed surveillance:

- Name: _____
- Address: _____
- DOB: _____
- Other information as appropriate: _____

8. Explanation of the information which it is desired to obtain as a result of the directed surveillance:

9. Details of any potential collateral intrusion and why the intrusion is unavoidable:
Include a plan to minimize collateral damage.

--

10. Confidential information:
Indicate the likelihood of acquiring any confidential information.

--

11. Anticipated Start:

Date:

Time:

12. Applicant's Details:

Name
(print): _____

Tel No: _____

Job Title: _____

Date: _____

Signature: _____

SECTION 2 (To be completed by the Authorised Officer)

13. Authorised Officer's comments explaining why in his/her view the directed surveillance is necessary and proportionate. This box must be completed.

--

14. Authorised Officer's Statement:			
1. I, [insert name], hereby authorise [reject the application for] the directed surveillance operation as detailed above. This written authorisation will cease to have effect if not actioned within a period of 3 months.			
2. The Applicant will review this authorisation on _____ to see whether the authorisation should be renewed or cancelled.			
3. The Applicant will take appropriate action on _____ to seek the renewal or cancellation of this authorisation from the Authorised Officer.			
Name (Print):		Job Title:	
Signature:		Date:	

Date of first review:	
Date of subsequent reviews of this authorisation:	

15. Confidential Information Authorisation:			
Name (Print):	.....	Job Title:	.....
Signature:	.....	Date:	.....
From	Time: _____	Date:	_____

16. Urgent Authorisation: Details of why application is urgent:			
Name (Print):	.....	Job Title:	.....
Signature:	.....	Date:	.....

NB: A copy of this Form (once it has been authorised or rejected) must be sent to the Legal and Democratic Services Manager within one week of the authorisation or rejection for the Council's Corporate Register



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**FORM A2
APPLICATION FOR RENEWAL OF A DIRECTED SURVEILLANCE
AUTHORISATION
(Please attach the original authorisation)**

**PART II OF THE REGULATION OF INVESTIGATORY
POWERS ACT 2000 (RIPA)**

Guidance Note:

1. After [] only Authorised Officers who have been certified by the Legal and Democratic Services Manager will be allowed to sign RIPA forms.
2. Applicants and Authorised Officers must comply, in full, with the Act and the Council's RIPA Corporate Policy & Procedures Document and any other guidance issued by the Legal and Democratic Services Manager. If in doubt, contact Tonya Meers, Legal and Democratic Services Manager, The Deane House, Belvedere Road, Taunton, TA1 1HE. Tel: 01823 356406
3. Copies of completed forms must be sent (once authorised or rejected) to the Legal and Democratic Services Manager within one week of the authorisation, rejection, renewal or cancellation for the Corporate Register.
4. All boxes in this form must be completed. 'Not applicable', N/A, or lines must be put through irrelevant boxes.

SECTION 1 (To be completed by the Applicant)

Subject of surveillance		Unique Identification Number (UNI):	/ /
			Year / Group / Number

Name of Applicant:		Unit/Division:	
Full Address:			
Contact Details:			
Investigation/Operation Name (if applicable):			
Renewal relates to Form A1:	(Department)	(Year)	(Number)

Details of renewal:

1. Renewal numbers and dates of any current and previous renewals:	
Renewal Number	Date:

2. Detail any significant changes to the information provided in the original authorisation, as it applies at the time of the renewal:

3. Detail the reasons why it is necessary to continue with the directed surveillance:

4. Detail why the directed surveillance is still proportionate to what it seeks to achieve:

5. Indicate the content and value to the investigation or operation of the information so far obtained by the directed surveillance:

--

6. Give details of the results of the regular reviews of the investigation or operation:

--

7. Applicant's Details:

Name (print): _____ Tel No: _____

Job Title: _____

Date: _____

Signature: _____

SECTION 2 (To be completed by the Authorised Officer)

8. Authorised Officer's Comments - This box must be completed

--

9. Authorised Officer's Statement:	
I, [insert name], hereby authorise / reject the application for]the renewal of the directed surveillance operation as detailed above. The renewal of this authorisation will last for 3 months unless renewed in writing.	
This authorisation will be reviewed frequently to assess the need for the authorisation to continue.	
Name (Print):	Job Title:
Signature:	Date:
Renewal Time:	Date:
From:	

Date of first review:	
Date of subsequent reviews of this authorisation:	

NB: A copy of this Form (once it has been authorised or rejected) must be sent to the Legal and Democratic Services Manager within one week of the authorisation or rejection for the Council's Corporate Register

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REVIEW OF A DIRECTED SURVEILLANCE AUTHORISATION

PART II OF THE REGULATION OF INVESTIGATORY POWERS ACT 2000 (RIPA)

Guidance Note:

1. After [] only Authorised Officers who have been certified by the Legal and Democratic Services Manager will be allowed to sign RIPA forms.
2. Applicants and Authorised Officers must comply, in full, with the Act and the Council's RIPA Corporate Policy & Procedures Document and any other guidance issued by the Legal and Democratic Services Manager. If in doubt, contact Tonya Meers, Legal and Democratic Services Manager, The Deane House, Belvedere Road, Taunton, TA1 1HE. Tel: 01823 356406
3. Copies of completed forms must be sent (once authorised or rejected) to the Legal and Democratic Services Manager within one week of the authorisation, rejection, renewal or cancellation for the Corporate Register.
4. All boxes in this form must be completed. 'Not applicable', N/A or lines must be put through irrelevant boxes.

SECTION 1 (To be completed by the Applicant)

Subject of surveillance		Unique Identification Number (UNI):	/ /
			Year / Group / Number

Name of Applicant:		Unit/Division:	
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Full Address:			
---------------	--	--	--

Contact Details:			
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Operation Name:		Form A1 UIN	(Dept)	(Year)	(Number)

Date of authorisation or last renewal:		Expiry date of authorisation or last renewal:			
		Form A2 UIN			

Details of renewal:

1. Renewal numbers and dates of any current and previous renewals:	
Renewal Number	Date:

2. Summary of the investigation/operation to date, including what private information has been obtained and the value of the information so far obtained:

--

3. Detail the reasons why it is necessary to continue with the directed surveillance:

--

4. Explain how the proposed activity is still proportionate to what it seeks to achieve:

--

5. Detail any incidents of collateral intrusion and the likelihood of any further incidents of collateral intrusions occurring:

--

6. Give details of any confidential information acquired or accessed and the likelihood of acquiring confidential information:

--

7. Applicant's Details:	
Name (print): _____	Tel No: _____
Job Title: _____	Date: _____
Signature: _____	

SECTION 2 (To be completed by the Authorised Officer)

8. Authorised Officer's Comments, including whether or not the directed surveillance should continue:	
9. Authorised Officer's Statement:	
I, [insert name], hereby agree that the directed surveillance investigation/operation as detailed above should [continue until its next review/renewal] [be cancelled immediately]	
Name (Print):	Job Title:
Signature:	Date:
Renewal From: _____	Date: _____
10. Date of next review	

NB: A copy of this Form (once it has been authorised or rejected) must be sent to the Legal and Democratic Services Manager within one week of the authorisation or rejection for the Council's Corporate Register



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FORM A4

CANCELLATION OF A DIRECTED SURVEILLANCE AUTHORISATION

PART II OF THE REGULATION OF INVESTIGATORY POWERS ACT 2000 (RIPA)

Guidance Note:

1. After [] only Authorised Officers who have been certified by the Legal and Democratic Services Manager will be allowed to sign RIPA forms.
2. Applicants and Authorised Officers must comply, in full, with the Act and the Council's RIPA Corporate Policy & Procedures Document and any other guidance issued by the Legal and Democratic Services Manager. If in doubt, contact Tonya Meers, Legal and Democratic Services Manager, The Deane House, Belvedere Road, Taunton, TA1 1HE. Tel: 01823 356406
3. Copies of completed forms must be sent (once authorised or rejected) to the Legal and Democratic Services Manager within 1 week of the authorisation, rejection, renewal or cancellation for the Corporate Register.
4. All boxes in this form must be completed. 'Not applicable', N/A or lines must be put through irrelevant boxes.

