



Complete Agenda

Democratic Services
Swyddfa'r Cyngor
CAERNARFON
Gwynedd
LL55 1SH

Meeting

AUDIT COMMITTEE

Date and Time

10.30 am, THURSDAY, 23RD JUNE, 2016

Location

Siambr Hywel Dda, Council Offices, Caernarfon, Gwynedd, LL55 1SH

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(DISTRIBUTED 15/06/16)

AUDIT COMMITTEE

MEMBERSHIP (19)

Plaid Cymru (10)

Councillors

Aled Ll. Evans
Charles Wyn Jones
W. Tudor Owen
Vacant Seat

E. Selwyn Griffiths
Dilwyn Morgan
Gethin Glyn Williams

Gweno Glyn
Michael Sol Owen
John Wyn Williams

Independent (5)

Councillors

Trevor Edwards
John Brynmor Hughes
Angela Russell

Thomas G. Ellis
John Pughe Roberts

Llais Gwynedd (2)

Councillors

Anwen J. Davies

Aeron M. Jones

Labour (1)

Councillor

Sion W. Jones

Lay Member

John Pollard

Ex-officio Members

Chairman and Vice-Chairman of the Council

A G E N D A

1. CHAIR

To elect a Chair for 2016/17.

2. VICE-CHAIR

To elect a Vice-chair for 2016/17.

3. APOLOGIES

To receive apologies for absence.

4. DECLARATION OF PERSONAL INTEREST

To receive any declaration of personal interest.

5. URGENT ITEMS

To note any items which are urgent business in the opinion of the Chairman so they may be considered.

6. MINUTES

5 - 8

The Chairman shall propose that the minutes of the meeting of this committee, held on 5 May 2016, be signed as a true record.

7. EXTERNAL AUDIT REPORTS

9 - 67

To submit the report of the Head of Corporate Support

8. FINAL ACCOUNTS 2015/16 - REVENUE OUTTURN

68 - 102

To submit the report of the Head of Finance.

9. GWYNEDD HARBOURS FINAL ACCOUNTS 2015/16

103 - 113

To submit the report of the Senior Finance Manager.

10. SELF-ASSESSMENT OF THE EFFECTIVENESS OF THE AUDIT COMMITTEE

114 - 124

To submit the report of the Senior Manager Revenue and Risk.

11. GWYNEDD COUNCIL ANNUAL GOVERNANCE STATEMENT 2015/16

125 - 145

To submit the report of the Senior Manager Revenue and Risk.

AUDIT COMMITTEE 5/5/16

Present: Councillor John Pughe Roberts (Chairman)
Councillor Trefor Edwards (Vice-chairman)

Councillors: Anwen J. Davies, Tom Ellis, Aled Ll. Evans, Gweno Glyn, E. Selwyn Griffiths, Aeron M. Jones, Charles Wyn Jones, Dilwyn Morgan, Michael Sol Owen, Angela Russell and Gethin Glyn Williams.

Also in Attendance: Dafydd Edwards (Head of Finance Department), William E. Jones (Senior Finance Manager - for Item 5 on the agenda), Dewi Morgan (Senior Revenue and Risk Manager), Luned Fôn Jones (Audit Manager), Clare Edge (Financial Audit Manager, Deloitte) Ian Howse (Financial Audit Engagement Leader, Deloitte), Bethan Griffith (Risk Co-ordinator and Insurance Manager - for Item 9 on the agenda) and Bethan Adams (Member Support and Scrutiny Officer).

Apologies: Cllrs Sian Gwenllian, John B. Hughes, Siôn Wyn Jones and Mr John Pollard.

1. WELCOME

A new member of the Committee, Councillor Gweno Glyn, who was attending her first meeting, was welcomed.

Clare Edge and Ian Howse from Deloitte were also welcomed.

2. DECLARATION OF PERSONAL INTEREST

No declarations of personal interest were received from any members present.

3. MINUTES

The Chairman signed the minutes of the previous meetings of this committee, held on 21 January and 11 February 2016, as a true record.

4. WALES AUDIT OFFICE - GWYNEDD COUNCIL AUDIT PLAN 2016

Clare Edge (Financial Audit Manager, Deloitte) and Ian Howse (Financial Audit Engagement Leader, Deloitte) submitted the report on behalf of the Wales Audit Office (WAO). Apologies were expressed that the Welsh version of the report had been released later and it was noted that it would be ensured in future that the report would be released bilingually in a timely fashion.

Members were guided through the report, which detailed the WAO's audit arrangements for 2016. The main financial audit risks were highlighted, noting that a number of the risks were relevant to all Local Authorities, with some being specific to Gwynedd Council.

Members were given an opportunity to ask questions, and the following responses were given:-

- That work to prepare information for the actuary was progressing;
- That the relevant professional officers were confident that the Full Council's decision at its meeting on 9 October 2014, which underscored a previous decision not to invest the Council's money in Israel, which was the subject of a judicial review in the High Court, was valid and lawful;

- In terms of a deficit in the Pension Fund, the WAO's review of local government pension funds in Wales had shown that the shortfall in Gwynedd's Fund was comparatively low. It was added that confirmation of the situation would be received by September 2016 following the current triennial valuation by the actuary.

RESOLVED to accept the report.

5. REPORT FROM THE CONTROLS IMPROVEMENT WORKING GROUP

Submitted – the report of the Chairman of the Audit Committee regarding a meeting of the above mentioned working group held on 7 April 2016 to consider audits that had received a category C opinion during the period between 1 November 2015 and 31 January 2016, namely -

- a) Arfon Leisure Centre
- b) Plas y Don Care Home
- c) Plas Hedd Care Home
- ch) Maintenance of Buildings and Sites

Officers had been invited to attend the meeting in order to discuss the matters that had arisen from the audits and the work undertaken since the audit reports were published in order to strengthen the internal controls in question.

A member noted that a trend is emerging where the service or organisation has a new manager that the audit receives a category C opinion. Therefore, it should be ensured that there would be appropriate support for the individual and ensure that induction/training arrangements were in place.

In response to a member's observation, the Audit Manager noted that unannounced visits had been planned for four Leisure Centres and it has hoped that this arrangement would motivate leisure centre staff to operate in accordance with the requirements.

RESOLVED to accept the report.

6. INTERNAL AUDIT OUTPUT 1/2/16 - 31/3/16

Submitted - the report of the Audit Manager, outlining Internal Audit's work during the period. It was noted that 26 reports about audits from the operational plan had been completed during the period (with the relevant opinion category shown), three follow-up audits and two responsive audits.

In response to a member's observation regarding the definition of an 'Acceptable' category relating to follow-up work, the Senior Revenue and Risk Manager noted that Internal Audit was currently reviewing the category definitions and the procedure for issuing recommendations.

Consideration was given to each individual report and during the discussion reference was made to the following main matters –

Proactive Prevention of Fraud and Corruption – The Use of Photocopiers in Schools

In response to a member's observation, the Audit Manager noted that an opinion category had not been allocated to this audit as the concerns highlighted were not common across the schools. It was noted that matters relating to the audit were being discussed at the Educational Department's regional business meetings.

Education Improvement Grant for Schools

A member enquired how the messages highlighted by the audit were communicated to the schools. The Audit Manager noted that the Head of the Education Department had highlighted the messages at the regional business meetings.

Secondary Schools Catering - Ysgol Ardudwy, Ysgol y Gader and Ysgol Moelwyn

In response to a member's question regarding a shortage of up-to-date contracts for kitchen staff, the Audit Manager noted that the Education Department's attention had been drawn to the fact that the kitchen staff's contracts had not been revised following the Governing Body's decision not to commit to the Education Department's catering contract. It was noted that the Education Department was acting on the matter.

Parking Income

In response to a member's concern with respect to the amount of money kept in the machines, the Audit Manager noted that the frequency of collecting money from the machines was dependent on the season and the use of the machines. It was noted that G4S Cash Solutions (UK) Limited collected the money in accordance with the contract.

A member noted that other methods of paying parking fees should be looked at, such as using a mobile phone. The Head of the Finance Department responded by noting that the Regulatory Department had raised the matter of receiving payment via alternative methods and the message would be sent to the Department to progress with the matter.

RESOLVED to accept the report on the work of the Internal Audit for the period from 1 February 2016 to 31 March 2016 and to support the recommendations that had already been submitted to the managers of the relevant services for implementation.

7. HEAD OF INTERNAL AUDIT ANNUAL REPORT 2015/16

Submitted - the report of the Audit Manager. It was noted that Internal Audit Standards in the Public Sector required her to express opinion on the Council's internal control framework annually. On the basis of the work that had been completed during 2015/16, the officer was satisfied that Gwynedd Council had a sound framework of internal control.

It was reported that 73 out of 74 audits in the final amended internal audit plan had been completed by 31 March 2016, which corresponded to 98.65% of the plan, against a performance target of 95% for 2015/16.

It was noted that the draft internal audit plan for 2016/17 had been submitted to this committee at the previous meeting on 11 February and the final plan could be found as Appendix 3 of the report.

In response to members' observations regarding a decrease in the staffing level of Internal Audit, the Head of the Finance Department noted that the decrease was in accordance with the efficiency savings that had been approved by the Full Council.

A member noted that by training officers in the departments to operate appropriately it could lighten the Internal Audit workload to enable giving fuller consideration to the audits that receive opinion category B.

The Internal Audit staff were thanked for their work.

RESOLVED to accept the report as the formal annual report of the Head of Internal Audit in accordance with the requirements of the Public Sector Internal Audit Standards for the 2015/16 financial year.

8. INSURANCE CLAIMS AGAINST THE COUNCIL

Submitted - the report of the Senior Revenue and Risk Manager who provided an update of the item submitted at the meeting on 11 February 2016, detailing the Council's arrangements in terms of dealing with insurance claims. Attention was drawn to the fact that 78.5% of accountability claims against the Council had been settled without costs.

During the ensuing discussion officers responded to the members' enquiries as follows:

- In relation to number 84 'The claimant was injured due to snow and ice on the road', the reason for a verdict that went against the Council in this specific case was a lack of documentation in terms of gritting rather than a lack of gritting;
- That the Insurance Unit had been conducting discussions with the department throughout the process when an insurance claim against the Council was received and shared the lessons to be learned.

RESOLVED to accept the report.

9. SELF-ASSESSMENT OF THE EFFECTIVENESS OF THE AUDIT COMMITTEE

Submitted - the report of the Senior Manager - Revenue and Risk in relation to carrying out a self-assessment of the effectiveness of the Audit Committee, using CIPFA assessment guidelines.

RESOLVED to hold a workshop in June 2016 in order to conduct a self-assessment of the Committee's effectiveness.

10. SELF-ASSESSMENT OF GOVERNANCE ARRANGEMENTS

Submitted - the report of the Senior Revenue and Risk Manager in relation to adjustments to the self-assessment since submitting a report to the Committee meeting on 11 February 2016 following the Governance Arrangements Assessment Group's review of the Council's governance arrangements during November and December 2015.

It was noted that following a suggestion from the Corporate Management Group, the Governance Arrangements Assessment group had assessed whether a 5 x 5 Impact / Effectiveness matrix should be used rather than 10 x 10, as a way of improving the visual impact. The conclusion was reached that the 5 x 5 matrix excelled and the assessment of its new form had been included as Appendix 1 of the report.

Attention was drawn to the fact that two other elements had been added, namely Use of Technology and Asset Management and the title 'Staff Appraisal, Training and Development' had been amended to 'Workforce Planning'.

RESOLVED to approve the assessment of the governance arrangements.

The meeting commenced at 10.35am and concluded at 12.25pm

CHAIRMAN

Agenda Item 7

MEETING: **AUDIT COMMITTEE**

DATE: **23 June 2016**

TITLE: **External Audit Reports**

PURPOSE: **To submit a summary of implementation steps established by the services in response to external audit reports and their recommendations for consideration by the Audit Committee**

AUTHOR: **Geraint Owen, Head of Corporate Support**

CABINET MEMBER: **Councillor Dyfrig Siencyn**

1. Introduction

- 1.1 It was decided in the special meeting of the Audit Committee on the 21st January 2016 to approve the procedure of presenting a summary of actions in response to external audit reports and their recommendations for consideration by the Audit Committee
- 1.2 The Audit Committee has a responsibility to consider the external audit reports, including national reports, the recommendations contained therein, and the implications of these for governance, risk management and control, ensuring that arrangements and processes are in place to ensure that these recommendations are implemented.

2. Continuity from previous report

Further information / explanation on the following issues are identified in the special meeting on the 21st of January 2016.

- 2.1 **Ensure that the services promote independence for older people:** need confirmation that this work was only completed in relation to telecare (4.6)
The comments in the previous report's progress column refers to Telecare only. In this report we have ensured that any information in the progress column refers to progress on the recommendation only to avoid any confusion.
- 2.2 **Strategic planning with Betsi Cadwaladr University Health Board in the Child and Adolescent Mental Health Service (CAMHS).** - need confirmation that monitoring of the therapeutic service for children/young people placed outside the authority's area was undertaken (8.1)
Operational arrangements are in place and an officer has been placed with an overview of the situation outside the County. The officer keeps in touch with Council officers. Any concerns will be directed to the officer, and discussions are taking place between the Council and BIBPC; if applicable the providers will discuss their concerns and find a way forward.

- 2.3 **Awareness and use of advocacy services:** more information should be received because the comments do not confirm the consistency in the quality of care plans; (8.5)

It is an ongoing challenge to get children and young people to attend meetings and reviews that deal with them. On the whole, young people choose not to attend. The requirements to IRO under the Welfare and Social Services Act will ensure that this officer will meet with all young people before their review to ensure that their wishes are heard. This has resource implications for the Department in terms of time to make this happen in view of the increasing numbers of children in care. Independent advocacy is being offered to all children in care and they receive information leaflets and so on about the service. The majority of children in care do not choose an independent review, rather if they have an issue that needs to be resolved, they choose a person who is part of their lives to intercede on their behalf, for example foster carer, teacher, social worker and so on. All this will contribute to ensuring that children and young people have someone who can intercede for them when they require help. Interestingly, a high percentage of children in care are choosing to contact independent advocates to attend meetings as reviews on their behalf to speak for and share their wishes.

- 2.4 **Opportunities to take advantage of health care and accommodation for looked-after children (Accommodation)** - that confirmation should be received in terms of the intentions of the Children and Supporting Families Department in relation to responding to the lack of range of placements available for those with complex needs (8.7)

Finding suitable locations locally to address the most severe and complex needs is an ongoing challenge and those needing specialist residential placements to meet these needs will inevitably go out of county. These young people would not be suitable for foster placements at the initial stage, but the Department's strategy to ensure that placements are regularly scrutinized actively means that there are significantly fewer young people in residential settings than has been historically (12 compared to 22 previously). Finding foster placements are less of a challenge and we are fortunate to have suitable resources to address the needs within our resources internally fostering ourselves. Of course it can not be said that we have adequate resources, since the area is one that is 'volatile' and change from day to day depending on the cases coming to the attention, but at the moment we are not anxious we do not have fostering adequate resources.

- 2.5 **Raise awareness of the implications and requirements of Deprivation of Liberty Safeguards (DoLS) and improve the governance arrangements for the operation of the procedures** - that confirmation should be received as to why DoLS applications had increased from 7 in 2013-14 to 365 in 2014-15 (8.11)

The large increase in DoLS applications is a National pattern that has manifested itself after the Supreme Court ruling in the case in Cheshire West.

- 2.6 **Gwynedd Older People Domiciliary Care Review by the Care and Social Services Inspectorate (CSSIW)** - it was noted as 'In progress (continuous)', it would be more sensible to note that it had been completed on a specific date and

noting that it was continuous work. It was noted that a request was made for confirmation of the situation;

The record has since been changed and the situation has been confirmed as completed. Arrangements are in place to ensure that risk assessments are completed, all our documentation has been modified in the form of a Personal Care Plan and Monitoring Visits 27 are held by Adult, Health and Wellbeing monitoring officers.

- 2.7 National Review of the Use of DoLS in Wales 2014 - Gwynedd Local Authority and Betsi Cadwaladr University Health Board - CSSIW** - the progress column noted that specific steps in the action plan had been realised but not the entire recommendation. One progress should be noted, namely 'In progress (9.1) We have ensured that any information in the Progress column refers to progress on the recommendation only to avoid any confusion.

3. Summary of report in Appendix I

Below is a summary of the reports provided in Appendix I

- 3.1 Presented in Appendix I is a list of inspections carried out by external auditors over recent years as well as their proposals for improving, their action plans and progress that has occurred to date. The committee will need to consider whether it is satisfied with the progress that has taken place.
- 3.2 The information is set out in chronological order for ease and includes the responds to national reports as well as those specific to Gwynedd.
- 3.3 Of the 102 proposals / recommendations that are included in Appendix I, a summary of progress are as follows:

Progress	Number
Not started	1
Being planned	11
In progress	40
Complete	50
Total	102

- 3.4 It can be seen that 50 out of 106 have been completed

4.0 Recommendations

- 4.1 The committee will need to decide if it is satisfied that the recommendations and proposals for improvement in the auditors' reports listed in Appendix I have been implemented. Deciding if it is to call any mater in for further consideration, either to the full committee or to the Controls Improvement Working Group.**

EXTERNAL AUDIT REPORTS 2012/13 – 2016/17

APPENDIX 1

1. 2012 Review of the Housing and Council Tax Benefit Service - Wales Audit Report

The report was received on 1 September 2012 and was presented to the Audit Committee on 27 September 2012.

Ref	Further proposals for improvement	Responsibility	Implementation Plan	By When	The monitoring arrangement and the progress made so far	Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
1	Ensure that effective succession planning arrangements are in place for the Quality Assurance and Training Officer (QA and T Officer) post.	Senior Manager - Revenue & Risk	Keep the effective succession planning arrangements of the whole unit under continuous consideration, not only for one post.	As soon as possible	<p>The whole units arrangements are continually under consideration in the context of the welfare system reform, and the roles and responsibilities of all posts have to be considered when finding efficiency savings and cuts in line with the corporate framework.</p> <p>The service is versed in the requirements of each job on its structure, and develops the knowledge and skills of all its officers continuously. The service is therefore of the opinion that there are no further specific practical steps to be taken at this time. We are satisfied that this proposal has been achieved.</p>	Complete
2	Ensure that all staff are aware of business continuity arrangements contained in the disaster recovery plan.	Senior Manager - Revenue & Risk	Ensure that emergency planning arrangements of the Finance Department is available for everyone.	As soon as possible	The Benefits Unit, like all other units within the Council, work within the corporate arrangements. The latest version of the Finance Department's Service Continuity Plan was approved the by the Department Management Team on June 1, 2016, and was circulated afterwards.	Complete
3	Consider introducing a process of consultation or survey to evaluate the customer's view about the service.	Senior Manager - Revenue & Risk	In September 2012, it was reported to the Audit Committee, "The Council is strongly in favour of the general principle of consulting with customers. However, we do not consider that it would be timely to do this so close to the most radical national changes ever to the benefits service (cutting the level of rent allowance permitted, introducing the local support scheme for council tax and shifting the Council's housing benefit rights to the DWP's own Universal Credit system)." These observations were approved by the Committee at the time.	As soon as possible	<p>As Committee members are aware, there has been significant slippage in the timetable for the Westminster Government in introducing Universal Credit. Because of this, the situation described in 2012, in effect continues.</p> <p>We are satisfied that Siop Gwynedd consults continuously. There is an arrangement in place so that reports are regularly passed on to the Benefit Unit as appropriate.</p>	Complete

EXTERNAL AUDIT REPORTS 2012/13 – 2016/17

APPENDIX 1

2. April 2012 - Gwynedd Council Information Management Feedback Wales - Audit Report

Ref	Further proposals for improvement	Responsibility	Implementation Plan	By When	The monitoring arrangement and the progress made so far	Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
1	The Council should enhance the action plan which supports the information strategy to include actions to identify the Council's information and intelligence needs and to co-ordinate the activity of the range of information services to meet these needs.	Information Manager	<p>This was discussed with Gwenan Parry, Head of Customer Care Support Department in 2012.</p> <p>It was felt that the function of the Information Management Service was not to find out what were the Council's information requirements and that our role was to provide guidelines and expertise on how to manage information once it had reached the Council (in terms of protection, disposal, accuracy, retention for appropriate periods of time). This is the role of information management services in every Council.</p> <p>The role of the Research Unit is to respond to the services' information requirements. The Information Management Strategy will soon be updated, therefore, we can incorporate this for the future if there is a desire to do this.</p>		<p>The Assessment of Governance Arrangements Group has identified Information Governance as a very high priority, and reported this in the Annual Governance Statement in 2015. As a result of this, Information Governance has been included in the Strategic Plan (Project C8).</p> <p>By the end of 2017, the Council will have to assess the appropriateness of its information safeguard arrangements and formulate proposals as necessary. Since this is a project in the Strategic Plan, this will be regularly addressed by the appropriate Achievement Panel.</p> <p>There is now agreement that a new Information Management Strategy needs to be drafted that will be wider than the previous scheme and cover issues such as open data, the use of information, quality information. Furthermore, the Assessment of Governance Arrangements Group has commissioned a piece of work to find out what use of information is being made by asking departments to complete a self-assessment.</p>	In progress
2	Develop an appropriate forum to co-ordinate the activities of the Council's information teams.	Information Manager	<p>Collaboration with the information team of the Adults Department already takes places. There would be a need to be clear on the purpose and aim of the forum.</p>		<p>This will occur naturally as part of the formulation of the new Information Strategy. This is already happening informally eg between the information team and the Social Services data team.</p>	Not started

ESTYN INSPECTIONS

3. ESTYN 3 Year Inspection : Inspection on the Quality of Gwynedd Local Authority Education Service for children and young people during March 2013

Following the ESTYN inspection of education services for children and young people on 11 – 15 March 2013, deeming that the authority’s progress needed to be monitored by Estyn, The Estyn’s Post Inspection Implementation Plan was received and confirmed by the Cabinet on 17 September 2013. The Post-Estyn Inspection action plan was considered by the Services Scrutiny Committee on 3 October 2013.