SECTION 1 (To be completed by the Applicant)

Subject of surveillance		Unique Identification Number (UNI):	/ /
			Year / Group / Number

Name of Applicant:		Unit/Division:	
Full Address:			
Contact Details:			
Investigation/Operation Name: (if applicable)			
Form A1 UIN:		Form A2 UIN:	Form A3 UIN:

Details of cancellation

1. Explain the reason(s) for the cancellation of the authorisation:

2. Explain the value of surveillance in the operation:

SECTION 2 (To be completed by the Authorised Officer)

3. Authorised Officer's Statement:	
I, [insert name], hereby authorise the cancellation of the directed surveillance investigation/operation as detailed above.	
Name (Print): Job Title:	
Signature: Date:	

4. Time and Date of when the Authorised Officer instructed the surveillance to cease:			
Date:		Time:	

5. Authorisation cancelled:	Date:	Time:
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NB: A copy of this Form (once it has been authorised or rejected) must be sent to the Legal and Democratic Services Manager within one week of the authorisation or rejection for the Council's Corporate Register

APPENDIX 5

RIPA 'B' FORMS: COVERT HUMAN INTELLIGENCE SOURCE (CHIS)

Additional Notes on CHIS (This is an extract from the Home Office Code of Practice on CHIS)

MANAGEMENT OF SOURCES

Tasking

1. Tasking is the assignment given to the source by the persons defined at sections 29(5)(a) and (b) of the 2000 Act, asking him to obtain information, to provide access to information or to otherwise act, incidentally, for the benefit of the relevant public authority. Authorisation for the use or conduct of a source is required prior to any tasking where such tasking requires the source to establish or maintain a personal or other relationship for a covert purpose.
2. The person referred to in section 29(5)(a) of the 2000 Act will have day to day responsibility for:
 - dealing with the source on behalf of the authority concerned;
 - directing the day to day activities of the source;
 - recording the information supplied by the source; and
 - monitoring the source's security and welfare;
3. The person referred to in section 29(5)(b) of the 2000 Act will be responsible for the general oversight of the use of the source.
4. In some instances, the tasking given to a person will not require the source to establish a personal or other relationship for a covert purpose. For example a source may be tasked with finding out purely factual information about the layout of commercial premises. Alternatively, a Trading Standards Officer may be involved in the test purchase of items which have been labelled misleadingly or are unfit for consumption. In such cases, it is for the relevant public authority to determine where, and in what circumstances, such activity may require authorisation.
5. It is not the intention that authorisations be drawn so narrowly that a separate authorisation is required each time the source is tasked. Rather, an authorisation might cover, in broad terms, the nature of the source's task. If this changes, then a new authorisation may need to be sought.

6. It is difficult to predict exactly what might occur each time a meeting with a source takes place, or the source meets the subject of an investigation. There may be occasions when unforeseen action or undertakings occur. When this happens, the occurrence must be recorded as soon as practicable after the event and, if the existing authorisation is insufficient it should either be updated and re-authorised (for minor amendments only) or it should be cancelled and a new authorisation should be obtained before any further such action is carried out.
7. Similarly where it is intended to task a source in a new way or significantly greater way than previously identified, the persons defined at section 29(5)(a) or (b) of the 2000 Act must refer the proposed tasking to the authorising officer, who should consider whether a separate authorisation is required. This should be done in advance of any tasking and the details of such referrals must be recorded.

Management responsibility

8. Public authorities should ensure that arrangements are in place for the proper oversight and management of sources, including appointing individual officers as defined in section 29(5)(a) and (b) of the 2000 Act for each source.
9. The person responsible for the day-to-day contact between the public authority and the source will usually be of a rank or position below that of the authorising officer.
10. In cases where the authorisation is for the use or conduct of a source whose activities benefit more than a single public authority, responsibilities for the management and oversight of that source may be taken up by one authority or can be split between the authorities.

Security and welfare

11. Any public authority deploying a source should take into account the safety and welfare of that source, when carrying out actions in relation to an authorisation or tasking, and to foreseeable consequences to others of that tasking. Before authorising the use or conduct of a source, the authorising officer should ensure that a risk assessment is carried out to determine the risk to the source of any tasking and the likely consequences should the role of the source become known. The ongoing security and welfare of the source, after the cancellation of the authorisation, should also be considered at the outset.
12. The person defined at section 29(5)(a) of the 2000 Act is responsible for bringing to the attention of the person defined at section 29(5)(b) of the 2000 Act any concerns about the personal circumstances of the source, insofar as they might affect:
 - the validity of the risk assessment
 - the conduct of the source, and
 - the safety and welfare of the source.

13. Where deemed appropriate, concerns about such matters must be considered by the authorising officer, and a decision taken on whether or not to allow the authorisation to continue.

Form B1 : Application for authorisation of the Use or Conduct of a Covert Human Intelligence Source (CHIS).

Form B2 : Application for Renewal of Form B 1.

Form B3 : Review of Form B 1.

Form B4 : Cancellation of Form B1



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FORM B1

APPLICATION FOR AUTHORISATION OF THE USE OR CONDUCT OF A COVERT HUMAN INTELLIGENCE SOURCE (CHIS)

PART II OF THE REGULATION OF INVESTIGATORY POWERS ACT 2000 (RIPA)

Guidance Note:

1. After [] only Authorised Officers who have been certified by the Legal and Democratic Services Manager will be allowed to sign RIPA forms.
2. Applicants and Authorised Officers must comply, in full, with the Act and the Council's RIPA Corporate Policy & Procedures Document and any other guidance issued by the Legal and Democratic Services Manager. If in doubt, contact Tonya Meers, Legal and Democratic Services Manager, The Deane House, Belvedere Road, Taunton, TA1 1HE. Tel: 01823 356406
3. Copies of completed forms must be sent (once authorised or rejected) to the Legal and Democratic Services Manager within one week of the authorisation, rejection, renewal or cancellation for the Corporate Register.
4. All boxes in this form must be completed. NOT APPLICABLE, N/A or lines must be put through irrelevant boxes.

SECTION 1 (to be completed by the Applicant)

Subject of surveillance		Unique Identification Number (UNI):	/ /
			Year / Group / Number

Name of Applicant:		Unit/Division:	
Full Address:			
Contact Details:			
Investigation/Operation Name (if applicable):			

Details of application:

1. Give Job Title of Authorised Officer:

2. Identify which grounds the action is necessary under Section 29(3) of RIPA: (delete as necessary)
<ul style="list-style-type: none"> • In the interests of national security; • For the purpose of preventing or detecting crime or of preventing further disorder; • In the interests of the economic well-being of the United Kingdom; • In the interests of public safety; • For the purpose of protecting public health; • For the purpose of assessing or collecting any tax, duty, levy or other imposition, contribution or charge payable to a government department

3. Explain why the use or conduct of a covert human intelligence source (CHIS) is necessary in this particular case:

4. Explain why the authorised use or conduct of a source is proportionate to what it seeks to achieve:

5. Details of the purpose for which the source will be tasked or deployed:

6. Where a specific investigation or operation is involved, details of that investigation or operation:

7. Nature of what the source will be tasked to do:

8. Details of the risk assessment on the security and welfare of using the source:

9. Collateral Intrusion: Indicate any potential for collateral intrusion on persons other than those targeted: include a plan to minimize collateral instruction.

10. Confidential Information: Indicate the likelihood of acquiring any confidential information.

11. Anticipated Start:	Date:	Time:
------------------------	-------	-------

12. Applicant's Details:	
Name (print): _____	Tel No: _____
Job Title: _____	Date: _____
Signature: _____	

SECTION 2 (To be completed by the Authorised Officer)

13. Authorised Officer's comments: This box must be completed.

14. Authorised Officer's Statement:			
1. I, [insert name], hereby authorise [or reject the application for] the use/conduct of the source as detailed above. This written authorisation will cease to have effect if not actioned within a period of 3 months.			
2. The Applicant will review this authorisation on _____ to see whether the authorisation should be renewed or cancelled.			
3. The Applicant will take appropriate action on _____ to seek the renewal or cancellation of this authorisation from the Authorised Officer.			
Name (Print):		Job Title:	
Signature:		Date:	

15. Date of first review:	
16. Date of subsequent reviews of this authorisation:	

17. Confidential Information Authorisation:			
Name (Print):		Job Title:	
Signature:		Date:	
From	Time: _____	Date: _____	

18. Urgent Authorisation: Details of why application is urgent:	
Name (Print):	Job Title:
Signature:	Date:

19. Authorised Officer's statement: (This must include why the authorising officer or the person entitled to act in their absence considered the case urgent)	
20 Please give the reasons why the person entitled to act in urgent cases considered that it was not reasonably practicable for the authorisation to be considered by a person otherwise entitled to act:	
Name (Print):	Job Title:
Signature:	Date:

NB: A copy of this Form (once it has been authorised or rejected) must be sent to the Legal and Democratic Services Manager within one week of the authorisation or rejection for the Council's Corporate Register



STRICTLY PRIVATE AND CONFIDENTIAL

FORM B2

APPLICATION FOR RENEWAL OF A COVERT HUMAN INTELLIGENCE SOURCE (CHIS) AUTHORISATION (Please attach the original authorisation)

PART II OF THE REGULATION OF INVESTIGATORY POWERS ACT 2000 (RIPA)

Guidance Note:

1. After [] only Authorised Officers who have been certified by the Legal and Democratic Services Manager will be allowed to sign RIPA forms.
2. Applicants and Authorised Officers must comply, in full, with the Act and the Council's RIPA Corporate Policy & Procedures Document and any other guidance issued by Legal and Democratic Services Manager. If in doubt, contact Tonya Meers, Legal and Democratic Services Manager, The Deane House, Belvedere Road, Taunton, TA1 1HE. Tel: 01823 356406
3. Copies of completed forms must be sent (once authorised or rejected) to the Legal and Democratic Services Manager within one week of the authorisation, rejection, renewal or cancellation for the Corporate Register.
4. All boxes in this form must be completed. 'Not applicable', N/A or lines must be put through irrelevant boxes.