Following Estyn Inspectors visit on 2 – 5 December 2014 a letter was received recording the final results of monitoring after the inspection:
 " Gwynedd Council is judged to have made sufficient progress in relation to the recommendations that arose from the inspection in March 2013. As a result, Her Majesty’s Chief Inspector of Education and Training in Wales is removing the authority from follow-up activity".

Estyn Inspectors attended a meeting of the Services Scrutiny Committee on 12th February 2015 in order to report back on their 2-5th December 2014 visit.

Local Authorities' Inspection Cycle (ESTYN)

In terms of the cycle of local authorities’ inspections, the last cycle has just come to an end and by now the cycle is held at least once every 6 years.

- The tri-annual cycle of individual schools has come to an end and has now changed to once every 6 years.
- ESTYN can visit any school or authority at any time, but they need to give a school at least a month of notice, and at least 12 weeks (or three months) notice to a local authority.
- The schools link inspector (ESTYN) visits every term.
- An inspection is currently being undertaken on the Welsh schools improvement consortia, namely: Gwe, Erw and two consortiums from south Wales.

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Ref	Recommendation	Responsibility	Action Plan	By when?		Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
1	A1 Improve safeguarding by ensuring that the Council’s procedures and policies are clearly understood by all LEA employees and are regularly updated and disseminated.	Monitoring Officer: Corporate Director	Distribute and ensure awareness of the ‘Children and Adults Safeguarding Policy and Guidelines’ (corporate) and compliance with it. Ensure that all Council staff undertake basic safeguarding awareness training. Ensure that the priority of the field of Safeguarding Children and Adults is reflected in the Council’s Strategic Plan.	February 2014	Education Department One of the top priorities of the Education Department’s Business Plan is to 'review safeguarding procedures by ensuring that the council’s procedures and policies are understood clearly by all those working in the education field and are regularly updated and disseminated'. To ensure that schools are completely clear of their responsibilities and that robust safeguarding procedures and culture are in Gwynedd schools, the Education Department appointed a Protection Officer, who has been operational since September 2015. The areas outlined below have been identified as priorities for the Protection Officer: <ul style="list-style-type: none"> • Review of Child Protection Training Level 1 and Level 2 • Review the model policies available to schools in the field of protection, child protection and physical intervention in the context of national developments and guidelines 'keep the learners safe' • Ensure that all Governing Bodies has adopted relevant policies • Each school to receive a Protection visit before an inspection • Agree on one county strategy • Agree on a County Model policy • Raise awareness and training on 'Sexual Exploitation of children' (CSE) 	Completed

EXTERNAL AUDIT REPORTS 2012/13 – 2016/17

APPENDIX 1

Ref	Recommendation	Responsibility	Action Plan	By when?		Rate your progress as
			Lead Members to receive evidence of the Council's corporate / cross-departmental performance in relation to safeguarding children and adult matters.		<ul style="list-style-type: none"> • Raise awareness and training on Radicalisation • Raise awareness on Harmful Sexual Behaviour (HSB) <p>A check form was compiled for schools as required by Estyn, and the Education Department has received these back and analyzed the information. Arising from this, the Education Protection Business Plan was drawn up for 2016-17 which includes the common areas that need attention after analysing and summarising these forms. The analysis of each school's implementation summary is a basis for any support/ further intervention by the Protection Officer.</p> <p>Regular reports are made to the Strategic Safeguarding Panel on progress against the above priorities.</p> <p>Further work program has been developed for 2016/17.</p>	<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
2	A2 Raise standards in key stage 4 by targeting underperforming departments at poorly performing secondary schools more robustly	Monitoring Officers: Iwan Trefor Jones, Owen Owens, Awen Morwena Edwards	<p>Ensure a swift and effective response to the findings of the Scrutiny Working Group's research into the KS4 performance of Gwynedd Secondary Schools</p> <p>Ensure, by means of a SLA with the Regional Schools Improvement Service [GwE], that target schools can contribute from professional networks and forums to share good practice and take advantage of the expertise of System Leaders and leaders of successful schools.</p> <p>Ensure that the target schools have agreed</p>	Summer 2015	<p>This recommendation is part of a the P1 'Improving and reconciling education standards' project within the Council's Strategic Plan. The project's progress is reported to the Children and Young People Achievement Panel and Cabinet.</p> <p>The purpose of this project is to improve and reconcile standards across Gwynedd education to ensure that children and young people meet the highest standards to gain the qualifications and skills that enable them to live and prosper locally. The Department implements practical steps in schools in order to improve and reconcile educational standards, and targets specific topics, and challenges performance in specific areas.</p> <p>During 2015/16, an Education Quality Strategy was created, setting a direction and action steps to improve and reconcile education standards.</p> <p>The main priorities for 2016/17 are set below:</p> <ul style="list-style-type: none"> • Introduced a new model of supporting schools which will strengthen school to school support systems, develop new partnerships, improve key stage outcomes, as well as support schools to perform in the highest quartiles • Reviewed the structures of the Education Department by creating a new area structure and defining the role of the 'Area Education Officer' in order to better co-ordinate the support to the schools and the whole support service • Implemented a clear specification between the Council and GwE (School Effectiveness and Improvement Service) which will ensure that clear and appropriate arrangements are in place to monitor and evaluate progress in the schools • Worked with GwE to ensure the raising of English and Mathematics standards in specific departments within our secondary schools 	Completed

EXTERNAL AUDIT REPORTS 2012/13 – 2016/17

APPENDIX 1

Ref	Recommendation	Responsibility	Action Plan	By when?		Rate your progress as
			[and started to implement] robust plans to improve the standards of literacy [reading and writing in particular], and numeracy, across the school in accordance with the requirements of the National Framework.		<ul style="list-style-type: none"> • Developed and implemented an effective tracking and targeting system, as well as an improved educating and teaching standards in subjects such as specifically English and Mathematics. This will contribute towards increasing the number of pupils who will attain the Level 2+ threshold (5 grades A*-C GCSE) or equivalent • Targeted improvement in schools which are underperforming generally or who are performing comfortably • Continued to develop and implement the authority's current strategies to improve attendance in schools <p>In terms of Summer 2015 results, the main strengths are set out below:</p> <ul style="list-style-type: none"> • Key performance indicators at all key stages are now improving, and compare favorably with similar local authorities (LAs) • Performance is very good at KS3 and strong by the end of KS4 as we're at the top in three of six main indicators • Nearly all pupils leave school with accreditation at the end of key stage 4; • The performance of all Authority pupils in the average point score indicators, the average point score is capped and level 1 <p>A work program has been developed for 2016/17.</p>	<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
3	A3 Monitor and challenge every school and use all the available powers at the LEA's disposal to improve leadership and management at underperforming schools.	Monitoring Officers: Head of Education, Senior Schools Manager, Senior Additional Learning Needs and Education Inclusiveness, Challenge Consultant, Corporate Director	<p>Empower the Authority's actions in relation to developing leadership and management in primary schools.</p> <p>In cases where a school is placed in a statutory category by Estyn, the Authority has to act urgently and use the statutory powers</p> <p>Ensure that sharp and appropriate procedures are in place by means of the Regional Service [GwE] to monitor and</p>	Haf 2014	<p>This recommendation is part of the Council's Strategic Plan P2 project of 'Improving leadership and management'. The project's progress is reported to the Children and Young People Realisation Panel and Cabinet.</p> <p>The purpose of this project is to improve the condition of leadership in order to raise standards. The project will implement proposals that will improve leadership and management with the aim of moving tow</p> <p>During 2015/16, a report on the field of schools leadership in Gwynedd was commissioned. We will act on the recommendations of that report during 2016/17.</p> <p>By the end of the project, there will be a better quality of leadership within Gwynedd schools and a clearer career structure in place for teachers. This will be key to ensuring that children and young people benefit from more consistent standards in our schools, as the impact of strong leadership has positive effects on attainment of children and young people.</p> <p>The main priorities for 2016/17 are set below:</p> <ul style="list-style-type: none"> • Implemented a leadership development programme which improves the conditions of schools leadership in Gwynedd • Monitored and challenged every school and used all powers available to the authority to improve leadership and management in underperforming schools • Ensured arrangements where the authority and governing bodies intervene sooner in schools where leadership causes concern 	Completed

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Ref	Recommendation	Responsibility	Action Plan	By when?		Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
			<p>evaluate the progress of the schools and to intensify the actions and interventions where the expected progress cannot be seen.</p> <p>Empower and sharpen the Council's internal accountability procedures for schools' performance:</p>		<ul style="list-style-type: none"> • To ensure a collaborative management structure on a catchment area and area basis which will release time for heads to lead effectively • To develop managers and prospective managers within services and to identify leaders for the future <p>A work program has been developed for 2016/17.</p>	
4	A4 Continue to develop and implement the authority's current strategies to improve attendance at secondary schools.	Monitoring Officer: Senior Manager Additional Educational Learning Needs and Education Inclusiveness	<p>Ensure evaluation of methods and procedures in Gwynedd secondary schools to record absences.</p> <p>Ensure the absence improvement targets of specific schools in accordance with their previous performance and agree on an action plan with each school in relation to attendance.</p> <p>Ensure that attendance data is inspected in detail and proactively by the attendance and welfare service, and agree on improvements following annual self-evaluations.</p>	July 2013	<p>During 2014/15 pupil attendance within the secondary sector increased by 0.4% to 94.6%. Nationally the figure increased 0.2% to 93.8%.</p> <p>The attendance in Gwynedd's secondary schools has risen from 4th place in 13/14 to the equal 2nd highest in Wales.</p> <p>The Welfare Service continues to develop and implement strategies to improve the authority's existing secondary school attendance.</p>	Complete

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Ref	Recommendation	Responsibility	Action Plan	By when?		Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
5	A5 Improve quality of self-evaluation, and how improvement plans and performance management procedures are implemented in the Education Department.	Monitoring Officers: Head of Education, Planning and Strategic Performance Manager, Assistant Education Quality Improvement Officer	<p>Ensure additional capacity within the Education Department to co-ordinate performance management matters.</p> <p>Ensure identification of individual improvement programmes that contribute towards the indicators of the Education Department / Service. Create a matrix of the indicators.</p> <p>Agree and establish a robust self-evaluation system.</p>	December 2013	<p>Performance management procedures, self-evaluation and improvement plans of the Education Department have strengthened.</p> <p>All Service / Teams have Business Plans and individual improvement programs. These are divided into three levels:</p> <ul style="list-style-type: none"> • Level 1 - Department Priorities • Level 2 - Service / Unit Priorities • Level 3 - Teams Individual Priorities <p>These plans include performance measures and risk registers which highlights the barriers that need to be moved proactively to provide an efficient service to the people of Gwynedd.</p> <p>Lines of accountability from the department to the council are clearer and there's now a more direct link of corporate priorities to the education department's priorities</p> <p>Progress and the impact of action is reported on a quarterly basis and there is a procedure and a specific timetable in place to report to the Children and Young People Realisation Panel and the Cabinet. The reporting procedure will assist members of the Cabinet to prioritize what to greet as part of the Council's continuous improvement. The system also ensures that members can continue hold service teams to count for their performance, as well as helping members to identify issues for scrutiny.</p>	Complete
6	A6 Continue to implement plans to reduce the number of surplus places.	Monitoring Officers: Lead Manager (Re-organisation of Secondary Schools), Lead Manager Re-organisation of Primary Schools, Senior Schools Manager, and Officer to be designated.	Implement surplus place programmes in specific areas and catchment areas.	Continuously	<p>This recommendation is linked to P3 to P6 projects of Gwynedd Council's Strategic Plan 'Programme for a network of sustainable schools for the future'. The project's progress is reported to the Children and Young People Realisation Panel and Cabinet.</p> <p>The purpose of this programme is to create a network of sustainable schools for the future. Its delivery will create improved conditions to develop leadership, to improve and standardise education standards, and to improve experiences for children and young people. We also need to plan and model for a structure for the future, giving specific attention to planning for the next phase of the Government's capital projects.</p> <p>The main projects for gyfer 2016/17:</p> <ul style="list-style-type: none"> • P3 – Ysgol Hafod Lon • P4 – Y Gader catchment area • P5 – Ysgol Glancegin • P6 – Y Berwyn catchment area <p>For further information see the Council's Strategic Plan. A work program has been developed for 2016/17.</p>	Complete

**4. Year 2012-2013 - Annual Review and Evaluation of Performance of the Care and Social Services Inspectorate Wales (CSSIW)
Report received: 28 October 2013.**

The report was presented to Cabinet on 28 January 2014, and to the Services Scrutiny Committee on 13 February 2014.

	ACTION	Leader	Implementation Plan	By when	The monitoring arrangement and the progress made so far	Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
	Forming Services					
1	Maintain the momentum in terms of reorganising residential services for older people	Head of Adults, Health and Wellbeing Department	Transformation of Older People Services Project 2013-14 Action Plan (specifically aiming to seek better collaboration with the Health Service): Residential Care <ul style="list-style-type: none"> • Consider the recommendations of the Porthmadog accommodation and care assessment • Identify a way forward for the provision in the Porthmadog catchment area • Implement a programme of engagement on the way forward • Agree on the way forward with the Council's residential homes • Open a purpose-built Respite Unit as a pilot • Develop proposals 	March 2014	<p>Work is underway to develop 40 units of Extra Care Housing at Hafod y Gest site in Porthmadog March 2016, the construction period will last for 18 months, with a view to completion by October 2017.</p> <p>An Executive Group and Communications Group has been established in partnership with Grwp Cynefin. Open days have been organized for promoting the scheme in the local area during April and May 2016.</p> <p>The Older People's Housing Strategy was presented to the Cabinet March 15, 2016.</p> <p>The Council has opened short-term care units at four of its residential care homes in collaboration with Betsi Cadwaladr University Health Board.</p> <ul style="list-style-type: none"> • The units are located at: Plas y Don, Pwllheli; Bryn Blodau, Llan Ffestiniog; Llys Cadfan, Tywyn and Plas Pengwaith, Llanberis. The units are used in a number of circumstances, for example to provide respite care, to give extra care to avoid a person going to hospital or as part of improving and strengthening following illness or injury. 	Complete

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			in order to provide a range of beds which meets the demand through the Adults Service's End to End Review			
	Seeking support					
2.	Predict the demand for community support	Head of Adults, Health and Wellbeing Department	<ul style="list-style-type: none"> Continue to monitor in order to anticipate the demand Research and analysis in relation to demographic changes and the impact on the service 	March 2014	<p>Demographic analysis is a key part of the planning cycle. Here details are submitted by the department, in order to ensure increase in demography are reflected within budgets.</p> <p>In addition in response to the Welfare and Social Services Act procedures are in place to create the General Data Set which will be used to predict future demand for services.</p>	In progress

	The services provided					
3.	Develop the range of services in the community for adult services	Head of Adults, Health and Wellbeing Department	<p>Transformation of Older People Services Project 2013-14 Action Plan (specifically aiming to seek better collaboration with the Health Service):</p> <p>Day Care</p> <ul style="list-style-type: none"> Agree on a scheme that addresses the day care needs of older people including opportunities for work / volunteering / socialising / personal care and intensive care Identify day care options at Maesincla Caernarfon Develop a joint Work Programme with the Betsi Cadwaladr 	March 2014	<p>A specialist day service for adults with memory problems has been established in Arfon in Plas Hedd Day Centre, Bangor. It is a new service provision in collaboration between Social Services and Betsi Cadwaladr University Health Board. The service is provided every Wednesday and Saturday. This is the first time the Council and the Health Board has provide such a service on Saturday.</p> <p>A lunch club has been established by Age Cymru at the Awel y Coleg Extra Care Housing. Agreement with Age Cymru to establish activities at Awel y Coleg, Y Bala.</p> <p>Age Cymru developed provision in Nefyn, Bala and Dolgellau, where AgeWell centers were established, with many 'clubs / activities' established within these centers. There are 36 clubs in Nefyn and 5 in Bala. Dolgellau Age Well center was opened in June 2013. It open for 2 days per week, and has initiated a number of activities such as internal 'clubs', 5 currently. This means that 46 activitiy clubs are now operational for individuals over 50.</p> <p>Work continues to ensure adequate provision of day care in the county</p>	Complete

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			University Health Board regarding the specialist dementia day care provision			
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	ACTION	Leader	Implementation Plan	By when	The monitoring arrangement and the progress made so far	Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
4.	Develop the range of services in the community for adult services	Head of Adults, Health and Wellbeing Department	Transformation of Older People Services Project 2013-14 Action Plan and specifically: <ul style="list-style-type: none"> • Identify day care and accommodation models for people with Learning Difficulties 	March 2014	<p>A new accommodation model development Pant yr Eithin, Harlech, has been completed for 8 adults with learning disabilities, 6 one bedroom bungalows and a two-bedroom bungalow.</p> <p>Work continues in the Learning Disabilities field to incorporate the 'Moving Forward' model principles in all aspects of the services offered. The vision is to ensure that all individuals achieve their full potential, and will be encouraged to aim higher and nurture new skills and experiences continually.</p> <p>The Learning Disability Management Team has been established under the leadership of the Senior Manager to keep focus on the developments in the field and for work and support to transform the service. In addition, the Learning Disability Project Board has been re-established in order to keep the focus and momentum on the project & savings targets.</p> <p>Quarterly meetings have also been arranged with health in order to be include them as part of the transformation program.</p> <p>Arrangements are therefore in place in the learning disability field to develop a range of services in the community.</p>	Complete
5	Develop the range of services in the community for children services	Head of Education	Additional Learning Needs Project Action Plan 2013-14 and specifically: <ul style="list-style-type: none"> • Agree on a new model of providing educational experiences and opportunities for children with Additional Learning Needs • Decide on possible sites for establishing a new Special Education Centre of Excellence in the 	March 2014	<p><u>New Model</u></p> <ul style="list-style-type: none"> • A new strategy developed which offers a new more integrated way of presenting services for children with additional learning needs. These principles include the intention to pay more attention to the following: <ul style="list-style-type: none"> • Early Years and early intervention; • Establish a central team, Integrated particular specialties to facilitate co-operation and joint planning; • De-commissioning the CBAAA; • Training Program to upgrade workforce skills; • Introducing the use of Plans that focus on the individual. <p>Hoping to get approval from the Council for adoption - december 2015.</p> <p><u>New Centre of Excellence in Special Education in Meirionnydd / Dwyfor:</u></p> <ul style="list-style-type: none"> • Agreed on site at Penrhyndeudraeth and work has already begun. Hopes to complete during the October 2016 term 	In progress

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			Dwyfor-Meirionnydd area.	
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	ACTION	Leader	Implementation Plan	By when	The monitoring arrangement and the progress made so far	Rate your progress as • Not started • Being planned • In progress • Complete
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The effect on people's lives

6	Ensure that services promote independence for older people	Head of Adults, Health and Wellbeing Department	Transformation of Older People Services Project 2013-14 Action Plan (specifically aiming to seek better collaboration with the Health Service): Residential Care <ul style="list-style-type: none"> • Consider the recommendations of the Porthmadog accommodation and care assessment • Identify a way forward for the provision in the Porthmadog catchment area • Implement a programme of engagement on the way forward • Agree on the way forward with the Council's residential homes • Open a purpose-built Respite Unit as a pilot Day Care <ul style="list-style-type: none"> • Agree on a scheme that addresses the day care needs of older people including opportunities for work / volunteering / socialising / personal care and intensive care 		See above – 1(i) See above – 3(i)	Complete
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	ACTION	Leader	Implementation Plan	By when	The monitoring arrangement and the progress made so far	Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
			<ul style="list-style-type: none"> • Identify day care options at Maesincla Caernarfon • Develop a joint Work Programme with the Betsi Cadwaladr University Health Board regarding the specialist dementia day care provision <p>Telecare</p> <ul style="list-style-type: none"> • Complete a review of the Telecare business case • Agree on a way forward 		A review of the business case has been made, and a way forward has been agreed.	
7	Improve the process of planning education for looked after children	Head of Children and Families Department / Head of Education	<ul style="list-style-type: none"> • The Children and Families Service to continue to monitor closely. • There is an important role for the Vulnerable Groups Education Co-ordinator to secure this and raise awareness in Gwynedd schools regarding the importance of completing the personal education plans in a timely manner. 	Continuou s	<p>The situation in terms of completing personal education plans for children in care has deteriorated further, with 25 out of 66 completed within 20 school days in 2015/16, which is 37.9%.</p> <p>The Corporate Parenting Panel has identified the personal education plans as an area requiring further work. The challenge for the Panel is to ensure that the child's voice is heard and that we respond to this.</p>	In progress
8	Ensure health services for looked after children	Head of Children and Families Department / BCUHB	<ul style="list-style-type: none"> • The Children and Families Service to continue to monitor closely. • Continue to hold the discussion with the BCUHB to ensure that the 	Continuou s	The service has been working with Betsi Cadwaladr University Health Board for several years to try to resolve the problems in conducting health assessments for children in care in a timely fashion. The Corporate Parenting Panel has been holding the Board to account to challenge health practice and ensure that improvements in procedures take place. Nevertheless, progress has been very disappointing, but this year we see an improvement in performance against this indicator since 1st quarter results show that 60.7% have been held within time and 63.4 % at the end	Complete

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	ACTION	Leader	Implementation Plan	By when	The monitoring arrangement and the progress made so far	Rate your progress as
			arrangements for implementing health assessments are reviewed in a timely manner.		of quarter 2. This is encouraging and has reached the locally set target (60%). This continues to be lower than the average for Wales, but we think we have solved the biggest problems in terms of procedures and processes in order to see continued progress.	<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete

Delivering Social Services

9.	Establish a quality assurance system in the services for adults.	Head of Adults, Health and Wellbeing Department	<ul style="list-style-type: none"> • In terms of data – develop a new system which will draw out data directly from the Department’s Data Recording Management system and will report on data quality. • Use the new system to report on a quarterly basis. • Prepare, develop and promote guidelines for using the system for employees within the priority fields. • Draw up and agree on a quality assurance strategy across the service. 	March 2014	<p>A new system was developed by March 2014 in order to pull data directly from the Department Data Entry Control system highlighting any data quality issues. This is used from now on to report data or performance management according to need.</p> <p>The creation of a quality assurance strategy is being addressed and is being planned within the new structure of the Adult, Health and Welfare Department.</p>	In progress
Provide a direction						
10	i. Ensure corporate support for looked after children, in particular in the	Head of Children and Supporting	<ul style="list-style-type: none"> • Develop a Strategy • Implement the Strategy. 	April 2014	The Corporate Parenting Strategy is in the process of being finalized, and will focus on securing the support of education for children in care. The strategy has been in draft form for some time, and it’s completion was delayed following the loss of a job. Since October 2015 a decision has	In progress

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	education planning field.	Families Department			been made that the operational responsibility for the work of the Corporate Parenting Panel sits within the Children and Supporting Families Department instead of the Corporate Support Department, and ensuring that a clear strategy and action plan is in place is a priority for the work program.	
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5. May 20 – 22 May 2014: National Review of the Use of Deprivation of Liberty Safeguards (DOLS) in Wales 2014 - Gwynedd Local Authority and Betsi Cadwaladr University Health Board - Care and Social Services Inspectorate for Wales (CSSIW)

Ref	Further proposals for improvement	Responsibility	Implementation Plan	By When	The monitoring arrangement and the progress made so far	Rate your progress as
						<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
1	The Council and Health Board should continue to develop understanding of the Mental Capacity Act, DoLS and the implications of the Supreme Court at all levels. It should ensure that it builds on the existing knowledge and skills of care managers in adult services so that where there are authorised deprivations in place, care management reviews reflect consideration of their outcome and effectiveness. The links between care management and contract monitoring in adult services should be more robust.	Head of Adults, Health and Wellbeing Department			<p>A Training programme is in place to ensure training opportunities for all staff and any other relevant person to work in accordance with Mental Capacity Act 2005.</p> <p>The Adult, Health and Wellbeing Department has appointed a DoLS Co-ordinator who liaises and updates the care homes/managing authority in Gwynedd in relation to any changes and to provide support as and when needed.</p> <p>The DoLS Coordinator has compiled an information pack to support all workers involved with people who could be deprived of their liberty and how to identify if a person meets the DoLS criteria</p> <p>The DoLS Coordinator works closely with the Managing Authorities and the Local Authority to ensure that all involved with the process are clear in regards to what needs to be completed and what criteria needs to be met. If there is any uncertainty the coordinator will visit all relevant parties to discuss the process and criteria, this builds up on their knowledge and improves working in partnership.</p> <p>The Department is adopting a category management process which will make the links between care management and contracts monitoring more robust</p>	In progress
2	The Council and Health Board should ensure that it reports performance information on the Safeguards to senior managers and elected members regularly.	Corporate Director			<p>Wider safeguarding arrangements are being put in place by the Department</p> <p>Regular reports are prepared and any concerns raised are highlighted. Data collection is reviewed and updated on a monthly basis, and information shared with managers at all times. Annual report is provided to the CSSIW of every referral that the supervisory body are in receipt of.</p>	Complete

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Ref	Further proposals for improvement	Responsibility	Implementation Plan	By When	The monitoring arrangement and the progress made so far	Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
3	The Council should examine its management arrangements to ensure that there are no conflicts of interest between its supervisory body and managing authority functions.	Head of Adults, Health and Wellbeing Department			<p>The Department is currently reviewing the management structure.</p> <p>A DoLs co-ordinator has been appointed to gate keep and monitor all incoming referrals and liaises with the legal department to ensure that there is no conflict of interest.</p> <p>We are very mindful to ensure that Best interest assessors have no connections with the client they are assessing.</p> <p>Any concerns raised will be highlighted to the co-ordinator and alternative assessors will be found whether it's an independent assessor.</p> <p>The co-ordinator is aware that in some cases the establishment will be a supervising body as well as a management authority. It will ensure that the assessors will comply with the assessors' assessment legislation. Every assessor must make their decision, ensuring that the appropriate level of objectivity is given in the assessment process. We follow the Practice Code.</p> <p>As a Supervisory Body we seek to avoid appointing assessors in any other possible conflict of interests or situations that might bring into question the objectivity of an assessment. The coordinator is aware of what is considered a conflict of interest and all best interest assessors are aware that they need to inform the Supervisory Body if they know the person being assessed or their family</p>	Complete
4	The Council and the Health Board should each develop more robust quality assurance mechanisms, so that all applications, assessments and authorisations comply with legislation, guidance and case law.	Head of Adults, Health and Wellbeing Department			<p>The Department has put in place wider safeguarding procedures</p> <p>Monthly meetings will be held with all the Best Interest Assessors to provide a forum for them to share their knowledge and build on skills.</p> <p>All applications, assessments and authorisations are checked thoroughly. The assessments are checked on three levels, 1) Best Interest Assessor 2) Then by the Coordinator 3) Then by the Supervisory Body.</p> <p>National changes to the DoLs arrangements have strengthened procedures. This process reduces the risk of any failings.</p> <p>The coordinator attends specific groups to discuss legislation and policy across Wales in order to keep up with Developments.</p>	Complete

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Ref	Further proposals for improvement	Responsibility	Implementation Plan	By When	The monitoring arrangement and the progress made so far	Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
5	The Council and the Health Board should each review the BIA and Section 12 doctor capacity to ensure that they are able to meet the requirements of the legislation and the Supreme Court judgment.	Head of Adults, Health and Wellbeing Department			There is an established procedure and Recruitment and Training Best Interest Assessors is a permanent task and we are aiming to qualify more staff in order to improve and build on services, knowledge and skills that already exist within our area.	Complete
6	The Council and the Health Board should each review their engagement with the relevant person, their families and carers. They should seek feedback on the clarity and effectiveness of available information. They should include details of how to express compliments, concerns and complaints.	Head of Adults, Health and Wellbeing Department			The relevant person is an important factor in this assessment process and provides pivotal information. The main priority of any BIA is to gather that information and attempt to ascertain their wishes and feelings.	Complete
7	The Council and the Health Board should consider where closer partnership working could bring additional benefits and improve outcomes for the relevant person and their families.	Head of Adults, Health and Wellbeing Department			Every 3 months a regional meeting with representatives from health, social services and advocacy meet to discuss legislation, and how we can work together to improve the service for the person.	Complete
8	The Council and the Health Board should each ensure that Mental Capacity Act and DoLS training for managers and staff in all relevant social and health care settings becomes mandatory and is delivered regularly. They should audit the effectiveness of all such training.	Head of Adults, Health and Wellbeing Department			Training programme is in place under the usual departmental procedures.	Complete

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6. May 2014: Good Scrutiny? Good Question

This report does not include recommendations which were referred to the Welsh Government therefore, those references have been left out.

Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Rate your progress: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
1	Clarify the role of executive members and senior officers in contributing to scrutiny	Senior Manager – Democratic and Delivery	The scrutiny work program this year includes more policy items which are considered in advance. However, there is recognition that this does not go far enough. The Council's Audit Committee will discuss an action plan to respond to the recommendation in the new year. Electronic Link	A 360 degree review recent work by the Council and the Wales Audit Office has confirmed the need to do something about the gap that has been between scrutiny and the Executive. A sub-group which is leading the response to the WAO report has already approved some measures to tackle that in looking at the model of scrutiny and identification of specific items so-scrutiny	In progress
2	Ensure that scrutiny members and specifically scrutiny chairs, receive training and support to fully equip them with the skills required to undertake effective scrutiny.	Senior Manager – Democratic and Delivery	The work plan will go to the Audit Committee for discussion in the new year. In the meantime, a training course has been developed in conjunction with the Local Government Association and piloted for scrutiny members. The pilot course was held and a further course in February. Electronic Link	Training sessions have been developed and run in conjunction with the Local Government Association with 21 members attending over 2 sessions. It is intended to rerun such a session during the year as well as running 1: 1 sessions with any new scrutiny members.	In progress
3	Further develop scrutiny work programming to: <ul style="list-style-type: none"> • provide a clear rationale for topic selection • be more outcome focussed • ensure that the method of scrutiny is best suited to the topic area and the outcome desired, and • align scrutiny programmes with the Council's performance management , self-evaluation and improvement arrangements 	Senior Manager – Democratic and Delivery	The process for producing the work program is sound but needs to ensure greater consistency in its implementation. The work plan will go to the Audit Committee for discussion in the new year. More information can be found at Electronic Link	This year, in formulating the forward program of scrutiny for the year, particular attention was given to the proportion of different pre-scrutiny items. They are noted as pre-scrutiny items and they will therefore be reported on we will be able to track and measure the influence of pre-scrutiny decisions as executive decisions are made	In progress
4	Ensure that scrutiny draws effectively on the	Senior	The work plan will go to the Audit Committee for discussion in the new year. More	The procedure is in place to allow the Audit Committee to refer matters to scrutiny committees but has not yet been implemented.	In progress

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Rate your progress: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
	work of audit, inspection and regulation and that its activities are complementary with the work of external review bodies.	Manager – Democratic and Delivery	information can be found at Electronic Link	As it turns out there are a number of external auditors reports issues identified for 2016/17 pre-program	
5	Ensure that the impact of scrutiny is properly evaluated and acted upon to improve the function's effectiveness; including following up on proposed actions and examining outcomes.	Senior Manager – Democratic and Delivery	The work plan will go to the Audit Committee for discussion in the new year. More information can be found at Electronic link In the meantime, we have initiated a procedure of introducing the main scrutiny committee recommendations to Cabinet.	The emphasis by Scrutiny this year is to try to be much more sharp and decisive in terms of scrutiny recommendations in order to track the influence of the scrutiny on implementation. This will be of benefit to writing the 2016/17 scrutiny report and there will be a way of evaluating the impact of scrutiny generally at that time. No methodology has been identified as yet to do so.	Being planned
6	Undertake regular self-evaluation of scrutiny utilising the 'outcomes and characteristics of effective local government overview and scrutiny' developed by the Wales Scrutiny Officers' Network.	Senior Manager – Democratic and Delivery	The Council intends to look at good practice and learning from other councils. The work plan will go to the Audit Committee for discussion in the new year. More information can be found at Electronic link	The Sub-Group has undertaken an evaluation of current Scrutiny Arrangements and have concluded that the specific areas that need improvement are, namely: - <ul style="list-style-type: none"> • Strengthening the connection with dialogue between Scrutiny and Cabinet by doing more work to develop joint policies (the scrutineers with the Cabinet) • Clarity is needed on why we need scrutiny and appropriate skills and resources • Committee membership boundaries too sacred and the workload is inconsistent • Slow down the process and frequency of meetings An Action Plan to respond to this is in progress	In progress
7	Implement scrutiny improvement action plans developed from the Wales Audit Office improvement study.	Senior Manager – Democratic and Delivery	The Work Plan submitted to the Audit Committee in the new year.	The Action Plan approved by the Audit Committee is in progress and being further developed by the Scrutiny Arrangements Subgroup	In progress
8	Adopt Participation Cymru's 10 Principles for Public Engagement in improving the way scrutiny engages with the public and stakeholders.	Senior Manager – Democratic and Delivery	The work plan will go to the Audit Committee for discussion in the new year. More information can be found at Electronic link .	The Corporate Scrutiny Committee has evaluated the Council's engagement arrangements during 2015/16. Gwynedd Council has approved Participation Wales Principles and those principles will be followed in the further work that the Corporate Scrutiny Committee wants to achieve in 2016/17 for the simplest use of language understandable (which is part of the principles)	In progress

7. July 2014: Young People not in education, employment or training – Findings from a review of council in Wales

Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measure	Rate your progress: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
1	Together with partners, map and review expenditure on NEETs services to better understand the resources required to deliver the Framework.	Comunity Learning Senior Manager	During 2016 further work will be done regarding the analysis of expenditure and local resources for the group of young people not in education / training / employment. The cost of the recent mapping will be completed by March 2106. The Executive Youth Panel will have a key role in this process with recommendations shared with the Youth Engagement and Progression Framework (YEPF) Group Management.	<p>Mapping of support and provision services for the group Not in Education, Employment or Training (NEET) aged 16-24 has been completed in August 2014 and updated in November 2015. It includes information on mainstream services and European Social Fund (ESF) / short-term grant projects. There are around 40+ local providers who work with NEET group aged 16-24 with some providers targeting specific young people groups such as after care young people / mental health etc.</p> <p>An information event for support / provision for the 16-24 group is scheduled for June and will be attended by local providers. The event is targeted at agencies that do not currently provide services in Gwynedd in order to address gaps and local. A mapping exercise has been completed regarding the development of the regional ESF ADTRAC plan in context of the NEET target group. 400 16-24 year old unemployed individuals have been identified as a target group for the project- with an estimated 60 million cost to the public sector in Gwynedd if this group continues to be long-term unemployed.</p>		In progress
2	Clarify their strategic approach to reducing the proportion of 19 to 24 year olds who are NEET as well as their approach for 16 to 18 year olds.	Comunity Learning Senior Manager	We are in the process of establishing procedures for improving the transfer of young people not in education / training / employment services to adult services/ Jobcentre Plus before 18. A system will be introduced as part of the Young	16-18 yr old Tracking systems: Guidelines for tracking and keeping in contact are in place within the authority for the group aged 16-18. Tier 5 data by Careers Wales is shared monthly with the Engagement Manager and staff resources regarding the keeping in	The number of individuals in Tier 1 and who are unknown in Gwynedd has decreased over a period of 6 months.	In progress

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measure	Rate your progress: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
			<p>People executive panel referral form "transition" phase with Jobcentre Plus. We are also in the process of adjusting WASPI (Wales Accord on the Sharing of Personal Information) for the Jobcentre Plus and share data. We receive data NOMIS (National Office Labour Market Statistics) monthly, but recently we have received data numbers as well as areas from the ESA (Employment Support Allowance) for the 18-24 age group. ADTRAC 16-24 will be putting plans in place to reduce the number who are NEET in the age group 18-24 years old and targeting those who have registered for JSA within the first 6 months and targeting areas where there are high numbers who claim ESA eg Barmouth area in South Meirionnydd.</p>	<p>contact work is in place. (Workers' Youth). An executive Youth Panel 16-24 has been established within the authority where there are representatives from relevant agencies. A WASPI information-sharing agreement is in place and signed regarding sharing data. The panel is responsible for identifying the key worker and discussing / recognize the right provision. Work Clubs have been set up by the Youth Service / Careers Wales and Jobcentre for the group aged 16-24 with referrals from the job center.</p>		
3	<p>Focus on young people with significant or multiple barriers to engaging with education, employment or training rather than those who are more likely to re-engage without significant additional support.</p>	<p>Comunity Learning Senior Manager</p>	<p>Central referrals system through the Engagement Manager and the Youth Executive Panel 16-24.</p>	<p>Analysis and overview of the needs of vulnerable groups of young people within the County has been completed in August 2015. The data has been presented to the YEPF Management Group for prioritizing resources regarding the engagement framework. The data has been used to drawing up the ESF AD-TRAC 16-24yr old plan. Detailed data has been collected for young people in care and aftercare, young parents, young people who have needs and learning difficulties, mental health and young carers etc.</p>	<p>Current data for vulnerable groups in Gwynedd and evidence that a key worker has been identified through the young people's 16+ panel.</p> <p>Projects such as PACE / Young Parents are beginning to make a difference regarding the support of vulnerable groups.</p>	<p>In progress</p>
4	<p>Develop their objectives and targets for reducing the number of young people NEET so that they can be held to</p>	<p>Comunity Learning Senior Manager</p>	<p>System for 19-24 year olds in place. New schemes and projects such as AD-TRAC, improving tracking systems and impact and progress measurement within the authority.</p>	<p>A YEPF action plan is in place since March 2014 with clear targets regarding the 6 key areas. The plan will be completed by the Engagement Manager and monitored by the YEPF Management Group as part of the council's</p>		<p>In progress</p>

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measure	Rate your progress: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
	account and their work aligns with the Welsh Government's targets and objectives.			strategic plan and under the "Early Intervention" field. A copy of the detailed operational plan / strategically within the authority is available which identifies priorities and progress. The authority has used the framework of engagement grant for a secondment from Careers Wales to lead the work since April 2014. Significant progress has occurred during the past 18 months regarding developing early identification systems before the age of 16, designing a tracking system and keeping in touch 16-18, WASPI information sharing agreement pre and post 16, in place and approved, mapping support and provision elements, establishing work clubs.		
5	Ensure that elected members and partners fully understand that councils have a clear responsibility for leading and co-ordinating youth services for 16 to 24 year olds.	Senior Manager – Democratic and Delivery		There is a Lead Cabinet Member for Children and Young People and the NEET Young People area is under the responsibility of this member. The member receives an update on the governance framework under Gwynedd Council's Strategic Plan. The Engagement Framework is part of the Preventive Program which reports to the Children and Young People Achievement Panel, which is chaired by the lead member and which brings together other elected members and heads of various departments. As part of the Council's scrutiny arrangements the Cabinet Member reports on the progress of Strategic Plan projects to the Cabinet, any project can be called to scrutiny as necessary.		In progress

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6	Improve the evaluation of the effectiveness and relative value for money of the services and interventions in their area that are intended to reduce the proportion of young people who are NEET.	Comunity Learning Senior Manager	As part of the Engagement Framework and action plan an evaluation system for measuring the effectiveness of the 6 areas - with regard to the early identification system and its impact, the role and impact of key employees, and keep in tracking system link, the effect of local provision is needed to be actively develop. We have been working together on a regional level with the early identification system and further options regarding working together to measure the impact of various systems.	<p>A plan is in place to monitor the impact of the pre 16 early identification system across the region. The engagement manager has regular meetings with the TRAC Manager in measuring the impact on the identified group</p> <p>Mapping of services and support for young people aged 16-24 has been completed recently and the data has been used as an effective way of monitoring what difference those services have on the engagement of young people.</p>		In progress

8. Year 2013-14: Annual Review and Evaluation of Performance of the Care and Social Services Inspectorate Wales (CSSIW)

The report was circulated to the relevant officers and the relevant members. The report was presented to the Services Scrutiny Committee on 11th December 2014 by Marc Roberts and Vicky Poole, of the Care and Social Services Inspectorate Wales together with the Council's implementation plan. The Care and Social Services Inspectorate Wales report was also presented to the Cabinet on 19th February 2015 where it was agreed to give the go-ahead to the work programme that responds to the Inspectorate's recommendations and areas for improvement.