SECTION 1 (To be completed by the Applicant)

Subject of surveillance		Unique Identification Number (UNI):	/ /
			Year / Group / Number

Name of Applicant:		Unit/Division:	
Full Address:			
Contact Details:			
Investigation/Operation Name (if applicable):			
Renewal relates to Form B1:	(Department)	(Year)	(Number)

Details of renewal:

1. Renewal numbers and dates of any current and previous renewals:	
Renewal Number	Date:

2. Detail any significant changes to the information in the previous authorisation:

--

3. Detail any significant changes to the information as listed in the original authorisation as it applies at the time of the renewal:

--

4. Detail why it is necessary to continue with the authorisation, including details of any tasking given to the source:

--

5. Detail why the use or conduct of the source is still proportionate to what it seeks to achieve:

--

6. Detail the use made of the source in the period since the grant of authorisation or as the case may be, latest renewal of the authorisation:

7. List the tasks given to the source during that period and the information obtained from the conduct or use of the source:

8. Detail the results of regular reviews of the use of the source:

9. Give details of the review of the risk assessment on the security and welfare of using the source:

10. Applicant's Details:	
Name (print): _____	Tel No: _____
Job Title: _____	Date: _____
Signature: _____	

SECTION 2 (To be completed by the Authorised Officer)

11. Authorised Officer's Comments: This box must be completed

12. Authorised Officer's Statement:
I, [insert name], hereby authorise [or reject the application for] the renewal of the conduct/use of the source as detailed above. The renewal of this authorisation will last for 12 months further renewed in writing.
This authorisation will be reviewed frequently to assess the need for the authorisation to continue.
Name (Print): Job Title:
Signature: Date:
Renewal Time: Date: From:

Date of first review:	
Date of subsequent reviews of this authorisation:	

NB: A copy of this Form (once it has been authorised or rejected) must be sent to the Legal and Democratic Services Manager within one week of the authorisation or rejection for the Council's Corporate Register



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FORM B3

REVIEW OF A COVERT HUMAN INTELLIGENCE SOURCE (CHIS) AUTHORISATION

PART II OF THE REGULATION OF INVESTIGATORY POWERS ACT 2000 (RIPA)

Guidance Note:

1. After [] only Authorised Officers who have been certified by the Legal and Democratic Services Manager will be allowed to sign RIPA forms.
2. Applicants and Authorised Officers must comply, in full, with the Act and the Council's RIPA Corporate Policy & Procedures Document and any other guidance issued by Legal and Democratic Services Manager. If in doubt, contact Tonya Meers, Legal and Democratic Services Manager, The Deane House, Belvedere Road, Taunton, TA1 1HE. Tel: 01823 356406
3. Copies of completed forms must be sent (once authorised or rejected) to the Legal and Democratic Services Manager within one week of the authorisation, rejection, renewal or cancellation for the Corporate Register.
4. All boxes in this form must be completed. 'Not applicable', N/A or lines must be put through irrelevant boxes.

SECTION 1 (To be completed by the Applicant)

Subject of surveillance		Unique Identification Number (UNI):	/	/
			Year / Group / Number	

Name of Applicant:		Unit/Division:			
Full Address:					
Contact Details:					
Operation Name:		Form B1 UIN			
Date of authorisation or last renewal:		Expiry date of authorisation or last renewal:			
		Form B2 UIN			

Details of renewal:

1. Review number and dates of any current and previous renewals:	
Renewal Number	Date:

2. Summary of the investigation/operation to date, including what information has been obtained and the value of the information so far obtained:

3. Detail the reasons why it is NECESSARY to continue with using a Covert Human Intelligence Source.

4. Explain how the proposed activity is still PROPORTIONATE to what it seeks to achieve:

5. Detail any incidents of collateral intrusion and the likelihood of any further incidents of collateral intrusions occurring:

6. Give details of any confidential information acquired or accessed and the likelihood of acquiring confidential information:

7. Give details of the review of the risk assessment on the security and welfare of using the source:

8. Applicant's Details:	
Name (print): _____	Tel No: _____
Job Title: _____	Date: _____
Signature: _____	

SECTION 2 (To be completed by the Authorised Officer)

9. Authorised Officer's Comments, including whether or not the use or conduct of the source should continue:

10. Authorised Officer's Statement:	
I, [insert name], hereby agree that the use/conduct of the source as detailed above should [continue until its next review/renewal] [be cancelled immediately].	
Name (Print):	Job Title:
Signature:	Date:
Date of next review	

NB: A copy of this Form (once it has been authorised or rejected) must be sent to the Legal and Democratic Services Manager within one week of the authorisation or rejection for the Council's Corporate Register



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FORM B4

CANCELLATION OF AN AUTHORISATION FOR THE USE OR CONDUCT OF A COVERT HUMAN INTELLIGENCE SOURCE

PART II OF THE REGULATION OF INVESTIGATORY POWERS ACT 2000 (RIPA)

Guidance Note:

1. After [] only Authorised Officers who have been certified by Legal and Democratic Services Manager will be allowed to sign RIPA forms.
2. Applicants and Authorised Officers must comply, in full, with the Act and the Council's RIPA Corporate Policy & Procedures Document and any other guidance issued by the Legal and Democratic Services Manager. If in doubt, contact Tonya Meers, Legal and Democratic Services Manager, The Deane House, Belvedere Road, Taunton, TA1 1HE. Tel: 01823 356406
3. Copies of completed forms must be sent (once authorised or rejected) to the Legal and Democratic Services Manager within one week of the authorisation, rejection, renewal or cancellation for the Corporate Register.
4. All boxes in this form must be completed. 'Not applicable', N/A or lines must be put through irrelevant boxes.

SECTION 1 (To be completed by the Applicant)

Subject of surveillance		Unique Identification Number (UNI):	/ /
			Year / Group / Number

Name of Applicant:		Unit/Division:	
Full Address:			
Contact Details:			
Investigation/Operation Name: (if applicable)			
Form B1 UIN:		Form B2 UIN:	Form B3 UIN:

Details of cancellation:

1. Explain the reason(s) for the cancellation of the authorisation:

2. Explain the value of the source in the operation:

SECTION 2 (To be completed by the Authorised Officer)

3. Authorised Officer's Statement:
I, [insert name], hereby authorise the cancellation of the use/conduct of the source as detailed above.
Name (Print): Job Title:
Signature: Date:

4. Time and Date of when the Authorised Officer instructed the surveillance to cease:
Date: <input type="text"/> Time: <input type="text"/>

5. Authorisation cancelled:	Date: <input type="text"/>	Time: <input type="text"/>
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NB: A copy of this Form (once it has been authorised or rejected) must be sent to the Legal and Democratic Services Manager within one week of the authorisation or rejection for the Council's Corporate Register

APPENDIX 6

EXAMPLES OF COVERT SURVEILLANCE

The following are examples of covert surveillance operations that may be conducted by Council staff, with indications as to whether RIPA authorisation may be needed.

If there are any special circumstances to an operation which, in general terms, matches one of the examples below, then the need for authorisation should be re-assessed by the Case Officer.

Example 1 -

Use of fixed CCTV cameras to record fly-tipping in the area around Recycling Centres in Council Car Parks.

Points to consider:

- a) The cameras are in plain view and are therefore not covert, even if they are being used as part of a defined and pre-planned Operation.
- b) By definition, these are well-used public areas and any expectation as to privacy would be minimal.
- c) Collateral intrusion and the opportunity to obtain private information is unlikely.

Recommendation:

Unless there are additional and unusual features to the Operation, RIPA Authorisation would not be required.

Example 2 –

Use of temporary surveillance cameras to record flytipping in a public area such as a layby or a wooded area close to a road.