Improvement Area	Comments made by CSSIW in their annual evaluation of Gwynedd 2013-14	Action Plan	How do we monitor	Progress situation as at end of May 2015	Comments raised by the Service	Responsibility	Rate your progress: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete 	
Shaping Services								
1	Strategic planning with Betsi Cadwaladr University Health Board (BCUHB) in Child and Adolescent Mental Health Services (CAMHS).	The Child and Adolescent Mental Health Service (CAMHS) is part of BCUHB and do not monitor the therapeutic service to looked after children/young people placed out of authority unless they have made a financial contribution towards the placement.	<ul style="list-style-type: none"> • Meeting held at the beginning of Summer 2014, between the Council and BCUHB Senior managers, to discuss this area. • Further discussions to be held. 	Children and Supporting Families Departmental Management Team and if required escalate to the: - Children and Young People	<ol style="list-style-type: none"> 1. Meeting held early Summer 2014 between the Council and BCUHB Senior Managers to discuss this area. 2. High level meetings to continue. 3. Sub meetings also held as a result of the 	Sub meetings also held as a result of the Summer 2014 meeting and these are held quarterly. This is a positive step so to improve the strategic relationship for the future.	Head of Children and Supporting Families Department	Complete

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				Achievement Panel and - Corporate Parenting Panel	Summer 2014 meeting.			
2	Using information from looked after panels to describe the population needs and trends.	The council's systems do not routinely capture a profile of the looked after children population and their assessed needs. This information is essential if the authority is to evaluate the effectiveness of its placement and permanency strategies and predict future resource needs. The information presented to the various panels could contribute to a detailed profile of presenting need.	<ul style="list-style-type: none"> • The Children and Supporting Families Department has established permanent care planning panels, resource panels to look at new applications and a statutory placements Commissioning Panel and a Placements Management Panel. • There will be a requirement to summarise the information on care needs from these structures so to feed into the service's care strategies. 	The Children and Supporting Families Department through the: 1. Permanent Care Planning Panels 2. Resource Panels 3. Statutory Placements Commissioning Panel 4. Placements Management Panel If required escalate to the Children and Young People Achievement Panel	1. Panels established and are being held. 2. Placement Management Panel established in addition and as a result of the conclusions stemming from the Children End to End review. This keeps the focus on new placements, and ensures that children return home timely.	The Department will be able to pick out and identify tendencies stemming from these panels but to acknowledge that this will be a process over time.	Head of Children and Supporting Families Department	Complete
Getting help								

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3	Timeliness of initial assessment in children's services.	The percentage of initial assessments completed within seven days needs improvement; in 2013-14 the council completed 67% of initial assessments in seven working days compared to a Welsh average of 72%.	<ul style="list-style-type: none"> • One social worker role added to the Referral Team capacity. • Arrangement in place to ensure that a senior worker approves assessments so to improve the 7 day performance. • Work to improve arrangements, including regular preparation of reports to remind managers of cases that require closing. 	Children and Supporting Families Departmental Management Team and if required escalate to the: - Children and Young People Achievement Panel	<p>Achievement at the end 2015/16 for (SCC/042a) was 61% which is slippage 2014/15 result of 70%.</p> <p>The matter is receiving attention from the service and reasons are being analyzed.</p>	Efforts continue to ensure that we understand the reasons for any cases which have not met the requirements.	Head of Children and Supporting Families Department	In progress
4	Continued improvement to reduce the number of children re-referred.	There has been a reduction in percentage of children being re referred from 39% in 2011-12 to 26.6% in 2013-14; however, this still remains above average for Wales and is an area for continued improvement.	<ul style="list-style-type: none"> • The Children and Families Department to monitor closely to ensure and maintain continued improvement. • Systems of the Children and Families Department now differentiates between referrals and notifications, whereas this was not the case in past, which has led to improvement. 	Children and Supporting Families Departmental Management Team and if required escalate to the: - Children and Young People Achievement Panel	<p>1. Achievement at the end of 2015/16 for (SCC/010) was 24.8% which is further improvement on the 2014/15 achievement of 25.7%.</p> <p>2. The measure is therefore moving in the right direction</p>	Efforts continue and arrangements still implemented to ensure maintaining the improvement.	Head of Children and Supporting Families Department	In progress

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5	Awareness and use of advocacy services.	<p>The LAC inspection reported that young people said that they were encouraged to attend their reviews and that advocacy was available. The inspection found that the quality of the care plans was variable and needed to be refreshed by subsequent assessment.</p> <p>Some young people seen were not aware of the advocacy service and take up of the advocacy service is low with the issue based approach and lack of Welsh speaking advocates being identified as obstacles.</p>	<ul style="list-style-type: none"> • Create a regional consortium (North Wales) in order to ensure agreement on a Regional Advocacy service provision from April 2015 onwards. • Tendering process for a Regional Advocacy service. • Appoint an Advocacy service provider for the North Wales region. • Regional Advocacy service being provided. • Review of the steps to raise awareness and an increase in the use made of the service. 	<p>Children and Supporting Families Departmental Management Team and if required escalate to the:</p> <ul style="list-style-type: none"> - Children and Young People Achievement Panel - Corporate Parenting Panel - North Wales regional advocacy Consortia 	<ol style="list-style-type: none"> 1. Regional consortia established. 2. The tendering process has occurred and the process of deciding on the successful provider was completed by the end of January 2015. 3. The result of this work is that an advocacy provider has accepted a contract to provide over the 6 Counties in the North operational from 1st April 2015. 	<p>As a result of this work, we are contributing towards a national advocacy review with the intention of establishing a national service in the near future.</p>	<p>Head of Children and Supporting Families Department</p>	Complete
The services provided								
6	Consistency in responding to complaints	<p>The council has made improvements to its complaints process and the corporate oversight of complaints. Learning from complaints and using them to improve services is an important theme in "Ffordd Gwynedd", strategic matters and all investigations by the Ombudsman are now considered by the corporate director.</p> <p>There are examples where complaints involved those who complained in identifying improvements and solutions, but there still is a need to further improve the consistency and management of complaints.</p> <p>The council plans to improve the service and respond to the Welsh</p>	<ul style="list-style-type: none"> • Develop / review a Quality Assurance Strategy for the service that shall include the comments and complaints processes. • The staff of the Customer Care Unit to attend specialist training on complaints and data protection so to develop the skills of the staff and information base of the unit. • Implement in accordance with the 2013 Welsh Government's complaints arrangements and regulations (statutory on 1st June 2014) in light of 	<p>Adults Health and Wellbeing Departmental Management Team</p> <p>Annual Progress Report to CSSIW</p>	<ol style="list-style-type: none"> 1. We have launched a new local policy, held awareness raising sessions for staff and managers and launched a new leaflet for users. 2. A project is in progress to collaborate with young person to develop a specific sheet for children and young people on the complaints process. 3. The Customer Care Unit Staff have attended specialist complaints training in order to develop the staff's skills and the knowledge base of 	<p>Learning from complaints and making use of the information to improve services are important themes within the Gwynedd way of thinking to ensure that the citizen is central to everything that we do. The Corporate Director considers all reviews undertaken by the Ombudsman and responds to Stage 2 complaints.</p>	<p>Head of Adult, Health and Wellbeing Department</p>	Complete

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		Government new guidance regarding the management of complaints.	the new guidance – Doing Things Right. <ul style="list-style-type: none"> • In light of the new National regulations, revise the Department’s complaints guidelines and policy. • Publish information sheets in light of the revisions to guidelines and policy. • Training circle offered to staff all over the Social Services field. 		the unit. 4. Training has been designed for Service Managers 5. An e-learning module on the complaints process is also being developed for front line staff. 6. Quarterly complaints reports are being created by the Unit that highlight any statistics, response performance, matters arising and lessons to be learnt. There is also an annual report on matters over the year. These reports are shared with Management Teams and Managers in order to bring to their attention any issues and lessons to improve services as a result.			
7	Access to health care and accommodation for looked after children (Accommodation)	The CSSIW fostering inspection found that children and young people have secure placements where their needs are met. Children have a voice and have opportunities to speak up, and they can influence the way the service is delivered. The CSSIW inspection of Drws y Nant the council’s commissioned children’s home found a very strong sense of person centred care where	<ul style="list-style-type: none"> • Work towards increasing the range of internal foster carers. • Increase the range of placements available so to meet the needs of children and young people with complex needs that receive care. 	Children and Supporting Families Departmental Management Team and if required escalate to the: - Children and Young People Achievement Panel and	1. Efforts continue. 2. Gwynedd is part of a pilot for the "When I'm Ready" scheme along with Merthyr and Rhondda Cynon Taf Councils. The "When I'm Ready" scheme promotes the principle that the process of raising a child does not come	The use of fostering agencies is lower than previous years with regards new placements. The work is continuously challenging particularly so placements for children in their teens and those between 0	Head of Children and Supporting Families Department	Complete

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		<p>young people said they were listened to and valued.</p> <p>However, the looked after children inspection looked at young people with complex needs and found that the range of placements available was not sufficient to meet the complex needs of some young people and appropriate “matching” needs to foster carers’ skills did not always take place. The council is working to increase the range of in house foster carers to meet this need.</p>		- Corporate Parenting Panel	<p>to an end when young people reached eighteen years of age. The scheme provides young people with the option of continuing to receive help and support whilst remaining in their fostering placements beyond 18 year of age. As part of being involved in the pilot scheme the Council has:</p> <ul style="list-style-type: none"> • Introduced the scheme to the 16+ Team in order to discuss the options with young people and their foster carers. • Provided monthly updates and data to the monitoring group, including feedback on lessons learnt in order to refine the final guidance that will be published by the Welsh Government when the scheme is rolled out across Wales. • Developed a draft policy and practice guidance through the monitoring group. • Held two focus 	<p>and 2 years of age. A report was put before the June 2014 Services Scrutiny Committee on "When I'm Ready" Leaving Care Scheme.</p>		

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					<p>groups for young people and foster carers in order to gain their views on the scheme. These meetings were facilitated by Action For Children.</p> <ul style="list-style-type: none"> • Developed a cost impact analysis led by Rhondda Cynon Taf. • Developed a draft outcome measurement framework for young people who have been part of the scheme. 			
8	Access to health care and accommodation for looked after children. (Health)	<p>The national LAC inspection identified a need to develop looked after children's access to primary health services and move on accommodation. As part of its corporate parenting responsibilities, the council should ensure that children who they look after can use primary healthcare. Performance in being registered with a GP within 10 days declined from 92.5% in 2012-13 to 78.4% in 2013-14. Whilst the percentage of health assessments for looked after children improved by 15% to 46%, it still remains significantly below the Wales average of 81%.</p>	<ul style="list-style-type: none"> •The Children and Families Department to continue to monitor closely. • Continue to hold the discussion with the BCUHB to ensure that the arrangements for implementing health assessments are reviewed in a timely manner. • This area is reported on regularly to the Corporate Parenting Panel. 	<p>Children and Supporting Families Departmental Management Team and if required escalate to the:</p> <ul style="list-style-type: none"> - Children and Young People Achievement Panel and - Corporate Parenting Panel 	<ol style="list-style-type: none"> 1. Achievement at the end 2015/16 for (SCC/039) was 60.2% which was an improvement on the 2014/15 achievement of 50.6%. 2. Ambition for 2015/16 for SCC/039 was 60% so have achieved target <p>The performance was 10% better than the previous year which is encouraging, however it remains much lower than the</p>	<p>This is a matter of concern to the Council and is an area receiving attention from the Corporate Parenting Panel which continues to undertake discussions with BCUHB to ensure an improvement.</p>	<p>Head of Children and Supporting Families Department</p>	In progress

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				Welsh average of 81%.			
Effects on people's lives							
9	Evaluation of the impact of the corporate safeguarding structures.	In 2013-14 Gwynedd and Anglesey councils established a joint Safeguarding Adults Board. The board has developed a work programme to increase understanding of safeguarding and develop a preventative approach to safeguarding adults.	<ul style="list-style-type: none"> • Policies and arrangements reviewed annually and approved by the Strategic Safeguarding Panel. • Impact measurement reporting arrangement in place and reporting to the Strategic Safeguarding Panel, the Cabinet and Management Team. • Annual audit undertaken measuring the quality of safeguarding policies and arrangements and awareness of staff on how to respond in times of concerns. • Ensure an independent audit of the quality of safeguarding policies and arrangements through the sampling arrangements and the level of staff awareness within the Council. • Implement and act upon the audit recommendations. 	Strategic Safeguarding Panel Cabinet Corporate Management Team	1. Corporate arrangements continue. The Strategic Safeguarding Panel meets regularly every 6 weeks to 8 weeks and the Operational Panel meets monthly. 2. A report was submitted to the Cabinet on 16 December 2014 reporting on the results of 3 Safeguarding related inspections. The report concentrated on the corporate recommendations made by the auditing bodies. 3. The recommendations and intentions were approved by the Cabinet. The Panel agreed to incorporate these recommendations into the 2015-2016 Work Programme. 4. The audit commissioned by the Strategic Panel "Audit - Safeguarding Children and Adults (Gwynedd Council)	The 3 reports which were the basis for the discussion in the December 2014 Cabinet were: i. "Report on the quality of local authority education services for children and young people." Estyn and the Wales Audit Office in March 2013. ii. "National Inspection of Safeguarding and Care Planning for looked after children and care leavers who exhibit vulnerable or risky behaviours." CSSIW in August 2014 iii. "Local Authorities' Safeguarding Children Arrangements" Wales Audit Office in October 2014.	Complete

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					and carried out by an external expert was published. This is a positive report that includes a series of recommendations. These were discussed in the Strategic Panel and a decision made to incorporate them into the 2015-2016 Work Programme.			
10	Timeliness of child protection conferences.	The council has reduced the number of children it looks after from 203 in 2012-13 to 185 in 2013-14. It has significantly improved its performance in the timeliness of reviewing the care plans of looked after children, with 94.3% now being carried out within statutory timescales compared to 75.4% in 2012-13. However, this remains below average for Wales (95.9%).	<ul style="list-style-type: none"> • The Children and Families Department to continue to monitor closely. • The Children and Families Department to receive from Independent Reviewing Officers the reasons on each late review and to respond as is appropriate. 	Children and Supporting Families Departmental Management Team and if required escalate to the: - Children and Young People Achievement Panel and - Corporate Parenting Panel	1. Monitoring and accepting reasons for late conferences continues. 2. Performance for the end of 2015/16 SCC / 014 was 86.7% and SCC / 034 was 85.5%.	The Department keeps a close eye on the reasons why conferences are late and have found a clear pattern of failing to get a quorum (in line with the All Wales Child Protection Procedures) to conduct a conference review in particular. The chair will make a decision based on professional judgment to continue the conference without the key partners, or to defer to ensure attendance. The issues are brought to the attention of statutory partners regularly to seek a solution.	Head of Children and Supporting Families Department	In progress

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	Improvement Area	Comments made by CSSIW in their annual evaluation of Gwynedd 2013-14	Action Plan	How do we monitor	Progress situation as at end of May 2015	Comments raised by the Service	Responsibility	Rate your progress: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
Delivering Social Services								
11	Raise awareness of the implications and requirements of Deprivation of Liberty Safeguards (DoLS) and improve the governance arrangements for the operation of the procedures.	<p>The CSSIW DoLS inspection found that the appropriate training was provided to the specialist assessors who were supported by knowledgeable and experienced managers. Local training and promotion of the DoLS outside the council had not resulted in wide awareness and understanding of the safeguards. The need to increase DoLS training and awareness reflects a more general need to mainstream the DoLS throughout the council, social care and health. Inspectors noted that the council should examine its management arrangements to ensure that there is no conflict of interest between the supervisory body that oversees the DoLS assessment process and the managing authority that is responsible for the care provided.</p> <p>Recent case law has considerably widened the scope for potential application of the DoLS safeguards and this is already having a marked impact upon demand and the need for the council to appropriately respond. The council has 9 best interest assessors and is in a good position to meet the increase in demand.</p>	<ul style="list-style-type: none"> • Revise Gwynedd's DoLS arrangements. • Appoint a DoLS Co-ordinator for Gwynedd. • Preparations with regards training staff on the DoLS arrangements and requirements. • Formulate a DoLS work programme in relation to further work to respond locally to DoLS obligations. • Prepare and submit a financial bid for permanent funding, to fund the DoLS Co-ordinator post and fund a solicitor and administrative support to undertake DoLS requirements, from 2015 onwards as part of the Council's bidding process. 	<p>Adults Health and Wellbeing Departmental Management Team</p> <p>Strategic Safeguarding Panel</p>	<ol style="list-style-type: none"> 1. Reviewing of Gwynedd DoLS arrangements has occurred. 2. A DoLS Co-ordinator for Gwynedd has been appointed. 3. A bid formed and submitted for permanent funding, for the purpose of funding the DoLS co-ordinator and to fund a lawyer and administrative support to undertake the DoLS requirements, from 2015 onwards as part of the Council bidding process. 4. Staff training arrangements with regards DoLS arrangements and guidelines. 5. The work of formulating a DoLS work plan for further efforts, to respond locally to DoLS obligations, to be completed by end of March 2015. 	<p>It is apparent that the financial bid for permanent corporate resources has not been successful. A need therefore to identify resources from the Department's budgets (acknowledging the efficiency savings and cuts agenda that we face). The number of DoLS applications has increased significantly between 2013-14 and 2014-15.</p> <p>DoLS applications 2013-14 : 7 DoLS applications 2014 - 15 : 365 Authorised applications: 152 Applications assessed but which do not meet th DoLS criteria: 25 Inappropriate referrals : 69 Waiting list: 119 Total medical costs since April 2014 - £26,411.72</p>	Head of Children and Supporting Families Department	Being planned
12	Quality assurance - Adults Health and Well-being Department	<p>The council's ability to accurately report on performance has continued to improve. Risk management within the service has improved with regular use and updating of a risk register.</p>	<ul style="list-style-type: none"> • In terms of data – develop a new system which will draw out data directly from the Department's Data Recording Management 	Adults Health and Wellbeing Departmental Management Team	A new system was developed by March 2014 to pull data directly from the Department Data	We shall prepare quarterly reports pulling out the key messages arising from complaints, any audits and information	Head of Adult, Health and Wellbeing Department	In progress

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	Improvement Area	Comments made by CSSIW in their annual evaluation of Gwynedd 2013-14	Action Plan	How do we monitor	Progress situation as at end of May 2015	Comments raised by the Service	Responsibility	Rate your progress: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
		<p>The council has not established a comprehensive quality assurance system. It plans to do so in 2014-15.</p> <p>The need to improve quality assurance was noted by CSSIW in last year's annual evaluation report. It is also an area for improvement in both of the recent national inspections and in the adoption inspection report. The council is introducing a cross cutting children and adults safeguarding and quality assurance team.</p>	<p>system and will report on data quality.</p> <ul style="list-style-type: none"> • Use the new system to report on a quarterly basis. • Prepare, develop and promote guidelines for using the system for employees within the priority fields. • Draw up and agree on a quality assurance strategy across the service. 	<p>Annual Progress Report to CSSIW</p>	<p>Entry Control system highlighting any data quality issues. This is used from now on and to report data or performance management according to need.</p> <p>The work of creation a quality assurance strategy is being addressed and is being planned within the new Adult, Health and Welfare Department structure.</p>	<p>stemming from the contracts monitoring process. The report shall summarise all the information and then highlight the maing messages and risks. Undertaking quality assurance of social work practice is now part of the scheme.</p>		
13	Quality assurance - Children and Supporting Families Department	<p>The council's ability to accurately report on performance has continued to improve. Risk management within the service has improved with regular use and updating of a risk register. The council has not established a comprehensive quality assurance system. It plans to do so in 2014-15.</p> <p>The need to improve quality assurance was noted by CSSIW in last year's annual evaluation report. It is also an area for improvement in both of the recent national inspections and in the adoption inspection report. The council is introducing a cross cutting children and adults safeguarding and quality assurance team.</p>	<ul style="list-style-type: none"> • A Safeguarding and Quality Unit to be established and structurally accountable to the Head of Children and Supporting Families • Formalise the quality assurance framework for children as part of the work programme for the Children and Supporting Families Department during the 2015/16 performance year period 	<p>Children and Supporting Families Departmental Management Team</p>	<p>1. The Safeguarding and Quality Unit established during April 2014 which is structurally accountable to the Head of Children and Supporting Families 2. Work ongoing in order to develop this unit.</p>	<p>During 2015/16 there shall be specific efforts to formalise the children's quality assurance framework as part of the Children and Supporting Families Department work programme.</p>	<p>Head of Children and Supporting Families Department</p>	In progress

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Improvement Area	Comments made by CSSIW in their annual evaluation of Gwynedd 2013-14	Action Plan	How do we monitor	Progress situation as at end of May 2015	Comments raised by the Service	Responsibility	Rate your progress: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete 	
Providing direction								
14	Corporate parenting support for looked after children by the council and partners.	The council has made positive steps in its corporate parenting arrangements but these now need to be further developed. The corporate parenting panel will work with looked after children in 2014-15 to provide outline the actions that the council will take to support children in care. Members will need to provide greater support to assure that the strategic aims are effectively owned and translated into action across the council's services and by partner agencies; ensuring appropriate health care, increased educational support and temporary employment in the council for looked after children.	<ul style="list-style-type: none"> • Developing a Strategy. • Implementing the Strategy. • Annual Report of the Corporate Parenting Panel submitted to Cabinet. 	Corporate Parenting Panel	1. Previous meeting of the Panel was on 20th April 2015. 2. Discussed was: - draft of the Strategy - Health report on looked after children - Health care of looked after children - Looked after children quarterly report - Looked after children personal education plans report - The fostering service - End to end project	The Edge of care Team is operational since the start of February 2015. It was noted that the results have been scheduled to be presented before the Services Scrutiny Committee before the end of the year. It was reported that a review of the Fostering Service was undertaken by CSSIW between end October and early November 2014. It was noted that it was a positive review and was content that the fostering service promotes the welfare of those children under their care.	Head of Children and Supporting Families Department	In progress

9. October 2014 - Local Authorities Safeguarding Children Arrangements Gwynedd Council – Wales Audit Office Report

Gwynedd Council's Local Authorities Safeguarding Children Arrangements were audited by Wales Audit Office and a report was published in October 2014. Following this, the proposals below were submitted in the report of Councillor Wyn Williams to the Cabinet on 16 December 2014. In order to ensure that action had been taken in terms of the proposals, the report in question was submitted, as well as the national report, to the Strategic Safeguarding Children and Vulnerable Adults Panel (29 September 2015). It was agreed at the meeting that the Operational Group would consider the national recommendations and local proposals and report on any gaps that remain which require further attention. The Operational Group will report back to the Strategic Safeguarding Children and Vulnerable Adults Panel on 02 December 2015.

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Ref	Further proposals for improvement	Responsibility	Implementation Plan	By When	The monitoring arrangement and the progress made so far	Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
1	Review the Local Authority Designated Officer for Child Protection requirements under the Children Act 2004 to ensure full compliance with the legislation.	Corporate Director	<ol style="list-style-type: none"> 1. The proposal was submitted to the Cabinet – 16.12.14. 2. The report was discussed with relevant officers to try to identify potential actions. 3. The proposal was submitted to the Strategic Safeguarding Children and Vulnerable Adults Panel (29.09.15) to see whether or not further action was required to what had already been implemented. 4. Observations in terms of any gaps that remain or elements that require further attention is expected at the next meeting of the Strategic Safeguarding Children and Vulnerable Adults Panel – 02.12.15. 	02.12.15	The recommendation is unclear, and the Department have contacted the Wales Audit Office for clarity. Waiting for a response by the Wales Audit Office.	In progress
2	Improve scrutiny of key elements of the Council's safeguarding arrangements through, for example, regular reporting on performance on safe recruitment; attendance and impact of safeguarding training; and the outcome of the annual school audit programme.	Senior Manager - Democratic and Delivery	<ol style="list-style-type: none"> 1. The proposal was submitted to the Cabinet – 16.12.14. 2. The report was discussed with relevant officers to try to identify potential actions. 3. The proposal was submitted to the Strategic Safeguarding Children and Vulnerable Adults Panel (29.09.15) to see whether or not further action was required to what had already been implemented. 4. Observations in terms of any gaps that remain or elements that require further attention is expected at the next meeting of the Strategic Safeguarding Children and Vulnerable Adults Panel – 02.12.15. 5. It should be emphasised that the existence of the Strategic Safeguarding Panel is evidence in itself of scrutinising the safeguarding field – this is one of the reasons for the Panel namely to monitor and scrutinise the field. <p>The item was noted at the annual workshop of the Services Scrutiny Committee during the year.</p>	02.12.15	<p>The matter was considered by the Services Scrutiny Committee at its meeting on 26 November when the focus was on the work of the Strategic Protection Panel.</p> <p>The committee decided to seek further information for their next Preparatory Meeting on the figures on the number of whistleblowing cases also implications arising from the CSSIW report on private residential home Plas y Bryn, Bontnewydd</p>	In progress
3	Provide training for all staff on the Council's Whistleblowing Policy.	Learning and Development Manager	<ol style="list-style-type: none"> 1. The proposal was submitted to the Cabinet – 16.12.14. 2. The report was discussed with relevant officers to try to identify potential actions. 3. The proposal was submitted to the Strategic Safeguarding Children and Vulnerable Adults Panel (29.09.15) to see whether or not further action was required to what had already been implemented. 	02.12.15	<p>In terms of "Whistleblowing" in the context of Safeguarding, there are instructions on how to report concerns within the Safeguarding policy and modules.</p> <p>Also:</p> <ul style="list-style-type: none"> ○ reference is made to it in the workshops for managers ○ cards with contact numbers have been circulated to staff 	Complete

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Ref	Further proposals for improvement	Responsibility	Implementation Plan	By When	The monitoring arrangement and the progress made so far	Rate your progress as
			<p>4. Observations in terms of any gaps that remain or elements that require further attention is expected at the next meeting of the Strategic Safeguarding Children and Vulnerable Adults Panel – 02.12.15.</p> <p>Due to the number of individuals who need to receive basic awareness raising sessions in the Safeguarding field, sessions will be held through e-learning under the care of the Learning and Development team.</p> <p>In addition to this, a Series of Awareness Raising workshops for Managers and Elected Members have been held, and further sessions are being arranged for the future.</p>		As this is slightly different to the general “Whistleblowing” procedure, it is not anticipated that additional sessions to the e-learning modules will be held.	<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete

10.October 2014: Delivering with less – the impact on Environmental health Services and citizens

Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as:
1	<ul style="list-style-type: none"> • Revise the best practice standards to: align the work of environmental health with national strategic priorities; identify the wider contribution of environmental health in delivering strategic priorities of the Welsh Government; and • identify the benefit and impact of environmental health services on 	Public Protection Manager (Enviroment)	It is increasingly difficult to ensure that the environmental health service reaches the current advanced level with regards to environmental health service delivery. With more cuts being considered that will affect frontline statutory services - it will be difficult to reach even the basic standards of best practice from 2016 onwards. The revised standards will reflect the financial context, and this will create a better understanding among the general public in terms of what service levels will be possible. We aim to reach the basic standards of good	<p>New National Standards of Best Practice are about to be published.</p> <p>The service will strive to meet the standards and achieve statutory duties and put procedures in place for this (The position of the Environmental Health service is a challenging with regards to meeting minimum standards due to the cutting of two front line jobs from the structure)</p>	Efficiency, consistency, and managing expectations as well as being able to concentrate on addressing statutory duties.	<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete <p>Being planned</p>

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as:
	protecting citizens.		practice, where budgets are making it possible.			<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
2	Provide scrutiny chairs and members with the necessary skills and support to effectively scrutinise and challenge service performance, savings plans and the impact of budget reductions.	Senior Manager Democratic and Delivery	Further work in response to the WAO report and 360 degree review is on-going internally. This will look at developing scrutiny members skills.	<p>Specific training sessions are designed for scrutiny members and there will be a clearer focus this year on the scrutiny work and what Scrutiny is trying to improve.</p> <p>Moreover, it is intended to hold one or two exercises this year in order to identify better ways of discussing performance</p>	Better scrutiny of results	In progress
3	<p>Improve engagement with local residents over planned budget cuts and changes in services by:-</p> <ul style="list-style-type: none"> • consulting with residents on planned changes in services and using the findings to shape decisions; • outlining which services are to be cut and how these cuts will impact on residents; and • setting out plans for increasing charges or changing standards of service. 	Public Protection Manager (Enviroment)	The Cabinet will use the results of the questionnaires and the consultation process to help them make a decision on what services will be cut. There is real concern that environmental health services do not have enough of a high profile as say, social services work among the public, and there have been efforts to try to ensure that the public and elected members understand the risks of a breach in these services	<p>Citizens and members have received information as part of the Challenge Gwynedd proses. Service Unit reviews have started that includes ascertaining the views of residents on the Service. The review is one that will take time to be implemented across the Service.</p> <p>Review of the Service structure will be held in order to respond to the practical impact of the loss of two front line as part of the job cuts.</p> <p>Review of fees for 2016/17 is now operational and we are looking at other opportunities to charge for services such as offering advice</p>	The public is aware of the implications involved with the jobs cuts	In progress
4	<p>Improve efficiency and value for money by:</p> <ul style="list-style-type: none"> • Identifying the statutory and non-statutory duties of council environmental health services. • Agreeing environmental health 	Public Protection Manager (Enviroment)	All relevant fees associated with the services offered will be reviewed so that the services move towards recovering costs. Possible options of integration or cooperating more closely with other Council services has been considered in order to discover if possible to increase efficiency and reduce costs further.	Environmental health services have been reviewed over the past 3 years in order to identify what is statutory and non-statutory. We have also identified the statutory duties of those where there is flexibility in the way that we are able to achieve, in order to make more effective use of budgets, and target resources to those services that cannot be achieved in a different way. The council is very aware of what its core priorities; and an effort is being made under increasingly difficult circumstances to protect the	Greater efficiency. Target resources more effectively. Impact in the future is unpredictable until a final decision has been made about what further cuts to frontline services will be made such as core food safety and pollution control.	In progress

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
	<p>priorities for the future and the role of councils in delivering these.</p> <ul style="list-style-type: none"> • Determining an 'acceptable standard of performance' for environmental health services (upper and lower) and publicise these to citizens. Improving efficiency and maintaining performance to the agreed level through: <ul style="list-style-type: none"> - collaborating and/or integrating with others to reduce cost and/or improve quality; - outsourcing where services can be delivered more cost effectively to agreed standards; - introducing and/or increasing charges and focusing on income-generation activity; - using grants strategically to maximise impact and return; and - reducing activities to focus on core statutory and strategic priorities. 		<p>There has already been a decline in activities that are not statutory. Relevant policies are being reviewed so that what is expected of services is clear to the public. We are moving towards providing more information online and increasing what is possible through self-service.</p>	<p>budgets of those services that are fundamental to ensuring public health, such as food security, health and safety and pollution control. There are examples of joint working on specific projects with other Councils in order to ensure more effective use of resources.</p>		
5	<p>Improve strategic planning by:</p> <ul style="list-style-type: none"> • identifying, collecting and analysing financial, performance and 	Public Protection Manager (Environment)	<p>Local performance measures are being reviewed in order to be certain of our ability to measure the demand for our services effectively and that the public receives a quality and</p>	<p>Work has been done as part of an initial review of Service Units to identify the purpose of the service with performance measures developed that are specifically relevant to the purpose.</p> <p>Performance measurement and assessment</p>		In progress

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as:
	<p>demand/need data on environmental health services;</p> <ul style="list-style-type: none"> • analysing collected data to inform and understand the relationship between 'cost: benefit: impact' and use this intelligence to underpin decisions on the future of council environmental health services; and • agree how digital information can be used to plan and develop environmental health services in the future. 		<p>timely service. The meters will be used to plan if necessary to review how service unit resources are shared.</p>	<p>procedures have been developed to make the citizen at the center of what we are achieving. We challenged data a lot more in order to try to understand performance and to make changes where necessary.</p> <p>The service has been operating on a training program to improve the use and understanding of our back office system. Also, a program is being put in place for the introduction of amendments and to try to prioritize those improvements. The Service also keeps track of the Tascomi back office system - which is being introduced in other authorities to consider if there are opportunities</p> <p>Looking at further opportunities for mobile working and increasing digital / electronic work will form part of the Service Review</p>		<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete

11.January 2015 – Managing the Impact of Welfare Reform Changes on Social Housing Tenants in Wales

Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as:
1	<p>Improve strategic planning and better co-ordinate activity to tackle the impact of welfare reform on social-housing tenants by ensuring comprehensive action plans are in place that cover the work of all relevant council departments, housing</p>	<p>Learning and Development Manager</p>		<p>A multiagency Welfare Reform Task Group; in addition to an internal Welfare Reform Board for heads and members for planning work programs and joint interventions of welfare reform have been established. Because of the delay and the slippage in the timetable of introducing the Universal Credit in the county the focus of the Board and the Task Group has been on all general matters to do with combating poverty and deprivation, and Welfare reform is a part of the</p>		<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete <p style="text-align: center;">Complete</p>

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as:
	associations and the work of external stakeholders.			<p>broader agenda.</p> <p>In addition there is a plan within the Strategic Plan, T7 Working together against poverty. The purpose of the project is to adopt and implement a strategy to Defeat Poverty in Gwynedd in conjunction with partners.</p> <p>The Digital Gwynedd Group and the Gwynedd Financial Inclusion Group meet regularly in order to pulling together agencies that operate in these inclusion areas to provide frontline training jointly; maintain an information directory of support services and counseling etc.</p>		<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
2	<p>Improve governance and accountability for welfare reform by:</p> <ul style="list-style-type: none"> • appointing member and officer leads to take responsibility for strategic leadership on welfare reform and be accountable for performance; and • ensuring members receive adequate training and regular briefings on welfare reform to be able to challenge and • scrutinise performance and decisions. 	Learning and Development Manager	<p>On adopting the Tackling Poverty Strategy and reviewing the Council's Strategic Plan we will develop measures for the combating poverty field. We will build on the WRAT work commissioned during 2014-15 with Capita for identifying dwellings affected by welfare reform in order to gauge whether the interventions that are planned as part of the Working Together Against Poverty reach the correct dwellings. This data system will also support external agencies to target dwellings most affected by welfare reform as we develop information sharing systems.</p>	<p>The Council has appointed an elected member and a corporate director with lead responsibility for the tackling poverty field (which includes welfare reform). The Elected Member and Director receive regular reports on the welfare reform and combating poverty work through the quarterly Deprivation Panel.</p>		Complete
3	<p>Ensure effective management of performance on welfare reform by:</p> <ul style="list-style-type: none"> • setting appropriate measures to enable members, officers and the public to 	Learning and Development Manager	<p>On adopting the Tackling Poverty Strategy and review the Council's Strategic Plan we will develop measures for the combating poverty field.</p>	<p>Project leaders report the progress of projects to the Cabinet Member and Director regularly on the welfare reform and defeating poverty work on a quarterly basis through the Economy, Poverty, Deprivation and Housing Panel.</p>		Complete

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
	judge progress in delivering actions; <ul style="list-style-type: none"> • ensuring performance information covers the work of all relevant agencies and especially housing associations; and • establishing measures to judge the wider impact of welfare reform. 					
4	Strengthen how welfare-reform risks are managed by creating a single corporate-level approach that co-ordinates activity across the council and the work of others to provide adequate assurance that all the necessary and appropriate actions to mitigate risk are taking place.	Learning and Development Manager		The Council has identified the Working Together against Poverty Project as a priority project in the Strategic Plan for the period 2015-17. The work programme of this project, which is organized according to areas which are Strategic and Governance; Economic inclusion; Digital Inclusion and Financial Inclusion identifies what the Council and others are doing to respond to welfare reform and poverty. A working group is in place for each stream and they report through the project manager to the Deprivation Panel.		<p style="text-align: center;">Complete</p>

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
5	<p>Improve engagement with tenants affected by the removal of the spare-room subsidy through:</p> <ul style="list-style-type: none"> • the provision of regular advice and information on the options open to them to address the financial impact of the change in their circumstances; • the promotion of the 'Your benefits are changing' helpline; and • the provision of support to tenants specifically affected by the removal of the spare-room subsidy to participate in regional/national employment schemes. 	Strategic Housing Manager	<ul style="list-style-type: none"> • Information provided by the Research Unit will be used to target assistance effectively • The Housing Associations will continue to promote the helpline and offer 1 to 1 support to tenants who need them • Smaller units (1 and 2 bedroom) which are funded through Smaller Entities Social Housing Grant will be completed from January onwards. These are specific scheme of supply new housing for those who have been affected by welfare reform. An allocation policy has been approved by the Housing Association to ensure that those who are affected by welfare reform are supported / offered suitable properties 	<ul style="list-style-type: none"> • The Research Unit has used data to identify specific areas that would be affected by the Welfare Reform changes and helped target the right support to help people who need it the most • Housing Associations have officials to advise on possible options as a result of changes to lose the spare room subsidy - this is possible by connecting via the website, letter, phone call or visit • All Housing Association have promoted the Helpline 'your benefits are changing' consistently through their newsletters and web sites • The Housing Options Team which administers the Common Housing Register will advise on the type of property most suitable for candidates so they are not offered a home that will mean that they will pay extra • The use of sites like Homewapper has been promoted so that tenants can exchange their houses 		Complete
6	<p>Improve management, access to and use of Discretionary Housing Payments by:</p> <ul style="list-style-type: none"> • establishing a clear policy or guide that is available in hard copy and online to the public that sets out the council's policy and arrangements for administering Discretionary Housing Payments; • clearly defining eligible and non- 	Senior Manager - Revenue & Risk / Benefits Manager	We will continue to review the policy on an annual basis, taking into account the funding available for the scheme. We will also consider the implications of any court proceedings, such as Hardy v Sandwell Borough Council (2015).	Following work through the WLGA Gwynedd was part of a Policy Framework was produced that each Council could use as a basis for consistent policies across Wales. The Framework was presented to members of the Deprivation Project Group in December 2014, and in a consultation exercise the draft Policy was shared with stakeholders such as Housing Associations, the Health Board and representatives of the Third Sector. Gwynedd Council's Discretionary Housing Payment Policy was adopted formally for 2015/16 by the relevant Cabinet Member's Decision Sheet, dated March 17th 2015.		Complete