Points to consider:

- a) Cameras and recording equipment would be deliberately concealed from view.
- b) Although the area is accessible to the public, it is likely to be less frequented than, for example, a Council car park. There would therefore be a heightened expectation as to privacy.
- c) The fact that flytipping is an illegal act does not reduce the perpetrators' rights to be protected.

- d) Collateral intrusion and the opportunity to obtain private information, are more likely than in Example 1, above.

Recommendation:

On balance, RIPA authorisation for Directed Surveillance should be obtained.

This could be avoided by the publication in the local press beforehand of an article explaining that a given area would be placed under surveillance for a given period of time. However, this would largely negate the usefulness of the Operation.

Example 3 –

Use of noise recording equipment, in a complainant's property, with the tape recorder being operated by the complainant when noise events occur.

Points to consider:

- a) The equipment is concealed from the occupants of the premises under surveillance (the Object). It is therefore a covert operation, unless the occupants of the premises under audio surveillance had been warned, in writing, that surveillance may be carried out within a given period of time.
- b) The premises under surveillance are not public in any sense, and the expectation as to privacy would be very high.
- c) Noise events coming from the premises under surveillance and affecting the complainant's premises might be regarded as no longer being private, as boundaries into other areas had been crossed by the time the noise was recorded.

However, there may well be instances (for example between poorly insulated flats or rooms within bedsits) where this consideration does not apply.

- d) The possibility of collateral intrusion and the opportunity to obtain private information, are likely.
- e) As the tape recording is operated by the complainant, it is possible (s)he is acting as a Covert Human Intelligence Source (CHIS).

Recommendation:

- a) RIPA authorisation for Directed Surveillance should be sought by the Case Officer when the premises under surveillance are residential, unless:
 - i) The occupants of the premises under surveillance had been warned, in writing and in advance, that audio surveillance may be used, and/or

- ii) There is such separation between the complainant's property and the property under surveillance that it could not be claimed that noise events passing from one to the other were of a private nature.
- b) RIPA authorisation of the complainant as a CHIS should be considered if there was any form of relationship between the complainant and the occupants of the premises under surveillance. A relationship may include, for example, long-term neighbours who regularly speak to each other and who may, generally, be on good terms.

However, the need for Authorisation would only seem to apply if it is the clear intention to use this relationship, covertly, for the express purpose of obtaining confidential information. Clearly, in practically every case, this would not be the intention.

However, if the complainant may be able to influence the onset of a noise event from the object premises by using their relationship with the object, then the use of monitoring equipment, with or without RIPA Authorisation(s) would be inappropriate. To give an extreme example, the complainant may say to the object "...we are going out tonight, so you can play your music as loud as you like!".

Note: If the complainant, including any member of their household who may operate noise recording equipment, is judged to be acting as a CHIS, then it is immaterial whether or not the object has been informed of the likelihood of audio surveillance. Authorisation as a CHIS would still be required.

As part of the CHIS Authorisation, careful consideration must be given to the conditions to be imposed to prevent misuse of the relationship between complainant and object.

Example 4_–

Covert observation of a Night Club entrance to determine the number of patrons in the premises.

Points to consider:

- a) No image or sound recording equipment is in use, so the opportunities for either collateral intrusion or of obtaining private information do not apply.
- b) No individual person is under surveillance.
- c) The queue that forms outside a Night Club is, by its nature, in a public place and is likely to be one that is well used.

Expectations as to privacy by any person outside the Club premises would therefore be very low.

Recommendation:

Unless there are additional and unusual features to the Operation, RIPA Authorisation would not be required.

Example 5 –

Asking a disabled person to book a taxi and complete a journey to determine whether the taxi driver was discriminatory and to report back to Licensing for possible enforcement action.

Points to consider:

- a) The purpose of the journey would be to gather information.
- b) It would be pre-planned.
- c) It would be designed to be covert.
- d) The nature and duration of the exercise make it likely that that a relationship, in legal terms, would be formed.
- e) The expectation as to privacy would be high.
- f) It is likely that, whether planned or not, confidential information would be obtained.

Recommendation:

- a) It is considered that an Authorisation for Directed Surveillance would be required.
- b) It is also considered that the disabled person would qualify as a CHIS, so that additional Authorisation would be required specifically for that aspect.
- c) If it were intended to record conversation between the parties, this would constitute Intrusive Surveillance. Authorisation would not be possible and the surveillance itself would be unlawful.

END



Corporate Governance Committee – 15th March 2010

MEMBER/OFFICER PROTOCOL

Report of LEGAL & DEMOCRATIC SERVICES MANAGER

(This matter is the responsibility of Councillor Ross Henley, Leader of the Council)

1. Purpose of the Report

1.1 To approve the revised Member/officer protocol for inclusion into the constitution.

2. Background

2.1 Following a review of the constitution it was felt that the member/officer protocol needed to be updated as it had not been done since the constitution was first approved in 2001 and needed to reflect updated ways of working.

2.2 A report was therefore put to the Standards Committee on the 19th January 2010 with a revised agreement. The Standards Committee approved the new protocol but acknowledged that it would need to be circulated through other channels such as the Corporate Management Team and Corporate Governance Committee.

2.3 The revised protocol has been through CMT and approved and has also been to the Constitutional Sub-Committee who have made some minor changes to the protocol. These changes are identified in tracked changes and set out in Appendix A to this report.

2.4 It should also be noted that this revised protocol also meets one of the principals as set out in the local code of corporate governance.

3. Recommendation

3.1 To approve the revised member/officer protocol.

For further information please contact Tonya Meers, Legal & Democratic Services Manager on 01823 356391 or t.meers@tauntondeane.gov.uk

**PROTOCOL
FOR
MEMBER-OFFICER
RELATIONS**

Protocol for Member/Officer Relations

1. Introduction

Members and officers are both involved in furthering the best interests of the community they serve. Although they work together to fulfil certain goals, the roles played out by Members and officers are different and the relationship between the elected Member and professional officer needs to reflect those roles.

Both Members and officers are servants of the public and they are indispensable to one another but their responsibilities are distinct. Elected Members are responsible to the electorate and serve only so long as their term of office lasts. Officers are responsible to the Council as a whole. In addition the Council also has non-elected Members who sit as Independent Members on the Standards Committee. The term in this Protocol will refer to Members collectively unless otherwise stated.

In Taunton Deane the culture between Members and officers is one of openness and approachability, with Members able to contact officers at the most appropriate level to discuss an issue or raise a query. This approach has worked well for both Members and officers, and it has built up good working relationships. In the interests of maintaining these good relationships this protocol aims to offer guidance to Members and officers in their dealings with one another. It will not cover every possible situation, but is intended to be a framework for good relations.

This protocol should be recognised both as a central element of the Council's corporate governance and as a commitment to upholding standards of conduct in public life. It is one way of demonstrating to the public at large that local government is serious about protecting its integrity and reputation.

Members and officers must at all times observe this protocol. It should not be considered simply as a list of do's and don'ts but also as guidance on cultural and behavioural matters to ensure that the Council benefits from good working relationships and achieves its full potential in delivering services to the community it serves.

2. Fundamental Principles

- Members and officers of the Council are obliged to act within the law and in compliance with relevant standards and codes of conduct.

- The role of a Member is defined by Statute. In law all Members are equal and have the responsibility as trustees to the community as a whole.
- The duty of a Member is to the whole community, with a special duty (if a Councillor) to their constituents although this duty cannot override any relevant statutory provisions.
- Officers serve the whole Council as a single statutory corporate body.
- Officers advise the Executive, the Council and its Committees and are responsible for ensuring that the decisions of the Council are effectively implemented.
- Officers are required to be politically neutral and, for some employees, this is enforced through political restrictions imposed by the Local Government and Housing Act 1989.
- The interests of the Council are best served where there is mutual confidence and trust between all Members and officers.
- Both Members and officers have responsibility for decision making within the schemes of delegation for both Council and Executive functions as set out in the Council's Constitution
- Members should understand and respect the roles of the Council's main statutory officers (namely, the Chief Executive as Head of the Paid Service, the Legal and Democratic Services Manager as Monitoring Officer and the Strategic Director as Section 151 Officer)
- The Chief Executive and senior officers working with her should work closely with Members of the ruling group to ensure effective policy development and efficient executive decision making.
- Officers will provide support to all Members in their local or representational role.

3. The Relationship between Members and Officers: General

Respect and Courtesy

- (a) For the effective conduct of Council business there must be mutual respect and courtesy in all meetings and contacts, both formal and informal, between Members and officers. It is very important that both Members and officers remember their respective obligations to

enhance the Council's reputation and to do what they can to avoid criticism of Members and officers.