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
	<p>eligible housing costs covered by Discretionary Housing Payments in application forms, policy documentation and applicant guidance leaflets;</p> <ul style="list-style-type: none"> • clearly setting out the maximum / minimum length of time that such payments will be provided; • setting and publishing the timescale for the council making a decision on Discretionary Housing Payments applications • including information within public literature on the council's policy for right to review or appeal of a decision and the timescales and process to be followed in deciding on these; and • clearly define the priority groups for Discretionary Housing Payments in public literature to ensure that those seeking assistance, and those agencies supporting them, can assess whether such payments are 					

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as:
	a viable option to address their housing and financial needs.					<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete

12. February 2015 – Managing early departures across Welsh public bodies

Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as:
						<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
1	Public bodies should use business cases to support all individual early departures. Business cases should identify the cost and service delivery implications of the individual leaving and take account of relevant wider workforce planning.	Head of Corporate Support / Human Resources Advisory Services Manager		The practice of using business cases before reaching a decision on individual cases of early departure has been set up within the Council. Considerations include the cost associated with any early departure alongside the potential impact on the service being provided. As an example, the Council's early retirement policy refers to the best practice of basing such decisions on best practices.		Complete
2	We recommend that public bodies: <ul style="list-style-type: none"> • Ensure that councillors or board members have the opportunity to examine the value for money of early departure schemes through established scrutiny/governance arrangements. • Ensure that councillors and/or board members approve higher value packages, such as those for senior management. • Consider using internal audit to provide assurance on overall management of early departure schemes. 	Head of Corporate Support / Human Resources Advisory Services Manager		The aspect of this response is being developed. For example, a recent report presented to the Council's corporate scrutiny committee which referred to some elements related to early retirements. We do not have recent examples where it is necessary to gain the approval of councillors for more expensive packages. However the Council's internal audit unit has programmed an investigation for the period 2016/17 which will consider the management of the early departure field.		Being planned

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
3	Public bodies should ensure where settlement agreements are used, their records clearly identify whether a package includes an enhancement payment and if so, its value and the reason for the enhancement payment.	Head of Corporate Support / Human Resources Advisory Services Manager		The Council has long-standing arrangements in place which ensures that there is a record of details of any settlement agreement.		Complete
4	Public bodies should give due consideration to the equality impact of all early departure arrangements, in particular where a public body is running a specific scheme covering multiple possible <i>departures</i> .	Head of Corporate Support / Human Resources Advisory Services Manager		Although impact assessment procedures have been developed for several years, there is reason to believe that the work is inconsistent. We have identified the general equality impact assessment as a priority within our Equality Scheme.		Being planned
5	Public bodies should monitor and report as part of their internal governance arrangements on expected and achieved savings as a result of early departures. This will help inform future cost reduction plans.	Head of Corporate Support / Human Resources Advisory Services Manager	There will be consideration of this element in the investigation by the internal audit unit referred to in A3 above.	There will be consideration of this element in the investigation by the internal audit unit referred to in A3 above.		Being planned
6	Public bodies should review their record keeping for early departure arrangements, so that they can more readily identify key information including the number and costs of early departures in a given period, payback period information based on salary and employers' National Insurance and pension costs, and settlement agreements.	Head of Corporate Support / Human Resources Advisory Services Manager	The Council keeps detailed records on decisions relating to early departure, including the costs involved. It is envisaged that the audit referred to in A3 above will give some consideration to this element.	The Council keeps detailed records on decisions relating to early departure, including the costs involved. It is envisaged that the audit referred to in A3 above will give some consideration to this element.		Being planned

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13. Year 2014-15 – Annual Improvement Report by the Wales Audit Office. Published 7 July 2015.

Presented to the Corporate Management Team, Cabinet Members, Heads of Service, Chairs and Vice-Chairs of the Scrutiny Committees and the Audit Committee on 30th July 2015.

Ref	Further proposals for improvement	Responsibility	Implementation Plan	The monitoring arrangement and the progress made so far	Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
1	Participate more fully in the Welsh Government's Waste and Resource Action Plan to validate and/ or improve waste recycling and cost reduction plans.	Head of Highways and Municipal	Application made to the Welsh Government to carry out an exercise 'Toolkit Waste & Resources Action Programme'(WRAP) under the 'Collaborative Change Programme' (CCP). No budget available under the Welsh Government Programme to undertake this work this year, but is willing to consider this for 2016/17.	A specific scoping meeting has been held with WRAP and a draft copy of the work programme and what they will be looking at is expected at the end of January.	In progress
2	Ensure – in conjunction with its partners – that the Joint Local Service Board has sufficient resources to enable it to discharge its responsibilities effectively, including the update of the Single Integrated Plan.	Delivering and Supporting Change Service Senior Manager		WRAP, with the assistance of the Department making the Kerbside Analysis Tool review (KAT) at the moment. A draft report of the review is expected in September.	Complete

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14. July 2015 – A Review of Corporate Safeguarding Arrangements in Wales

Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
1	Improve corporate leadership and comply with Welsh Government policy on safeguarding through:	Corporate Director	<ul style="list-style-type: none"> • the appointment of a senior lead officer who is accountable for safeguarding and protecting children and young people with corporate responsibilities for planning improvements; • the appointment of a lead member for safeguarding; and • regularly disseminating and updating information on these appointments to all 	<ul style="list-style-type: none"> • Senior Lead Officer has been appointed • Lead member for safeguarding has been appointed • Information on the appointments are shared with staff 		Complete

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as:
			staff and stakeholders			<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
2	Ensure there is a corporate-wide policy on safeguarding covering all council services to provide a clear strategic direction and clear lines of accountability across the council.	Corporate Director		Corporate policy in place as well as individual departmental policies.		Complete
3	Strengthen safe recruitment of staff and volunteers by:	Corporate Director	<ul style="list-style-type: none"> • ensuring that Disclosure and Barring Service (DBS) checks and compliance with safe recruitment policies cover all services that come into contact with children; • creating an integrated corporate compliance system to record and monitor compliance levels on DBS checks; and • requiring safe recruitment practices amongst partners in the third sector and for volunteers who provide services commissioned and/or used by the council which are underpinned by a contract or service level agreement. 	Robust policies and guidelines in place regarding DBS checks, and levels are monitored regularly. Clauses within contracts exist to insist safe recruitment practices.		Complete
4	Ensure all relevant staff, members and partners understand their safeguarding responsibilities by:	Corporate Director	<ul style="list-style-type: none"> • ensuring safeguarding training is mandated and coverage extended to all relevant council service areas, and is included as standard on induction programmes; • creating a corporate-wide system to identify, track and monitor compliance on attending safeguarding training in all council departments, elected members, schools, governors and volunteers; and • requiring relevant staff in partner organisations who are commissioned to work for the council in delivering services to children and young people to undertake safeguarding training. 	An e-learning module on safeguarding children and vulnerable adults has been developed. In addition, the Council's policy is available in the Centre for Policy on the Council's intranet.		In progress
5	Improve accountability for corporate safeguarding by regularly reporting safeguarding	Corporate Director	<ul style="list-style-type: none"> • benchmarking and comparisons with others; • conclusions of internal and external 	A report is submitted by the Strategic Safeguarding Children and Adults		In progress

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Impact Measurement	Rate your progress as:
	issues and assurances to scrutiny committee(s) against a balanced and council-wide set of performance information covering:		audit/inspection reviews; <ul style="list-style-type: none"> • service-based performance data; • key personnel data such as safeguarding training, and DBS recruitment checks; and • the performance of contractors and commissioned services on compliance with council safeguarding responsibilities. 	Panel every 6 months to the Cabinet, in addition project reports are reported using the usual performance management arrangements within the Council.		• Not started • Being planned • In progress • Complete
6	Establish a rolling programme of internal audit reviews to undertake systems testing and compliance reviews on the council's safeguarding practices.	Corporate Director		Procedures for internal audit reviews on council safeguarding practices in place. Investigations on safeguarding procedures and terms of contracts have been held by the Internal Audit Unit. A work program has been developed for 2016/17 which includes a questionnaire for field workers and schools safeguarding inspection		Complete
7	Ensure the risks associated with safeguarding are considered at both a corporate and service level in developing and agreeing risk management plans across the council.	Corporate Director		Risks connected to safeguarding are identified at corporate and service level, and are identified on the risk register.		Complete

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15. Year 2014-15 – Annual Review and Evaluation of Performance of the Care and Social Services Inspectorate Wales (CSSIW) Published: 30 October 2015

Presented to the Services Scrutiny Committee on 26 November 2015.

Presented to the Cabinet on 15 December 2015.

An initial implementation plan was presented to the Services Scrutiny Committee on 28 January 2016 and a full implementation plan to the preparatory meeting of the Services Scrutiny Committee on 28 February 2016.

Ref	Areas for Improvement	Possible Relevant Comments CSSIW	Arrangements underway	Responsibility	Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
1.1	Improvements in the Protection of Vulnerable Adult (PoVA) practice	<p>6.6. Safeguarding is a priority for the council and it has implemented corporate arrangements to improve safeguarding practices. It now needs to implement changes in its adult protection processes</p> <p>6.7. During the year there were 178 Protection of Vulnerable Adult (POVA) referrals in the year, six fewer than the previous year. Of these referrals 100% were completed where the risk was managed. The council contributed to an adult practice review that identified improvements needed in the council's Protection of Vulnerable Adult (POVA) practice. When implemented, these will increase the involvement of care providers and provide greater clarity regarding the investigation and its outcome. Adult safeguarding will be an area for CSSIW to follow up in 2015-16.</p>	<p><i>Action Steps in accordance with improvement field 2.1.</i></p> <p>Furthermore, it is intended to review the Safeguarding operational arrangements as a result of changes to the staffing structure and the new statutory duty that comes into effect in April 2016. This work will be led by the Adults, Health and Well-being Management Team.</p>	Head of Adult, Health and Wellbeing Department	In progress
1.2	Modernising learning disabilities services	6.10 ...The council identified that it needs to modernise its learning disabilities services and developing a range of person centred services to increase independence. The council is adopting the progression person-centred development model for learning disability services that aims to better realise aspirations in achieving independence. This approach promotes the learning of new skills and helping people to safely do as much as they can for themselves. This is an area that CSSIW will follow up in the coming year. In 2014-15 the council has also been undertaking a review of adult services. The council stated that the review would be published in September 2015.	As noted in the report, the Inspectorate will take follow-up steps during this year. One of the main steps in question is the inspection held in January 2016. This inspection is part of a wider national work programme across Wales. Therefore, it is anticipated that clear and firm recommendations will be presented for this field, and that we will be aware of them in February / March 2016. The Service will take full advantage of the inspectors' opinion and will ensure that, if required, changes will be implemented as soon as possible.	Head of Adult, Health and Wellbeing Department	Being planned
1.3	Mental health commissioning strategy and services.	6.10 - The council has begun to develop a mental health commissioning strategy and mental health services will be an area for us to follow up in 2015-16....	<p>A Project Board has been established to address operational issues in order to ensure that the Council commissions quality services which meet the needs of individuals whilst being affordable and meeting the statutory responsibilities.</p> <p>Work of reviewing all the services commissioning</p>	Head of Adult, Health and Wellbeing Department	In progress

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Ref	Areas for Improvement	Possible Relevant Comments CSSIW	Arrangements underway	Responsibility	Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
			<p>processes in this field has started in order to ensure that services offer value for money and are cost-effective while meeting expected standards.</p> <p>Robust procurement processes have been agreed and are followed when commissioning all the mental health services in order to ensure value for money.</p> <p>Over the coming 12 months the project will also prioritise reviews looking specifically at:</p> <ul style="list-style-type: none"> • Support Workers • Residential and Nursing Care • Supported Accommodation <p>In order to ensure that new arrangements are in place which meet the statutory requirements.</p>		
2.1	Adult safeguarding	<p>6.6. Safeguarding is a priority for the council and it has implemented corporate arrangements to improve safeguarding practices. It now needs to implement changes in its adult protection processes</p> <p>6.7. During the year there were 178 Protection of Vulnerable Adult (POVA) referrals in the year, six fewer than the previous year. Of these referrals 100% were completed where the risk was managed. The council contributed to an adult practice review that identified improvements needed in the council's Protection of Vulnerable Adult (POVA) practice. When implemented, these will increase the involvement of care providers and provide greater clarity regarding the investigation and its outcome. Adult safeguarding will be an area for CSSIW to follow up in 2015-16.</p>	<p>As noted in the report, Safeguarding is one of the Council's priorities. In reviewing the Strategic Plan in July this year, three transformational projects were commissioned in the field. These projects were commissioned in response to some of the challenges from last year. Specifically in terms of the Adults field, the following project has been commissioned.</p> <p>D3 – Safeguarding vulnerable adults The purpose of the project is to aim to continually improve safeguarding arrangements and culture within the adults field.</p> <p>The progress of this project will be reported upon via the Council's performance management arrangements.</p> <p>Further to the original commission in the Strategic Plan, the Strategic Safeguarding Children and Vulnerable Adults Panel has asked the Leader of Project D3 to ensure that it includes any recommendations from Adult Practice Reviews (APRs).</p>	Head of Adult, Health and Wellbeing Department	In progress

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Ref	Areas for Improvement	Possible Relevant Comments CSSIW	Arrangements underway	Responsibility	Rate your progress as
					<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
2.2	Support for carers	6.14. The council assessed or reviewed the needs of 241 adult carers in 2014-15 which is a reduction from the 298 carers assessed the previous year. This is a concern as the number of carers of adults receiving an assessment of their own needs has risen over the past four years in Wales, whilst the number has fallen continually in Gwynedd. The number of carers of adults who were assessed or re-assessed in their own right during the year, who were provided with a service in the year, was 132 people.	<p>It is intended to conduct a review of arrangements to support unpaid carers in Gwynedd. Increasing pressure is likely to be placed on our unpaid carers here in Gwynedd in the future and specifically within the adults care field.</p> <p>By the end of March 2017, we will therefore have reviewed how effective our current arrangements are for supporting unpaid carers and, if required, we will have decided on the additional interventions needed to support carers in the future.</p> <p>It is intended to focus on the Adults field, we will consider the brief in more detail during the next few weeks and will decide what exactly should be included in terms of the Review.</p>	Head of Adult, Health and Wellbeing Department	Being planned
3.1	Timeliness of initial assessment	6.21. Performance in the timeliness of initial assessments has improved but remains below the average in Wales (70% compared to 76%) and it remains an area for improvement for the council.	This is no longer relevant as this indicator has disappeared with the introduction of the Social Services and Wellbeing Act. There is now a composite assessment which matches need and a total of 42 days to complete the assessment and create a care and support plan, but locally we are aiming to set local targets to complete simple assessments within 10 working days.	Head of Children and Supporting Families Department	Complete
3.2	Timeliness of child protection conferences	6.23. The number of children on the Child Protection Register at the end of the year was similar to the last three years after a rise in 2012-13. The council's performance in holding initial child protection conferences improved slightly but is below the average in Wales (85% compared to 93%). The council's performance in holding statutory reviews and review child protection conferences on time also dipped. The loss of the child protection co-ordinator and staff sickness contributed to the downturn in performance in these areas. The timeliness of child protection conferences remains an area for improvement. The council also needs to maintain and improve the timeliness of reviews of looked after children now managed by the safeguarding and quality unit.	<p>There has been an increase in the numbers of children included on the Gwynedd Child Protection and this follows a national pattern. This increases pressures on the service in terms of capacity to chair and hold conferences within the timescale noted in the national guidelines.</p> <p>The service is keeping a close eye on performance in this field and keeps detailed information about the reasons why conferences are not held within the timescale. As above, there is no specific, typical reason becoming apparent</p>	Head of Children and Supporting Families Department	In progress

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Ref	Areas for Improvement	Possible Relevant Comments CSSIW	Arrangements underway	Responsibility	Rate your progress as <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
			<p>rather it is a combination of reasons e.g. family not available to attend, no professional quorum (a statutory requirement for the decision-making process).</p> <p>Issues in terms of lack of quorum have been raised with specific agencies and in the Gwynedd and Anglesey Safeguarding Operational Group, and it is being addressed by the police specifically to try to improve the situation.</p> <p>The performance of statutory reviews of looked-after children has improved significantly over a period of years. The number of looked-after children in Gwynedd has increased during 15/16 – from 186 at the end of quarter 1 to 202 at the end of quarter 2. This is a significant increase and it places additional pressure on independent reviewing officers who chair all looked-after children reviews. Given that the national good practice recommendation for independent reviewing officers is that they hold approximately 50 cases each for review, the officers we have in place (2.6FTE) are working at above capacity level. Despite this, the performance of quarter 1 and 2 this year is encouraging as the performance in terms of timeliness is 89.4% at the end of quarter 1 and 91.3% at the end of quarter 2.</p>		
3.3	Timeliness of looked after children’s reviews	6.23. The number of children on the Child Protection Register at the end of the year was similar to the last three years after a rise in 2012-13. The council’s performance in holding initial child protection conferences improved slightly but is below the average in Wales (85% compared to 93%). The council’s performance in holding statutory reviews and review child protection conferences on time also dipped. The loss of the child protection co-ordinator and staff sickness contributed to the downturn in performance in these areas. The timeliness of child protection conferences remains an area for improvement. The council also needs to maintain and improve the timeliness of reviews of looked after children now managed by the safeguarding and quality unit.	As noted above in 3.2, holding child protection review conferences within the timescale is currently a challenge for the reasons noted above. The performance of quarters 1 and 2 has been challenging – 71% at the end of quarter 1 and 77% at the end of quarter 2. The indicator which measures the attendance at child protection case conferences shows that social workers are present at 100% of them, but that there is a challenge to ensure quorum from partner agencies at each review conference. When there is no quorum, the chair has to decide to either continue with the conference or postpone until such time as the required representation is present in order to make	Head of Children and Supporting Families Department	In progress

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Ref	Areas for Improvement	Possible Relevant Comments CSSIW	Arrangements underway	Responsibility	Rate your progress as
			a decision. These matters are being addressed specifically with those agencies on an operational and strategic level.		<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
3.4	Timeliness of health assessments for looked after children.	6.31. The health board has only made a small improvement to the percentage of looked after children who receive a health assessment in the year and this remained significantly behind the Wales average (51% compared to 81%).	The service has been collaborating with the Betsi Cadwaladr University Health Board for a number of years to try to resolve the problems in terms of holding health assessments for looked-after children in a timely manner. The Corporate Parent Panel has been holding the Health Board to account in order to challenge practice and ensure that improvements to the procedure are carried out. Despite this, progress has been extremely disappointing, but during this year we have seen an improvement in the performance against this indicator as the results of quarter 1 show that 60.7% were held within time and 63.4% at the end of quarter 2. This is encouraging and has reached the target set locally (60%). It remains lower than the Welsh average, but we are of the view that we have resolved the biggest problems in terms of arrangements and processes in order to see continued progress.	Head of Children and Supporting Families Department	In progress
4.1	Implementation of modernisation programmes	7.8. Corporate attention has been given to supporting the modernisation of social services and responding to the Act. The two significant reviews of operational arrangement in children's and adults service have been supported by corporate services. The new departmental structure has allowed for closer alignment of children's social services and preventative services.	<p>The transformational projects which have been commissioned via the Strategic Plan are supported and scrutinised via the Council's Delivery Panels arrangements, in which the project leader reports on the progress of projects against the milestones agreed. Following this, the relevant Cabinet Member reports on the performance of the transformational project to the Cabinet in a 12-weekly cycle. The transformational projects which have been commissioned address the changes in practice and responsibility – within the expectations of the act.</p> <p>In addition to this, programme management arrangements are in place in the Adults field in order to ensure that clear arrangements and accountability are in place in order to lead a significant change in the field.</p>	Head of Adult, Health and Wellbeing Department / Head of Children and Supporting Families Department	Complete