- (b) If an officer is in breach of this requirement, then the member should follow the form of redress as set out in section 6 of this protocol.
- (c) If a Member is in breach, then section 6 of this protocol should be followed ..

Undue Pressure

- (a) In their dealings with Chief Officers and, more particularly, other officers, Members must remain aware at all times that officers have no discretion to act outside Council policies.
- (b) A Member shall not apply undue pressure on any individual officer to do anything that outside of their job description or outside of the contract of employment. A Member shall not seek to instruct, or direct the work of, individual employees, nor create a situation that places, or could place, any officer in conflict with his or her line manager.
- (c) Similarly, an officer must neither seek to use undue influence on an individual Member to make a decision in that officer's favour or to his or her advantage, nor raise with a Member personal matters to do with their work, nor make claims or allegations to a Member about another Member or officer.

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Familiarity

Close familiarity between Members and officers must be avoided. It can damage the principle of mutual respect and could lead to the passing of confidential information, or information which should not properly be passed between them. Such familiarity could also cause embarrassment to other Members and/or officers or could give rise to a suspicion or perceptions of favouritism.

4. Provision of Advice

- (a) Members must recognise that officers have the duty and right to provide appropriate professional advice, and the right to have that

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advice recorded, so that all Members are fully aware of the implications of their decisions.

- (b) Officers should recognise that it is the right of the Members to take the final decisions in the light of their advice.
- (c) The provision of that advice is that the principal means by which Members can gain assurance that their decisions comply with the law and relevant standards or codes of conduct and are in accordance with Council policies and procedures. Members must avoid taking actions which are unlawful, financially improper or likely to amount to maladministration. Members have an obligation under their Code of Conduct to have regard, when reaching decisions, to any advice provided by the Monitoring Officer or the S151 Finance Officer.
- (d) The advice provided by the officers should be factual, honest, objective, politically neutral and based on professional experience and expertise.
- (e) The advice should be sensitive to the political aspirations and constraints of Members but should not reflect, or be influenced by, those aspirations and constraints.
- (f) The advice given by officers will have the ultimate aim of serving the interests of the Council as a whole, irrespective of whether the current emphasis of an officer's role is to the Executive, Overview and Scrutiny or any regulatory committee. It is accepted that officers will be working with their portfolio holder and that this is normal practice.
- (g) It is improper for any Member to seek to influence any officer's advice and/or recommendations by subjecting any officer to undue pressure. Such advice and recommendations must be those of the officer only.

Information and the Political Perspective

- (a) All information will be open and accessible, subject to legislative requirements on exempt and confidential information and the Data Protection Act.
- (b) For the proper functioning of the Council as a whole, officers will normally be permitted to share information freely between each other.

- (c) Where the information has been supplied/received subject to a request for party political confidentiality, an officer will be permitted to share that information with other officers if he/she believes that to be necessary - for example for the purpose of verifying the legality, financial probity or procedural regularity of any proposed course of action disclosed by that information. However, the request for party political confidentiality will be confined to, and honoured by, any officers with whom the information is shared.
- (d) Appropriate and regular liaison between Members and officers connected with the Executive and Overview and Scrutiny aspects of the Council should avoid the relationship between Overview and Scrutiny and the Executive becoming adversarial and polarised. This liaison, combined with the politically balanced nature of Overview and Scrutiny, should reduce the number of occasions on which it is necessary for information to be supplied by Councillors to officers on a party political confidential basis at the Executive/ Overview and Scrutiny levels.
- (e) Officers can share with the appropriate Portfolio Holder any factual information supplied to any other Member. However regard must be given to political confidentiality.
- (f) Where information is supplied to officers on a party political confidential basis, the officers will respect that confidentiality unless the officers believe that the proposed course of action appears to be in conflict with the law, or any relevant standards or codes of conduct, or would amount to an abuse of the processes of the Council.
- (g) Where party political confidentiality would be maintained in accordance with the preceding sub-paragraph, the officers may, nonetheless, seek to persuade the Members requesting the confidentiality to agree to that information being shared with the other political groups on the grounds that it would assist the more effective functioning of the Council; however, in the absence of any such agreement to waive the confidentiality, the officers would continue to respect it.
- (h) Where there is a change in Political Administration, the officers will act in relation to the new Administration and opposition party or parties in the same way as they did for the old; and will continue to respect any continuing party political confidentiality.

Party Group Meetings and Officers

- (a) Only senior officers may properly be asked to provide advice and information on matters concerning Council business by party groups but should not contribute to deliberations of the group. An officer who is not a senior officer shall not be invited to attend a party group meeting, but a senior officer may nominate another officer to attend on his/her behalf. In their dealings with party groups, officers must treat each group in a fair, transparent and even-handed manner. If one group requests particular support then other groups will be offered the opportunity to have similar support.
- (b) Officers have the right to refuse such requests and will not attend a meeting of a party group where some of those attending are not Members of the Council, unless specific authority has been given by the Chief Executive who has the discretion to discuss the request with other Group Leaders.
- (c) Officer support will not extend beyond providing factual information or professional advice in relation to matters of Council business. Officers must not be involved in advising on matters of party business and therefore should not be expected to be present at meetings or parts of meetings when such matters are to be discussed.
- (d) Party group meetings are not empowered to make decisions on behalf of the Council and conclusions reached at such meetings do not rank as formal decisions. The presence of an officer does not confer formal status on such meetings in terms of Council business and must not be interpreted as doing so.
- (e) Where officers provide factual information and advice to a party group in relation to a matter of Council business, this will not be a substitute for providing all the necessary information and advice when the matter in question is formally considered by the relevant part of the Council.
- (f) It must not be assumed that an officer is supportive of a particular policy or view considered at a party group meeting simply because he/she has attended or provided information to the meeting of the group.
- (g) Officers will respect the confidentiality of any party group discussions at which they are present and unless requested to do so by that party group, will not relay the content of such discussions to another party group or to any other members. This shall not prevent an officer providing feedback to other senior officers on a need-to-know basis.

- (h) Members must not do anything which compromises or is likely to compromise officers' impartiality. The duration of an officer's attendance at a party group meeting will be at the discretion of the group, but an officer may leave at any time if he/she feels it is no longer appropriate to be there.
- (i) An officer should be given the opportunity of verifying their comments and advice attributed to him/her in any written record of a party group meeting should they wish to do so.

5. Members' and Officers' Free Time

Both Members and officers have a right to free time outside of their Council roles. Council business should only be discussed when both Member and officer are acting in their official capacity and free time outside of those roles should be respected.

6. Redress

- (a) Local Government is dependent on good working relations and respect between Members and officers. It is important, therefore, that Members do not harass or verbally abuse officers, and vice versa. (Note: Paragraph 3 of the Members Code of Conduct and the attached appendix to this Protocol proscribes any bullying conduct by a Member). Officers may not feel in a position to respond to the Member's criticism. If such an incident should occur – and has not been settled – it should be drawn to the attention of the Chief Executive and/or the Monitoring Officer for it to be resolved in consultation with the individual Member's Group Leader.
- (b) If a Member considers that they have not been treated properly by an officer, they should first try to resolve the matter through direct discussion with that officer.
- (c) The Member may raise the matter with the officer's Line Manager or Strategic Director if the matter cannot be resolved through such discussion. A Member may raise the issue with the Chief Executive if it remains unresolved. Where appropriate, disciplinary action may be taken against an officer.
- (d) Similarly, if an officer feels that they have not been treated properly by a Member and they feel unable to resolve the matter directly with that Member, the officer should raise the issue with the appropriate Strategic Director or Chief Executive. In such circumstances the Strategic Director or Chief Executive will take

such action as is appropriate, including, if necessary, raising the matter with the relevant Group Leader.

- (e) The Strategic Director will inform the Chief Executive if the Group Leader becomes involved, and, in other cases, where appropriate.
- (f) If any matter covered by (d) above involves an actual or potential breach of the Code of Conduct for Members, it should be referred to the Monitoring Officer.

7. Arbitration

When necessary or appropriate, the Chief Executive will arbitrate on the interpretation of this Protocol.

Protocol on Harassment, Intimidation and Unacceptable Behaviour

1. Introduction

Taunton Deane Borough Council expects the highest standard of behaviour from its Members and officers. It recognizes acceptable behaviour as the norm and any form of inappropriate behaviour, including harassment or intimidation is unacceptable. The Council views any harassment or other inappropriate behaviour with the utmost seriousness and is committed to taking positive action to eradicate it.

Unacceptable behaviour by officers will be dealt with through the Council's grievance and disciplinary procedures. As elected and non-elected Members are not employees they are therefore not subject to employee disciplinary procedures, this protocol will apply where a Member or non-elected Member or officer feels that they are being treated in an unacceptable way by a Member or non-elected Member of the Council.

2. What is Harassment and Intimidation?

Harassment and intimidation take many forms, therefore it is difficult to give a single definition. It may be directed at an individual or a group and it may be unintentional. If you feel that you have been treated in a way that is detrimental to your dignity, then you may have been subjected to harassment. Essentially, harassment is unwanted, unreasonable, unwelcome or offensive treatment and includes bullying and threatening behaviour. It includes any treatment which the officer or member considers to be unreasonable and unwelcome and which causes intimidation or offence.

Members and non-elected Members are not employees of the Council and are therefore not part of the usual management arrangements. It is easy for officers to be overawed by Members and non-elected Members therefore all Members need to be aware that they are not in the usual manager/subordinate relationship.

Harassment and/or intimidation may show itself in different ways, including the following:-

- physical contact, from touching to serious assault;
- bullying, for example threatening behaviour, constant unwarranted criticism, belittling or exclusion by colleagues;
- intimidation including threats concerning job security or promotion;
- jokes, offensive language, suggestive remarks ;
- visual display, e.g. pictures or posters which could cause offence;
- discrimination, for example on the grounds of race, religion, ethnic origin, disability, gender or sexual orientation, or age coercion;
- indecent, suggestive or over-familiar behaviour or obscene gestures;
- undue pressure to take or make a particular decision;
- misuse of powers in order to intimidate or undermine.

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3. The Implications of Harassment

There are many consequences for the Council if it accepts or tolerates intimidation, harassment, threatening and bullying and other forms of unacceptable behaviour. Such incidents could result in substantial employment claims against the Council for discrimination, stress or other matters. The Council is also mindful of the comments by the Society of Local Authority Chief Executives that they believe that:-

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“Good local authorities are characterised by two things: clear political leadership and strong management competencies. We believe that these cannot exist in places where a climate of bullying and fear is seen as acceptable. We further believe that such behaviour provides a breeding ground for poor performance and may even contribute to corruption where officers (and Members) feel unable to challenge decisions of overly powerful Councillors or colleagues.”

4. Making a Complaint

Any complaints by an officer about a Member or a non-elected Member should be referred in the first instance to their Strategic Director or the Chief Executive.

Complaints by a Member or non-elected Member about another Member or non-elected Member should be referred in the first instance to their Group Leader.

Initially unacceptable behaviour will be approached by mediation by or within the political group concerned where appropriate. In the event of no change in conduct or other acceptable outcome then, if appropriate, the matter may be referred to the Council's Standards Committee.

5. Encouraging Acceptable Behaviour

Acceptable behaviour in the workplace is behaviour that demonstrates a commitment to the Council's Core values. In support of this all Members, non-elected Members and officers can:-

- afford dignity, trust and respect to everyone;
- be aware of the effect of our behaviour on others;
- only make reasonable and manageable demands;
- communicate honestly and openly, clearly stating what we mean and expect of others;
- provide honest feedback based on evidence and be open to constructive criticism;
- start from the assumption that everyone is working to the best of their ability, considering the current stage of personal and professional development.

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The response to a complaint of harassment will be:- ¶
¶
<#>the complaint will be treated seriously; ¶
¶
<#>the complaint will be dealt with in a sensitive and confidential way; ¶
¶
<#>help and support throughout the process of dealing with the issue will be provided; ¶
¶
<#>anyone subjected to harassment will not suffer or be victimised through making a complaint; ¶
¶
<#>The Council will regard any such incidents as serious and they will be fully investigated and acted upon as appropriate.'



Corporate Governance Committee – 15th March 2010

CODE OF CORPORATE GOVERNANCE

Report of LEGAL & DEMOCRATIC SERVICES MANAGER

(This matter is the responsibility of Councillor Ross Henley, Leader of the Council)

1. Purpose of the Report

1.1 To note the local code of Corporate Governance.

2. Background

- 2.1 In March 2008 the Corporate Governance Committee approved the principals for a local code of Corporate Governance.
- 2.2 Unfortunately in between the departure of the Director of Corporate Governance and the arrival of the Legal & Democratic Services Manager the local code was not published and put into practice.
- 2.3 This has now been picked up and the local code has now been published into booklet format and the booklet will be circulated with this report.
- 2.4 The principals contained in the local code will be used in conjunction with the preparation of the Annual Governance Statement and will help to focus the corporate governance action plan.
- 2.5 A copy of the booklet will be circulated to all councillors and will be available to the public.

3. Recommendation

- 3.1 To note the local code of Corporate Governance.

For further information please contact Tonya Meers, Legal & Democratic Services Manager on 01823 356391 or t.meers@tauntondeane.gov.uk

TAUNTON DEANE BOROUGH COUNCIL

CORPORATE GOVERNANCE COMMITTEE 15th March 2010

INTERNAL AUDIT – REVIEW OF INTERNAL AUDIT CHARTER

REPORT OF THE GROUP AUDITOR (South West Audit Partnership)

EXECUTIVE SUMMARY

This report sets out to seek member approval for the existing terms of reference in the shape of the Internal Audit Charter governing the work of the South West Audit Partnership at Taunton Deane Borough Council.

Purpose of the Report

To obtain endorsement from members for the Internal Audit Charter.

Background

The internal audit service, provided by the South West Audit Partnership (SWAP), works to a Charter that defines its roles and responsibilities and the roles and responsibilities of the Borough Council's managers as they relate to internal audit. Best practice in corporate governance requires that the Charter be reviewed and approved annually by the Corporate Governance Committee. The Charter was last reviewed by this Committee at their meeting on 16th March, 2009.

Only one minor change has been made to the Charter since its last review. This is to implement a recommendation from the Audit Commission, the change has been to increase the time that audit staff will not be asked to review their previous departments work from six months to one year.

Recommendation

Members are asked to review and formally approve the Internal Audit Charter as attached at appendix A.

Contact Officer:-

Chris Gunn - Group Auditor
South West Audit Partnership – 07917 628779
chris.gunn@southwestaudit.gov.uk

Taunton Deane Borough Council - Internal Audit Charter

Purpose

The purpose of this Charter is to set out the nature, role, responsibility, status and authority of internal auditing within Taunton Deane Borough Council, and to outline the scope of internal audit work.

Approval

This Charter was approved by the Corporate Governance Committee on 25th September 2006 and is reviewed each year to confirm it remains accurate and up to date. It was last reviewed by the Corporate Governance Committee on 16th March, 2009.

Provision of Internal Audit Services

The internal audit service is provided by the South West Audit Partnership (SWAP) on a 5 year contract expiring on 31 March, 2015. This charter should be read in conjunction with the Trading Agreement, which forms part of the legal agreement between the SWAP partners.

The budget for the provision of the internal audit service is determined by the Council, in conjunction with the SWAP Partnership Board. The general financial provisions are laid down in the legal agreement, including the level of financial contribution by the Council, and may only be amended by unanimous agreement of the Partnership Board. The budget is based on an audit needs assessment that was carried out when determining the Council's level of contribution to SWAP. This is reviewed each year by the Strategic Director (Section 151 Officer) in consultation with the Head of Internal Audit Partnership.

Role of Internal Audit

Internal audit is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.

Responsibilities of Management and of Internal Audit

Management

Management is responsible for determining the scope, except where specified by statute, of internal audit work and for deciding the action to be taken on the outcome of, or findings from, their work. Management is responsible for ensuring SWAP has:

- the support of management and the Council; and
- direct access and freedom to report to senior management, including the Chief Executive and the Corporate Governance Committee.

Management is responsible for maintaining internal controls, including proper accounting records and other management information suitable for running the Authority. Management is also responsible for the appropriate and effective management of risk.

Internal Audit

Internal audit is responsible for operating under the policies established by management in line with best practice.

Internal audit is responsible for conducting its work in accordance with the Code of Ethics and Standards for the Professional Practice of Internal Auditing as set by the Institute of Internal Auditors. Internal Audit also complies with the CIPFA Code of Practice for Internal Audit in Local Government in the United Kingdom.

Internal audit is not responsible for any of the activities which it audits. Members of SWAP will not assume responsibility for the design, installation, operation or control of any procedures. Members of SWAP who have transferred in to the department from other areas of Taunton Deane Borough Council will not be asked to review any aspects of their previous department's work until one year has passed since they left that area.

Relationship with the External Auditors/Other Regulatory Bodies

Internal Audit will co-ordinate its work with others wherever this is beneficial to the organisation.