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Ref	Areas for Improvement	Possible Relevant Comments CSSIW	Arrangements underway	Responsibility	Rate your progress as
			The corporate support will continue in order to implement modernisation programmes in the care field.		<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
4.2	Scrutiny and oversight of implementation of modernisation programmes	1.5. The planned changes in social services will require changes in established practice and culture. The nature and scale of the changes faced by social services present significant risks that require a high level of leadership and support to be delivered in a timely manner. The new arrangements with a cabinet member for adults and health and a cabinet member for children and young people should provide a clearer line of sight on the new service developments, and engagement with the health board.	<p>As noted in the report, the support of two Cabinet Members in this field will be crucial in order to ensure the success of the modernisation programmes. The two members are of course accountable for the change taking place within their fields, but also, as part of the Council's performance management arrangements, provide continued scrutiny and support where necessary. This is undertaken formally via the Delivery Panels and the Strategic Safeguarding Panel. In addition, the Services Scrutiny Committee scrutinises the main transformational programmes in the field – such as G2 – Integrated working, focusing on what matters for individuals.</p> <p>As part of the culture shift that is underway in the Council, of ensuring that we place the people of Gwynedd at the centre of everything we do, we are aiming to have an organisation which continually scrutinises our decisions.</p>	Corporate Director	In progress

16.October 2015 – Supporting the Independence of Older People: Are Councils Doing Enough

Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Rate your progress as:
					<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Rate your progress as: <ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
1	Improve governance, accountability and corporate leadership on older people's issues	Housing Senior Manager	<ul style="list-style-type: none"> • the appointment of a senior lead officer who is accountable for coordinating and leading the council's work on older people's services; • realigning the work of the older people's strategy coordinators to support development and delivery of plans for services that contribute to the independence of older people; • the appointment of a member champion for older people's services; and • regularly disseminating and updating information on these appointments to all staff and stakeholders. 	<p>Head of Adult Health and Welfare is responsible for leading the work of the council on services for older people.</p> <p>A Wellbeing Manager has been appointed and is responsible for ensuring that Gwynedd Council's Age Well action plan is implemented. Specific work program to be set within the next few months.</p> <p>Older People's Champion has been identified, and represents the interests of older people in Gwynedd.</p>	In progress
2	Improve strategic planning and better coordinate activity for services to older people	Housing Senior Manager	<ul style="list-style-type: none"> • ensuring comprehensive action plans are in place that cover the work of all relevant council departments and the work of external stakeholders outside of health and social care; and • engaging with residents and partners in the development of plans, and in developing and agreeing priorities. 	<p>Draft Ageing Well Action Plan has been created but not approved. Discussions to be held with the Corporate Management Team on what to prioritize and how to proceed.</p> <p>Age Cymru Gwynedd and Anglesey have engaged with older people to know what their priorities are.</p>	In progress
3	Improve engagement with, and dissemination of, information to older people by ensuring advice and information services are appropriately configured and meet the needs of the recipients.	Housing Senior Manager		Work program to be developed under Care Challenge to raise community awareness of what is required by the new law and how they can play a role in promoting the independence of older people and joint commissioning of services for them.	In progress
4	Ensure effective management of performance for the range of services that support older people to live independently:	Housing Senior Manager	<ul style="list-style-type: none"> • setting appropriate measures to enable members, officers and the public to judge progress in delivering actions for all council services; • ensuring performance information covers the work of all relevant agencies and especially those outside of health and social services; and • establishing measures to judge inputs, 	Measures have been identified within the Ageing Well Action Plan, but discussions to be taken as to their appropriateness and monitoring mechanism. The majority of outputs are based on the national framework for the Social Services Wellbeing Act.	Being planned

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Rate your progress as:
			outputs and impact to be able to understand the effect of budget cuts and support oversight and scrutiny.		<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
5	Ensure compliance with the Public Sector Equality Duty when undertaking equality impact assessments	Housing Senior Manager	<ul style="list-style-type: none"> • setting out how changes to services or cuts in budgets will affect groups with protected characteristics; • quantifying the potential impact and the mitigation actions that will be delivered to reduce the potentially negative effect on groups with protected characteristics; • indicating the potential numbers who would be affected by the proposed changes or new policy by identifying the impact on those with protected characteristics; and • ensuring supporting activity such as surveys, focus groups and information campaigns includes sufficient information to enable service users to clearly understand the impact of proposed changes on them. 	<p>The conducting of Equality Impact Assessments on proposed cuts by the council's Gwynedd Challenge has been completed.</p> <p>Corporate arrangements are in place to support corporate conducting Equality Impact Assessments. In addition, a project within Gwynedd Council's 2016-20 Corporate Equality Strategy is specifically to improve our equality impact assessment arrangements.</p>	In progress
6	Improve the management and impact of the Intermediate Care Fund	Housing Senior Manager	<ul style="list-style-type: none"> • setting a performance baseline at the start of projects to be able to judge the impact of these overtime; • agreeing the format and coverage of monitoring reports to enable funded projects to be evaluated on a like-for-like basis against the criteria for the fund, to judge which are having the greatest positive impact and how many schemes have been mainstreamed into core funding; and • improving engagement with the full range of partners to ensure as wide a range of partners are encouraged to participate in future initiatives and programmes. 	<p>Robust project management arrangements are set against Intermediate Care Fund projects. A template has been designed and agreed for reporting progress on projects that notes planned and actual spending, milestones, outputs and outcomes against individual projects funded through the Intermediate Care Fund.</p> <p>This is done while including a range of relevant partners.</p>	Complete

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17.December 2015 – Delivering with Less – Leisure Services

Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Rate your progress as: • Not started • Being planned • In progress • Complete
1	Improve strategic planning in leisure services by:	Ian Jones, Economy and Community Senior Manager	<ul style="list-style-type: none"> • setting an agreed council vision for leisure services; • agreeing priorities for leisure services; • focussing on the council’s position within the wider community sport and leisure provision within the area; and • considering the potential to deliver services on a regional basis. 	<p>The Service has started developing the Ffordd Gwynedd business model agreeing on a purpose and implementation measures. That work takes into account the needs national and regional needs in addition to the needs of Gwynedd residents.</p> <p>Regarding Sport, Gwynedd Council takes a lead role in developing an alternative model for regional planning and commissioning activities. The business case is forecast to be in place by September, 2016 with a new organization in place by April, 2017.</p>	Being planned
2	Undertake an options appraisal to identify the most appropriate delivery model based on the council’s agreed vision and priorities for leisure services	Ian Jones, Economy and Community Senior Manager	<p>The appraisal should consider:</p> <ul style="list-style-type: none"> • the availability of capital and revenue financing in the next three-to-five years; • options to improve the commercial focus of leisure services; • opportunities to improve income generation and reduce council ‘subsidy’; • a cost-benefit analysis of all the options available to deliver leisure services in the future; • the contribution of leisure services to the council’s wider public health role; • better engagement with the public to ensure the views and needs of users and potential users are clearly identified; • the impact of different options on groups with protected characteristics under the public sector equality duty; and • the sustainability of service provision in the future 	<p>In terms of leisure centers, a Project Board has been established, that will be chaired by a Cabinet member, to review the role of the leisure service to the future. A work program is in place in response to all these points, but adapting the service to achieve savings is the goal, taking account of the national direction, including this report.</p> <p>Through the efficiency savings program, the Service has managed to identify £ 700k of savings in the last two years. In addition, commercial principles are being developed with the aim of further reducing the subsidy over time. This has led the Service to target potential users and to invest in the right places in order to get the best effect.</p> <p>Developing a Ffordd Gwynedd business model ensures better engagement with consumers and that the impact of different interventions are measured accurately.</p> <p>In terms of contribution to public health, the Service is taking a leading role in providing preventive services. A recent example of this is the success of the 'DementiaGo' scheme offering services to users suffering from Dementia.</p>	In progress
3	Ensure effective management of performance of leisure	Ian Jones, Economy and	This should cover council-wide and facility specific performance and	The Service has already developed a robust performance measurement framework for five specific purposes and that it is in place. In terms of	Completed

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Ref	Recommendations for Improvement	Responsibility	Implementation Plan	Progress	Rate your progress as:
	services by establishing a suite of measures to allow officers, members and citizens to judge inputs, outputs and impact.	Community Senior Manager	include: <ul style="list-style-type: none"> • capital and revenue expenditure; • income; • council 'subsidy'; • quality of facilities and the service provided; • customer satisfaction; • success of 'new commercial' initiatives; • usage data – numbers using services/facilities, time of usage, etc; and • impact of leisure in addressing public health priorities. 	leisure facilities, the framework measures: <ul style="list-style-type: none"> • Revenue expenditure. • Income. • Customer satisfaction. • The success of marketing interventions and capital investments. • Information usage down to individual consumers postcode to identify 'trends'. • Benchmarking knowledge in order to measure leisure centers' attainment against each other and also against out of county centers. • Rate of retention of users to learn what could be done differently or better. <p>Up to the end of 2016/2017, the Service will contribute to Public Health Wales priorities in the areas of obesity and smoking cessation within the Healthy Living Unit. This will come to an end at the end of the year as a result of Gwynedd Challenge decisions.</p>	<ul style="list-style-type: none"> • Not started • Being planned • In progress • Complete
4	Improve governance, accountability and corporate leadership on leisure services	Sioned Williams, Head of Economy and Community Department	<ul style="list-style-type: none"> • regularly reporting performance to scrutiny committee(s); • providing elected members with comprehensive information to facilitate robust decision-making; • benchmarking and comparing performance with others; and • using the findings of internal and external audit/inspection reviews to identify opportunities to improve services. 	<p>The Service reports on performance and achievement on a regular basis to the Cabinet Member and thereby to the Cabinet. There are also sound governance within the Department and the Management Team that ensures corporate accountability and leadership in place.</p> <p>Any reports relating to the development of alternative models are directed to the appropriate Scrutiny Committee</p> <p>In terms of audit reports / internal reviews, aspects of the service are under constant review and any recommendations are acted upon. In addition appropriate reports are referred to the Audit Improvement Sub Group of the Audit Committee for further discussion if required</p>	Complete

Agenda Item 8

MEETING: **AUDIT COMMITTEE**

DATE: **23 JUNE 2016**

TITLE: **FINAL ACCOUNTS 2015/16 - REVENUE OUTTURN**

PURPOSE: **TO EXPLAIN AND SCRUTINISE THE FINAL FINANCIAL POSITION FOR 2015/16**

ACTION: **Receive the information, consider any risks arising from the actual expenditure and income against the 2015/16 budget, and scrutinise the Cabinet's decisions regarding managing the budgets of the Council and its Departments.**

CONTACT OFFICER: **DAFYDD L EDWARDS, HEAD OF FINANCE**

CABINET MEMBER: **COUNCILLOR PEREDUR JENKINS**

1. The third quarter budget review report was submitted to the Audit Committee on 11 February 2016, and appropriate consideration was given to several matters.
2. The report submitted today, namely the "outturn" budget review, explains the final position for 2015/16 and shows each department's position. These figures form the basis for the statutory statements to be submitted to the Audit Committee meeting on 14 July.
3. The Audit Committee's Chairman has asked us to present the attached Cabinet report to the Audit Committee, to be scrutinised together with the relevant decisions of the Cabinet meeting of 7 June which are on the following pages.
4. I note that part 5 and Appendix 3 of this report also deals with the review of the Council's reserves and provisions (which was a separate item on closing the 2014/15 accounts).
5. The Audit Committee is requested to note the position and the relevant risks regarding the budgets of the Council and its departments, consider the Cabinet's draft decisions and comment as necessary.

**TAFLEN BENDERFYNIAD CABINET
CYNGOR GWYNEDD
CABINET DECISION NOTICE**

Dyddiad/Date: 07/06/2016

PWNC / SUBJECT

Eitem : Cyfrifon Terfynol 2015/16 – Alldro Refeniw

Item : *Final Accounts 2015/16 – Revenue Outturn*

PENDERFYNIAD / DECISION

1. Derbyn a nodi sefyllfa ariannol derfynol adrannau'r Cyngor am 2015/16, a chymeradwyo'r sefyllfa er mwyn galluogi'r Adran Cyllid i symud ymlaen i gynhyrchu, ardystio a chyhoeddi'r datganiadau ariannol statudol erbyn 30 Mehefin ac i'w cyflwyno i'w craffu gan y Pwyllgor Archwilio ar 14 Gorffennaf.
2. Cymeradwyo'r symiau i'w cario 'mlaen (y golofn "Gor/(Tan) Wariant Addasedig" o'r talfyriad yn Atodiad 1), sef –

ADRAN	£'000
Oedolion, Iechyd a Llesiant	(6)
Plant a Theuluoedd	(8)
Addysg	(48)
Economi a Chymuned	5
Priffyrdd a Bwrdeistrefol	(6)
Rheoleiddio	(90)
Ymgynghoriaeth Gwynedd	34
Tîm Rheoli Corfforaethol & Chyfreithiol	(20)
Cyllid	(70)
Cefnogaeth Gorfforaethol	(95)
Cyllidebau Corfforaethol	0

3. Cymeradwyo'r argymhellion a'r trosglwyddiadau ariannol canlynol (amlinellwyd yn Atodiad 2 i'r adroddiad) –

- Yn unol â chais y Pennaeth Adran Oedolion, trosglwyddo cyllidebau o fewn yr Adran Oedolion Iechyd a Llesiant fel y rhestrir yn Atodiad 2, tudalen 18 (effaith net o "£0").

- Neilltuo £150k o'r sefyllfa tanwariant gros yr Adran Rheoleiddio am 2015/16 mewn cronfa ar gyfer datblygu trefn archwilio ac asesu cyflwr pontydd, cwlferi a rhai waliau cynnal.

- Trosglwyddo £150k o'r sefyllfa tanwariant ar Gyllidebau Corfforaethol am 2015/16 i'r gronfa wrth gefn perthnasol i'r Bartneriaeth Gwastraff Gweddilliol Gogledd Cymru ar gyfer gofynion 2016/17, gyda'r gweddill sydd ei hangen ar gyfer 2017/18 i'w

adnabod wrth ystyried y strategaeth ariannol am y flwyddyn honno.

- Trosglwyddo £769k o danwariant ar Gyllidebau Corfforaethol am 2015/16 i gronfa tuag at ariannu strategaeth ariannol 2016/17.

- Defnyddio £292k o danwariant Cyllidebau Corfforaethol am 2015/16 tuag at ariannu strategaeth ariannol 2015/16.

4. Cymeradwyo'r trosglwyddiadau ariannol o gronfeydd penodol fel yr amlinellir yn Atodiad 3 (ynghyd â'r darpariaethau a ryddhawyd yn dilyn adolygiad).

5. Nodi fod hyn am wneud defnydd o (£833k) o falansau'r Cyngor, yn hytrach na'r (£2.019m) gwreiddiol er mwyn cwblhau'r pecyn i ariannu strategaeth ariannol 2015/16.

1. To accept and note the Council departments' final financial situation for 2015/16 and approve the position in order to enable the Finance Department to move forward and produce, endorse and publish the statutory financial statements by 30 June and to be submitted to be scrutinised by the Audit Committee on 14 July.

2. To approve the amounts to be carried forward (the "Revised Over/ (Under) Spend" column of the summary in Appendix 1), namely -

DEPARTMENT	£'000
<i>Adults, Health and Well-being</i>	<i>(6)</i>
<i>Children and Families</i>	<i>(8)</i>
<i>Education</i>	<i>(48)</i>
<i>Economy and Community</i>	<i>5</i>
<i>Highways and Municipal</i>	<i>(6)</i>
<i>Regulatory</i>	<i>(90)</i>
<i>Gwynedd Consultancy</i>	<i>34</i>
<i>Corporate Management Team & Legal</i>	<i>(20)</i>
<i>Finance</i>	<i>(70)</i>
<i>Corporate Support</i>	<i>(95)</i>
<i>Corporate Budgets</i>	<i>0</i>

3. To approve the following recommendations and financial transfers (as outlined in Appendix 2 of the report) -

- *In accordance with the request of the Head of Adults Department, transfer budgets within the Adults, Health and Well-being Department as listed in Appendix 2, page 18 (net effect of "£0").*

- *Allocate £150k of the gross underspend position of the Regulatory Department for 2015/16 to a fund to develop an arrangement for the inspection and assessment of the condition of bridges, culverts and some retaining walls.*

- *Transfer £150k of the Corporate Budgets underspend for 2015/16 to the North Wales Residual Waste Partnership reserve fund for the 2016/17 requirements, with the remainder required in 2017/18 being recognised whilst considering the financial*

strategy for that year.

- *Transfer £769k of the Corporate Budgets underspend for 2015/16 towards financing the 2016/17 financial strategy.*
 - *Use £292k of the Corporate Budgets underspend for 2015/16 towards the 2015/16 financial strategy.*
- 4. To approve the virements from the specific reserves as outlined in Appendix 3 (together with provisions released following the review).*
- 5. To note that this will make use of (£833k) of the Council's balances, rather than the original (£2.019m) in order to complete the package to finance the 2015/16 financial strategy.*

RHESYMAU DROS Y PENDERFYNIAD / REASON FOR THE DECISION

Adroddodd yr Aelod Cabinet Adnoddau fod sefyllfa ariannol derfynol adrannau'r Cyngor am 2015/16 yn cadarnhau y bu rheolaeth ariannol effeithiol gan yr Aelodau Cabinet perthnasol, penaethiaid adrannau a rheolwyr cyllidebau, er gwaethaf y gofynion parhaus i gyflawni arbedion heriol. Erbyn yr adroddiad hwn, mae ein sefyllfa'n well na'r rhagolygon a gyflwynwyd yn yr ail a trydydd chwarter o 2015/16.

Cadarnhaodd yr Aelod Cabinet Adnoddau y bu cyllidebau'r rhan fwyaf o adrannau o dan reolaeth gadarn eto eleni. Yn Atodiad 1 o'r adroddiad i'r cyfarfod, cafwyd talfyriad o sefyllfa derfynol yr holl adrannau gyda'r symiau i'w cario ymlaen yn y golofn "Gor/(Tan) Wariant Addasedig". Yn Atodiad 2 yr adroddiad o'r cyfarfod, nodwyd manylion pellach ynglŷn â'r prif faterion a meysydd ble fu gwahaniaethau sylweddol i'r hyn a adroddwyd yn flaenorol, ynghyd â sawl argymhelliad penodol.

Nodwyd fod sefyllfa ariannol y mwyafrif o'r adrannau yn lled niwtral, ac wedi'i ragamcanu'n gywir yn ystod 2015/16. Ond, dylid cymeradwyo'r gwelliant sylweddol yn sefyllfa ariannol yr Adran Oedolion yn ystod ail hanner y flwyddyn, wrth iddynt arddangos rheolaeth gadarn dros eu cyllidebau. Bu lleihad yn incwm masnachol Ymgynghoriaeth Gwynedd ac mae'r Adran Rheoleiddio yn cyfrannu cyfran sylweddol o'u tanwariant gros i ariannu blaenoriaeth gorfforaethol. Yn gyffredinol, lle mae'r adrannau wedi tanwario, mae'r sefyllfa hwnnw am un tro yn 2015/16 yn unig.

Cadarnhawyd fod yr Adran Addysg drefniadau ar gyfer herio'r ysgolion unigol i gyfiawnhau'r angen am eu balansau, ac maent yn gofyn i'r penaethiaid a chyrrff llywodraethu'r ysgolion perthnasol i egluro'u bwriad i ddefnyddio eu balansau (yn arbennig rheiny sydd gyda balansau dros 5% o'i gyllideb). Croesawir y lleihad yng nghyfanswm sirol o falansau'r ysgolion o £3.5m i £3.3m yn 2015/16, ond nodwyd pryder bod cynifer o ysgolion yn parhau i'w chael yn anodd gweithio o fewn eu cyllideb.

Bu tanwariant un-tro sylweddol ar nifer o benawdau cyllideb gorfforaethol eleni, fel amlinellir yn rhan olaf Atodiad 2 yr adroddiad i'r cyfarfod. Mae'r tanwariant net £292k yma, ynghyd â £894k neilltuwyd yn yr adolygiadau ail a trydydd chwarter, ar gael i gyfrannu tuag at ariannu blaenoriaethau corfforaethol un-tro.

Wrth ddefnyddio'r tanwariant fel argymhellir yn rhan 3 o'r penderfyniad uchod, trwy reolaeth effeithiol o'i gyllidebau, bydd y Cyngor wedi llwyddo i leihau'r defnydd arfaethedig o'i falansau, a bydd balansau cyffredinol y Cyngor wedi gostwng dim ond £833k o £6.4m i £5.6m ar 31/03/2016.