Status of Internal Audit in the Organisation

The Head of the Internal Audit Partnership is responsible to the SWAP Management Board and the Partnership Board. The Head of Internal Audit Partnership and the Group Auditor also report to the Strategic Director, as Section 151 Officer, and report to the Corporate Governance Committee as set out below.

Appointment or removal of the Head of Internal Audit Partnership is the sole responsibility of the Partnership Board.

Scope and authority of Internal Audit work

There are no restrictions placed upon the scope of internal audit's work. Members of SWAP engaged on internal audit work are entitled to receive and have access to whatever information or explanations they consider necessary to fulfil their responsibilities to senior management. In this regard, internal audit may have access to any records, personnel or physical property of Taunton Deane Borough Council.

Internal audit work will normally include, but is not restricted to:

- reviewing the reliability and integrity of financial and operating information and the means used to identify, measure, classify and report such information;
- evaluating and appraising the risks associated with areas under review and make proposals for improving the management of risks;
- appraising the effectiveness and reliability of the enterprise risk management framework and recommending improvements where necessary;
- assisting management and Members to identify risks and controls with regard to the objectives of the Council and its services;
- reviewing the systems established by management to ensure compliance with those policies, plans, procedures, laws and regulations which could have a significant impact on operations and reports, and determining whether Taunton Deane Borough Council is in compliance;
- reviewing the means of safeguarding assets and, as appropriate, verifying the existence of assets;
- appraising the economy, efficiency and effectiveness with which resources are employed;
- reviewing operations or programmes to ascertain whether results are consistent with established objectives and goals and whether the operations or programmes are being carried out as planned.
- reviewing the operations of the Council in support of the Council's anti-fraud and corruption policy.
- at the specific request of management, internal audit may provide consultancy services, provided:
 - the internal auditor's independence is not compromised
 - the internal audit service has the necessary skills to carry out the assignment, or can obtain such skills without undue cost or delay
 - the scope of the consultancy assignment is clearly defined and management have made proper provision for resources within the annual audit plan
 - management understand that the work being undertaken is not internal audit work.

Planning and Reporting

SWAP will submit to the Corporate Governance Committee, for information, an annual internal audit plan, setting out the recommended scope of their work in the period.

The annual plan will be developed with reference to a four-year strategic outlook for internal audit work, prepared in conjunction with management and agreed by them.

SWAP will carry out the work as agreed, report the outcome and findings, and will make recommendations on the action to be taken as a result to the appropriate manager and Director. SWAP will report at least two times a year to the Corporate Governance Committee. SWAP will also report a summary of their findings, including any persistent and outstanding issues, to the Corporate Governance Committee on a regular basis.

Internal audit reports will normally be by means of a brief presentation to the relevant manager accompanied by a detailed report in writing. The detailed report will be copied to the relevant line management, who will already have been made fully aware of the detail and whose co-operation in preparing the summary report will have been sought. The detailed report will also be copied to the Strategic Director (Section 151 Officer), the Chief Executive Officer and to other relevant line management.

The Group Auditor will submit an annual report to the Corporate Governance Committee providing an overall opinion of the status of risk and internal control within the Council, based on the internal audit work conducted during the previous year.

In addition to the reporting lines outlined above, the Head of Internal Audit Partnership and the Group Auditor have the unreserved right to report directly to the Leader of the Council, The Chairman of the Corporate Governance Committee, the Chief Executive Officer or the External Audit Manager.

Revised 15th March 2010 version 4.0

TAUNTON DEANE BOROUGH COUNCIL

CORPORATE GOVERNANCE COMMITTEE 15th MARCH 2010

INTERNAL AUDIT PLAN 2010/11

REPORT OF THE GROUP AUDITOR (this matter is the responsibility of Councillor Henley, the Leader of the Council)

EXECUTIVE SUMMARY

This report seeks the approval of the Committee for the 2010/11 Audit Plan in order that SWAP can continue to meet the emerging needs of the Council.

INTRODUCTION

The purpose of this report is to obtain approval for the Internal Audit Annual Plan for 2010/11.

BACKGROUND

It is recommended by the Council's External Auditors and is recognised best practice that an appropriate Committee of Council scrutinises and approves the annual internal audit plan. The plan presented in this report represents all planned internal audit activity for the year 2010/2011.

The annual internal audit plan is derived from a 5 year strategic audit plan that covers all activities of the Council and was devised with the co-operation and approval senior management. The strategic plan is risk based and is co-ordinated, where possible, with the audit plans of the other members of the South West Audit Partnership (SWAP). Joint audits of this kind derive real benefits in both reducing the overall time taken and in the shared lessons that can be learnt by all the partners.

Although the annual audit plan is derived from a long-term strategic plan, SWAP regularly reviews the risk status and ranking of all auditable entities. This is to ensure that the highest risk areas are always given priority for internal audit review.

We review at least once a year the current risk rank order of the strategic plan and, with the agreement of senior management, make appropriate amendments.

THE ANNUAL INTERNAL AUDIT PLAN

The audit plan is broken into four main areas of activity as detailed below. The operational reviews are comprehensive in nature and cover the entire range of risks and controls. A detailed report is issued at the end of the audit review and an agreed action plan devised.

Key control reviews are carried out in support of the work done by the Council's External Auditors and focus on financial control. These reviews are carried out annually between October and December. A report is issued for each review providing an assessment of the robustness of controls in all areas and recommending improvements, where appropriate. Where a full operational audit is planned for one of the areas normally covered under the key control review then the work is combined and co-ordinated.

Governance, Fraud and Corruption audits focuses primarily on key risks relating to cross cutting areas that are controlled and/or impact at a Corporate rather than service specific level. It also provides an annual assurance review of areas of the Council that are inherently higher risk. Internal audit will use the findings of these reviews to support the assurance we are required to provide as part of the Council's Annual Statement on Governance.

In addition to our core audit work, as described above, internal audit also provide a range of other services including risk advice, follow-up reviews, specialist advice and special investigations.

The reviews planned for 2010/11 are:

Operational Reviews	
Building Control Partnership *	IT - Threat Protection *
Choice Based Lettings *	Main Accounting
Creditors *	Partnership Arrangements (Somerset Strategic Partnership)
Customer Services *	Property Services
Debtors *	Section 106 Agreements *
IT - Corporate Back Up Routines *	Strategic Housing *
IT – SW Information Security Group *	Waste & Recycling *
Governance, Fraud and Corruption	
Business Continuity (Major Partnerships and Contractors)	Gifts and Hospitality, Register of Interests – Members
Data Quality - Performance Indicators	Gifts and Hospitality, Register of Interests – Staff
Equalities and Diversity - Impact Assessments	Performance - NI 188 Use of Natural Resources
Health and Safety (Internal Awareness and Training)	Performance - NI 179 Efficiency Statements

Income Collection (Analytical Review including Budgets and Methods of Payment)	Procurement (Category Management)
Fees and Charges	Risk Management (Risk Registers Including Major Projects)
Key Control Audits	
Capital Accounting	NNDR
Council Tax	Payroll
Housing Benefits	Treasury Management
Housing Rents	
Other Audit Activity	
Audit Commission	DLO Due Diligence Review
Contingency	General Advice
Cash Spot Checks	Special Reviews
Corporate Advice	Review of Core Council Arrangements
Corporate Meetings	

* Denotes that the Operational audit is being completed at other SWAP partner sites.

RECOMMENDATION

Members are invited to comment on and agree the Annual Audit Plan for 2010/11.

Background Papers

There are no background papers.

Contact Officer:

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TAUNTON DEANE BOROUGH COUNCIL

CORPORATE GOVERNANCE COMMITTEE 15th March 2010

INTERNAL AUDIT PLAN – PROGRESS REVIEW

REPORT OF THE GROUP AUDITOR (South West Audit Partnership)

This matter is the responsibility of Councillor Henley, the Leader of the Council.

EXECUTIVE SUMMARY

This report highlights significant findings and recommendations that have occurred since the Committee last considered the findings of Internal Audit reports in December 2009.

1. Purpose of Report

To provide members with an update on the activities of the Internal Audit team for the period January to March 2010.

2. Work undertaken by Internal Audit January to March 2010

Operational Audits - Operational audits are a detailed evaluation of a service or functions control environment. A risk evaluation matrix is devised and controls are tested. Where weaknesses or areas for improvement are identified, actions are agreed with management and target dated. For Operational Audits SWAP aim to provide management and Members with a level of assurance on the robustness of the internal control environment. The following categories of assurance have been agreed:

<p>▲☆☆☆ Comprehensive Assurance</p>	<p>The areas reviewed were found to be adequately controlled. Internal controls are in place and operating effectively at all times and risks against the achievement of objectives are well managed.</p>
<p>▲★★★ Reasonable Assurance</p>	<p>Most of the areas reviewed were found to be adequately controlled. Generally risks are well managed but some systems require the introduction or improvement of internal controls to ensure the achievement of objectives</p>
<p>▲★☆☆ Partial Assurance</p>	<p>Most of the areas reviewed were not found to be adequately controlled. Generally risks are not well managed and systems require the introduction or improvement of internal controls to ensure the achievement of objectives.</p>
<p>▲★★★ No Assurance</p>	<p>The areas reviewed were found to be inadequately controlled. Risks are not well managed and systems require the introduction or improvement of internal controls to ensure the achievement of objectives.</p>

The following operational audit has been finalised since the Committee last met in December 2009 as below:-

Audit area	Audit Opinion
Operational Audits	
Housing Rents	▲ ★ ★ ★ Partial Assurance
Officers and Members Claims and Allowances	▲ ★ ★ ★ Partial Assurance
Partnership Arrangements	Non-Opinion
Governance Audits	
Risk Management	▲ ★ ★ ★ Reasonable Assurance
	▲ ★ ★ ★ Partial Assurance
Managed Audits	
Treasury Management	▲ ★ ★ ★ Partial Assurance

Housing Rents

In the 2009-2010 financial year, two major issues have impacted on the delivery of the Housing Rents Service, as follows:-

- There have been major problems with cash postings to the Rents system associated with the introduction of the new financial system, SAP, in April 2009. There have been instances of the same batch of payments being posted to individual rent accounts two or more times. This problem has now been resolved, and during this review testing of account balances and the processes put in place to identify any re-occurrence was performed and found to be satisfactory. Because of the multiple postings, there was some doubt on the accuracy on the system rent account balances, and no recovery action was performed whilst the issues were being resolved.
- At the time of testing when the audit was completed (January 2010) there had been no recovery action on former tenant arrears. The Rent Recovery and Void Manager advised me that no sundry debtor accounts have been raised to recover outstanding rent balances on former tenants account since the SAP system was introduced at the start of the current financial year. This is because the former sundry debtor system is no longer in use and the SAP system will not be used for these invoices. Since testing was completed the Academy system has been prepared and is now being used to manage these debts and recovery action has now started.

Officers and Members Claims and Allowances

Having conducted the audit I am satisfied that the process of inputting data on to the system is robust and that payment deadlines are strictly adhered to, there were however some weaknesses in the system of internal control as follows:-

- Flaws in the authorisation of payments with approximately a quarter of all sampled claims being signed by officers not on the authorised signatory list; although I am satisfied that these officers were of sufficient seniority to do so. Management have agreed to update the list by 31 March 2010 and ensure that it is reviewed every 6 months.
- There is no formal process in place to verify that staff using their car for business purposes have the appropriate car insurance cover. The retained HR Manager will seek to agree a process for SW1 to undertake these tasks on an on-going basis, deadline 31st March 2010.
- There is no formal sign off process in place for system parameter changes on the SAP system (for example what the rates allocated to mileage are). It has been agreed that responsibility for system parameter changes on SAP are the responsibility of R A Ellins, SWOne and approval for change will be given by the Retained HR Manager following request from SWOne, to take effect from 1st April 2010.

Partnership Arrangements

At the start of the audit a summary of all current, significant partnerships operating within the authority was not readily available. The lack of a list of partnerships suggests that the establishment and participation in 'partnership' arrangements is not managed corporately within the organisation. This lack of corporate management means that time and resources can be made available to 'partnership' arrangements that may not be approved or may conflict with the authority's wider objectives and interests.

It was also found that the Council does not have any policies or guidelines that give members or officers advice on minimum standards or expectations that should be fulfilled. While there is no clarity over the authority's definition of partnerships there can be no clarity of the expectations of members and officers for ensuring that the authority's interests are protected.

This review considered operation of each of the partnerships identified over the following headings:

- Governance
- Decision making

- Standards of conduct
- Risk management
- Performance management
- Financial arrangements
- Legal arrangements
- IT arrangements
- Appointment of partnership staff

Findings varied across the partnerships but it is fair to say that deficiencies were found in the majority of the partnerships over a number of the headings.

We have discussed the findings of the report with the Strategic Director and have been pleased with the positive feedback that we have received. An action plan has agreed and the Council's Management Team have considered the report and recorded those actions within the Council's Corporate Governance Action plan.

Governance Audits

Risk Management

We observed that the framework and policies set out to guide the identification and control of risks has been developed. These documents have recently been reviewed and refreshed. This process of review and refinement appears to have been in transition for a while and we understand the good reasons for this. We would suggest the challenge now for management is to bring consistency in the approach to risk management.

Managed Audits

Treasury Management

The purpose of this audit was to verify that the key controls expected by the Audit Commission are in place and operating effectively. Of the nine areas evaluated in this review, controls were found to be satisfactory in two areas; partially effective in five areas; and weak in two areas. The main area of weakness covered a lack of reconciliation between treasury management records and SAP accounting values, the other weakness was surrounding the retention of documents to support investments. A management action plan has been agreed to address the areas of weakness.

3. Workload Update

Although there are a substantial number of reports at draft stage management are in the process of responding to these and final reports will be issued shortly and the findings shared with this committee.

In addition to the audit work detailed below there are a number of other areas of work that SWAP have undertaken including the on-going provision

of audit advice, ad-hoc special investigations and involvement in the SAP project providing advice and guidance on control issues.

The following reviews are in progress or are going through the reporting process :-

Audit area	Type of review	Progress
IT Audit - Compliance against ISO27002 level one	Computer Audit	Draft Report
IT Audit – Disaster Recovery Planning	Computer Audit	Draft Report
Leisure Services & Arts Qtr 3	Operational review	Testing
Treasury Management Qtr 3	Managed Audit	Draft
Payroll Qtr 3	Managed Audit	Draft
Creditors Qtr 3	Managed Audit	Draft
Debtors Qtr 3	Managed Audit	Draft
Council Tax / NNDR Qtr 3	Managed Audit	Draft
Housing Benefits Qtr 3	Managed Audit	Draft
Main Accounting Qtr 3	Managed Audit	Draft
Asset Management Qtr 4	Operational Audit	Testing
DLO Street Cleansing Qtr 4	Operational Audit	Draft Report
Service Planning Qtr 4	Governance Audit	Not started
VAT Qtr 4	Operational Audit	Not started
Building Control Qtr 4	Operational review	Not started
Telephones Qtr 4	Operational Audit	Not started

4. Recommendation

The Committee should note the content of this report.

Contact Officer:-

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TAUNTON DEANE BOROUGH COUNCIL
CORPORATE GOVERNANCE COMMITTEE
FORWARD LIST OF AGENDA ITEMS 2010

MEETING	DRAFT AGENDA ITEMS	LEAD OFFICER
15/03/10	Standards Committee Annual Report	Anne Elder
	Risk Management Update	Dan Webb
	Corporate Governance Action Plan	Adrian Gladstone-Smith
	Internal Audit Charter Approval	Chris Gunn
	Internal Audit Plan – Progress Report	Chris Gunn
	Internal Audit Plan 2010/2011	Chris Gunn
	Health & Safety Update	David Woodbury
	Regulation of Investigatory Powers Act 2000 – update	Tonya Meers
	Member/Officer Protocol	Tonya Meers
	Code of Corporate Governance	Tonya Meers
24/05/10	Audit Commission Fees Letter 2010/2011	Terry Bowditch
	Audit Commission Opinion Audit Plan 2009/2010	Terry Bowditch
	Annual Governance Statement	Maggie Hammond
	Internal Audit Plan Annual Report 2009/2010	Chris Gunn
	Health & Safety Update	David Woodbury
28/06/10	Investigatory Powers Act 2000	Tonya Meers
	Statement of Accounts 2009/2010	Maggie Hammond
	Internal Audit Plan – Progress Report	Chris Gunn
	Health & Safety Update	David Woodbury
	Risk Management Update	Dan Webb
	Corporate Governance Action Plan	Adrian Gladstone-Smith

27/09/10	Audit Commission Annual Governance Report 2009/2010 Investigatory Powers Act 2000 Internal Audit Plan – Progress Report Health & Safety Update Risk Management Update Corporate Governance Action Plan	Terry Bowditch Tonya Meers Chris Gunn David Woodbury Dan Webb Adrian Gladstone-Smith
20/12/10	Audit Commission Annual Audit Letter 2009/2010 Internal Audit Plan – Progress Report Health & Safety Update Risk Management Update Corporate Governance Action Plan CAA Update	Terry Bowditch Chris Gunn David Woodbury Dan Webb Adrian Gladstone-Smith Adrian Gladstone-Smith