The Cabinet Member for Resources reported that the final financial position of the Council departments for 2015/16 confirmed that there was effective financial management by the relevant Cabinet Members, department heads and budget managers, despite the continued requirements to deliver challenging savings. By this report, our position is better than the projections submitted in the second and third quarters of 2015/16.

The Cabinet Member for Resources confirmed that the budgets of most of the departments have been under firm control this year again. In Appendix 1 of the report to the meeting, a summary was given of the final position of all departments with the amounts to be carried forward in the "Revised Over/ (Under) Spend" column. In Appendix 2 of the report to the meeting, further details were provided relating to the main issues and the fields where there were significant variances to what was reported previously, along with several specific recommendations.

It was noted that the financial position of the majority of these departments was more or less neutral, and had been projected correctly during 2015/16. However, the significant improvement in the financial position of the Adults Department during the second half of the year should be applauded, as they showed firm control over their budgets. There has been a reduction in the commercial income of Gwynedd Consultancy and the Regulatory Department is contributing a substantial proportion of their gross underspend to fund a corporate priority. Generally, where departments have underspent, that position would be for one time in 2015/16 only.

It was confirmed that the Education Department has arrangements to challenge individual schools to justify the need for their balances, and they are asking school heads and the relevant schools' governing bodies to explain their intention to use their balances (particularly those with balances exceeding 5% of their budget). The reduction in the county total of school balances from £3.5m to £3.3m in 2015/16 was welcomed, but concern was noted that so many schools continued to have difficulty working within their budgets.

There have been significant one-off underspend on several corporate budgets headings this year, as outlined in the last part of Appendix 2 of the report to the meeting. This £292k net underspend, together with £894k allocated in the second and third quarter reviews, are available to contribute towards financing one-off corporate priorities.

If the underspend is applied as recommended in paragraph 3 of the decision above, through effective control of its budgets, the Council will have managed to reduce the proposed use of its balances, and the Council's general balances will have reduced by only £833k from £6.4m to £5.6m on 31/03/2016.

SYLWADAU NEU BWYNTIAU CROES / OBSERVATIONS OR OPPOSING VIEWS

Derbyniwyd yr adroddiad a gyflwynwyd gan yr Aelod Cabinet Adnoddau.

The report submitted by the Cabinet Member for Resources was accepted.

BARN Y SWYDDOGION STATUDOL / THE VIEWS OF THE STATUTORY OFFICERS

1. Y Prif Weithredwr / Chief Executive:-

Mae'r adroddiad yn cynnig darlun cyffredinol o reolaeth ariannol gadarn ar adeg pan mae adnoddau wedi crebachu ac yn parhau i wneud hefyd, mae'n werth nodi, bod adrannau wedi bod yn gorfod paratoi ar gyfer arbedion a thoriadau i ddod.

Ar yr un pryd, mae'r Cyngor wedi bod yn cynnal ei berfformiad yn arbennig o dda dros yr un cyfnod ac mae hyn yn bwynt sydd werth ei nodi er mwyn talu teyrnged i'r staff a rheolwyr sydd wedi llwyddo i wneud hyn a rheoli gwariant yn effeithiol mewn cyd-destun ariannol heriol iawn.

The report provides an overview of sound financial management at a time when resources have shrunk and will continue to do so, it is worth noting, that departments have been required to prepare for savings and cuts to come.

At the same time, the Council has been maintaining its performance over the same period, and this is a point worth noting in order to pay tribute to the staff and managers who have managed to do this and manage expenditure effectively in a very challenging financial context.

2. Swyddog Monitro / Monitoring Officer:-

Dim i'w ychwanegu o ran priodoldeb.

Nothing to add from a propriety perspective.

3. Prif Swyddog Cyllid / Chief Finance Officer:-

Rwyf wedi cydweithio gyda'r Aelod Cabinet i baratoi'r adroddiad a gyflwynwyd i'r cyfarfod ac yn cadarnhau cywirdeb y cynnwys.

I have collaborated with the Cabinet Member in the preparation of this report and I confirm the accuracy of the content.

BARN YR AELOD LLEOL / VIEWS OF THE LOCAL MEMBER

Nid yw'n fater lleol.

Not a local matter.

REPORT TO THE CABINET

7 JUNE 2016

Cabinet Member: COUNCILLOR PEREDUR JENKINS, CABINET MEMBER - RESOURCES

Subject: FINAL ACCOUNTS 2015/16 - REVENUE OUTTURN

Contact Officer: DAFYDD L EDWARDS, HEAD OF FINANCE

1. The decision sought / purpose of the report

1.1 To consider and note the final financial position of the Council's departments for 2015/16.

1.2 **To approve the amounts to be carried forward** (the "Revised Over/(Under) Spend" column of the summary in **Appendix 1**), namely -

DEPARTMENT	£'000
Adults, Health and Wellbeing	(6)
Children and Families	(8)
Education	(48)
Economy and Community	5
Highways and Municipal	(6)
Regulatory	(90)
Gwynedd Consultancy	34
Corporate Management Team & Legal	(20)
Finance	(70)
Corporate Support	(95)
Corporate Budgets	0

1.3 To approve the following recommendations and financial transfers (as outlined in **Appendix 2**) –

- In accordance with the request of the Head of Adult Department it is recommended to approve the budget transfers within the Adult, Health and Wellbeing Department as listed in Appendix 2 (net effect of "£ 0").
- Recommend to use £150k of the gross underspend of the Regulatory Department in 2015/16 to develop an arrangement for the inspection and assessment of the condition of our bridges, culverts and some retaining walls.
- Recommend that £150k of the Corporate Budget underspend for 2015/16 is transferred to the North Wales Residual Waste Partnership reserve fund for the 2016/17 requirements, with the remainder required in 2017/18 being recognised whilst considering the financial strategy for that year.

- Recommend that £769k of the Corporate Budgets underspend for 2015/16 should be transferred to a reserve to finance the 2016/17 financial strategy.
- Recommend that £292k of the Corporate Budgets underspend for 2015/16 should be used towards the 2015/16 financial strategy.

1.4 To approve the virements from the specific reserves as outlined in Appendix 3 (together with provisions released following the review).

1.5 Resulting in using (£833k) of Council balances, rather than the original (£2.019m) in order to complete the package to finance the 2015/16 financial strategy.

2. Introduction / Background

2.1 Despite the sustained need to achieve challenging savings, **the final financial position of the Council's departments for 2015/16 confirms that there was effective financial management by the relevant Cabinet Members, department heads and budget managers.** Of course, that is supported by our accountants' professional monitoring work, together with constructive challenge as required by the Cabinet, the Audit Committee, and the Corporate Management Team.

2.2 Therefore, **the Cabinet is requested to approve the final financial position for 2015/16 to enable the Finance Department to move forward to produce, certify and publish the statutory financial statements by 30 June,** then present these for Audit Committee scrutiny on 14 July 2016.

3. Council Departments

3.1 **Generally, I can confirm that most departments' budgets have been robustly controlled again this year.** A summary of the final position for every department is outlined in Appendix 1, with the sums to be carried forward (dependent on the Cabinet's approval) in the "Revised Over/(Under) Spend" column. Further details relating to the major issues and areas where significant variances from those previously reported are noted in Appendix 2, together with several specific recommendations. Those recommendations are highlighted for consideration above in 1.3.

3.2 Most departments' financial position was broadly neutral, and accurately projected during 2015/16, but there was significant improvement in the financial position of the **Adults' Department** during the second half of the year, while there was a reduction in **Gwynedd Consultancy's** commercial income. Also, the **Regulatory Department** are contributing a significant portion of their gross underspend to finance a corporate priority.

3.3 In Appendix 1, the underspend / overspend position of each department is reported to the Cabinet, who will approve the sums to be carried forward.

Financial Procedure Rule 16.3.1 specifies the arrangements for sums to be “carried forward” at the year-end. This year, there are no requests for the Cabinet to write off any department's deficit, and after virements to reserves, there are no underspends exceeding the £100,000 threshold on closure of the 2015/16 accounts.

3.4 Generally, where departments have underspent, those are one-off positions in 2015/16 only.

3.5 In the majority of budgets where there was an over/under-spend in 2015/16, appropriate consideration has been given to the related requirements and opportunities in the 2016/17 budgetary cycle, and most of those issues have already been addressed in the financial strategy for 2016/17 (by management action to halt trends, and/or by amending the budget).

4. Schools

4.1 A section of Appendix 2 elaborates on the position of the schools budgets, where statute has conferred delegated powers for governing bodies to carry balances forward at the end of the financial year. The county total of schools' balances has reduced from £3.5m to £3.3m in 2015/16. We will be publishing detailed annual information regarding individual schools' balances before long in a 'Section 52 Statement'.

4.2 The Education Department has arrangements to challenge individual schools to justify the need for their balances, and they ask school heads and the relevant schools' governing bodies to explain their intention to use their balances (particularly those with balances exceeding 5% of their budget).

4.3 The total schools financial deficit has increased from £327,873 (9 Primary, 5 Secondary, 1 Special) on the 31 March 2015 to £447,692 (11 Primary, 4 Secondary, 1 Special) on the 31 March 2016. I confirm that the relevant Finance Unit will also ensure the heads and governing bodies of the schools which have financial deficits that this needs to be dealt with.

5. Corporate Budgets and Reserves

5.1 There were significant one-off underspends on several corporate budget headings this year, as outlined in the final section of Appendix 2. This net underspend of £292k, together with £894k set aside in the second and third quarter review, is available to contribute towards financing one-off corporate priorities.

- 5.2 Members will recall, for the 2015/16 Financial Strategy £2.019m of balances had been committed. Also, for 2016/17 £2.164m had been planned for identification through the review of reserves and so on, and a further £616k is needed to fund one-off "bids" in 2016/17 (totalling nearly £4.8m).
- 5.3 Adequacy of all the Council's specific reserves and provisions was thoroughly reviewed again by the Head of Finance on closure of this year's accounts, in accordance with the policy approved this time last year. This review succeeded in harvesting £2.011m of resources (£871k from specific reserves and £1,140k from provisions), as outlined in Appendix 3.
- 5.4 With the Cabinet's support, if the underspend is applied as recommended in paragraph 1.3 above, through effective control over its budgets, the Council will have succeeded in reducing the planned use of balances, and the Council's general balances will reduce by only £833k from £6.4m to £5.6m as at 31/03/2016.

6. Next steps and timetable

- 6.1 In accordance with The Accounts and Audit (Wales) Regulations 2014, and the CIPFA Code of accounting practice, the Chief Finance Officer has to certify the statutory financial statements for 2015/16 by 30 June. Whilst appreciating that this is a challenging timetable, I would like to thank everyone who has contributed in this process.
- 6.2 The purpose of this report is to detail the outturn position relating to underspends and overspends within individual Departments and the Council's expenditure as a whole for 2015/16, and to consider the information in this report, in order to reflect that position in the final accounts.
- 6.3 The position reflected here is based on the latest information, and in bringing the accounts closure process to a conclusion, there could be some further changes. However, no significant change in the general position is anticipated.
- 6.4 The Finance Department will produce the 2015/16 statutory financial statements for certification by the Head of Finance by 30 June and submission for scrutiny by the Audit Committee on 14 July.

Local member's views

Not relevant

Opinion of the Statutory Officers**Chief Executive:**

The report provides an overview of sound financial management at a time when resources have shrunk and will continue to do so, it is worth noting, that departments have been required to prepare for savings and cuts to come.

At the same time, the Council has been maintaining its performance over the same period, and this is a point worth noting in order to pay tribute to the staff and managers who have managed to do this and manage expenditure effectively in a very challenging financial context

Monitoring Officer:

Nothing to add from a propriety perspective.

Head of Finance:

I have collaborated with the Cabinet Member in the preparation of this report and I confirm the accuracy of the content.

Appendices

Appendix 1 - the final underspend / overspend position of each department

Appendix 2 - budgetary issues and areas where significant variances occurred

Appendix 3 - resources harvested from reviewing reserves and provisions

Revenue Budget 2015/16 - Summary of position by Department

	Final Review				Third Quarter Review
	2015/16 Budget	Gross Overspend / (Underspend) 2015/16	Movements to/from Reserves	Revised Overspend/ (Underspend)	
	£'000	£ '000	£ '000	£ '000	
Adults, Health and Wellbeing	44,413	(6)		(6)	338
Children and Families	13,171	(8)		(8)	151
Education	81,864	(48)		(48)	(4)
Economy and Community	7,559	5		5	25
Highways and Municipal	21,558	(6)		(6)	1
Regulatory (Planning, Transportation and Public Protection)	6,754	(240)	150	(90)	(122)
Gwynedd Consultancy	(39)	34		34	(137)
Corporate Management Team and Legal	2,025	(20)		(20)	(30)
Finance	5,604	(70)		(70)	(69)
Corporate Support	7,286	(95)		(95)	(96)
Corporate Budgets (Variances only)		(1,211)	1,211	0	(3)
Total Variances (net)	190,195	(1,665)	1,361	(304)	54

REVENUE BUDGET 2015/16 - FINAL						
Adults, Health and Wellbeing Department Summary Position	Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
Area:-	£'000	£'000	£'000	£'000	£'000	£'000
<u>Adult Services</u>						
Older People's Service						
Residential and Nursing - Homes	10,199	9,622	(577)	0	(577)	(365)
Home Care	6,006	6,068	62	0	62	79
Other	2,017	1,869	(148)	0	(148)	(160)
	18,222	17,559	(663)	0	(663)	(446)
Physical Disability Services						
Residential and Nursing	462	480	18	0	18	21
Home Care	985	990	5	0	5	19
Other	651	655	4	0	4	17
	2,098	2,125	27	0	27	57
Learning Disability Services						
	13,430	13,403	(27)	0	(27)	(104)
Mental Health Services						
Residential and Nursing	1,292	1,444	152	0	152	148
Other	1,991	1,872	(119)	0	(119)	(53)
	3,283	3,316	33	0	33	95
Other Services (Adults)						
Management	240	209	(31)	0	(31)	(21)
Older People and Physical Disability Team	2,469	2,368	(101)	0	(101)	(67)
	2,709	2,577	(132)	0	(132)	(88)
<u>Adult Services Total</u>	39,742	38,980	(762)	0	(762)	(486)

REVENUE BUDGET 2015/16 - FINAL						
Adults, Health and Wellbeing Department Summary Position	Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
Area:-	£'000	£'000	£'000	£'000	£'000	£'000
<u>Provider Services (net position shown)</u>						
Residential Care	(729)	(536)	193	0	193	118
Day Care	(205)	(263)	(58)	0	(58)	(68)
Community Care	(49)	143	192	0	192	177
Other	(249)	(303)	(54)	0	(54)	(42)
<u>Total Provider Services</u>	(1,232)	(959)	273	0	273	185
<u>Other Services</u>						
Housing Services	1,650	1,623	(27)	0	(27)	(5)
Customer Care Services	1,185	1,089	(96)	0	(96)	(81)
Departmental Central Services	3,068	3,674	606	0	606	725
<u>Total Other Services</u>	5,903	6,386	483	0	483	639
<u>Adults, Health and Wellbeing Total</u>	44,413	44,407	(6)	0	(6)	338

Adult, Health and Wellbeing Summary

Main Issues:-

Older People's Services:

- Residential and Nursing - Homes - an increase of (£212k) in the level of underspend up to (£577k) and including various variances, including an underspend of (£248k) on Independent Homes, due to a reduction in the number of placements, together with additional income contributions of (£328k) which is an increase of (£223k) since the third quarter.

Learning Disability Services - a reduction of £77k in the underspend since the third quarter, and including a number of substantial variances, and in particular an increase in the expenditure of £155k in Supported Accommodation, an increase of (£47k) in the underspend on Residential and Nursing - Independent Homes and an increase of (£26k) in the underspend on Support Schemes mainly due to a reduction in the level of support packages provided.

Mental Health Services - a reduction of (£62k) in the previous overspend, down to £33k, and including additional income and one-off staff savings of (£37k) on Support Schemes, together with an additional income and a reduction in spend of (£27k) on Support and Other Schemes.

Other Services (Adults) - an increase of (£44k) in the level of underspend in the last quarter, and including mainly receipt of additional grant income of (£35k) in relation to the Elderly and Physical Disability Team.

Provider Services - an increase of £88k in the overspend position up to £273k, mainly due to higher operating costs of £65k on Elderly Residential Homes, and higher staffing costs of £9k on Learning Disability Homes.

Central Departmental Services - included under this heading is the position of the "Savings Schemes to be Realised", that is, the failure to realise £747k of savings (this is reported further below), also additional income of (£91k) was received in relation to the Independent Living Fund.

Summary:

It can be seen above that a number of variances have accumulated to give a net departmental underspend of (£6k) by year end, which is a very substantial improvement from the position that was forecasted earlier in the year and reflects the Department's success with various measures undertaken to manage their budget.

In respect of the "Savings Schemes to be Realised" as referred to above, the Head of Department is proposing to replace some of the savings schemes within the current programme. In this respect, he also proposes to implement transfers between various budget headings to better reflect the latest service requirements, and by doing so, will propose a revised efficiency savings schemes, the Head of Adult Care will report further on this.

As some of the transfers value are over the £200k threshold, it is requested that the Cabinet approves the whole package.

In accordance with the request of the Head of Adult Department it is recommended to approve the following budget transfers within the Adult, Health and Wellbeing Department :-

Budget Heading / Area

	Budget Reduction	Budget Increase	Net
	£'000	£'000	£'000
Older People's Services			
Residential and Nursing	(202)		
Spend - Independent Homes	(330)		
Resident Contributions	(31)		
Support Accommodation			
Home Care		60	
	<u>(563)</u>	<u>60</u>	<u>(503)</u>
Revise the Budgets of the Original Savings Schemes			
Re-design Services		235	
Telecare		237	
Sheltered Housing		31	
	<u>0</u>	<u>503</u>	<u>503</u>
Learning Disability Services			
Independent Care and Nursing Homes	(220)		
Support Services	(150)		
Supported Accommodation		150	
Day Services		150	
Direct Payments		70	
	<u>(370)</u>	<u>370</u>	<u>0</u>
TOTALS	<u><u>(933)</u></u>	<u><u>933</u></u>	<u><u>0</u></u>

REVENUE BUDGET 2015/16 - FINAL						
Children and Families Department Summary Position	Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
Area:-	£'000	£'000	£'000	£'000	£'000	£'000
Service Management	442	409	(33)	0	(33)	(28)
Operational Services	1,858	2,035	177	0	177	187
Placement Services						
Residential Unit	270	576	306	0	306	456
Out of County Placements	2,233	2,213	(20)	0	(20)	(18)
Agency Fostering	1,020	1,118	98	0	98	78
Internal Fostering	1,805	1,595	(210)	0	(210)	(204)
Other	1,517	1,511	(6)	0	(6)	(10)
	6,845	7,013	168	0	168	302
Post-16 Services	998	861	(137)	0	(137)	(147)
Specialist Services/Derwen	1,533	1,424	(109)	0	(109)	(71)
Youth Justice Services	264	246	(18)	0	(18)	(19)
Early Years Services	122	88	(34)	0	(34)	(34)
Other Services	1,109	1,087	(22)	0	(22)	(39)
Children and Families Total	13,171	13,163	(8)	0	(8)	151

Children and Families Summary

Main Issues:-

Operational Services:

A small reduction of (£10k) in the overspend level, down to £177k and mainly due to staffing overspend. The Department is giving further consideration to the staffing overspend level, which is a fairly regular pattern on this heading.

Placement Services:

A reduction of (£134k) in the final overspend, down from £302k to £168k, mainly following the use of (£150k) of specific reserve resources to mitigate the Residential Unit position, where slippage was seen in the childrens residential home savings scheme, with the delay contributing considerably to the net overspend of £306k.

Specialist Services/Derwen:

An increase of (£38k) in the final underspend of (£109k) due to a reduction in the cost of support workers and early achievement of savings schemes.

REVENUE BUDGET 2015/16 - FINAL						
Education Department Summary Position	Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
Area:-	£'000	£'000	£'000	£'000	£'000	£'000
Delegated Schools	70,278	70,278	0	0	0	0
Transport	4,152	4,222	70	0	70	58
Redundancies and Early Retirement	1,431	1,431	0	0	0	0
Integration	189	223	34	0	34	0
Out-of County	969	901	(68)	0	(68)	(107)
Catering and Cleaning	263	289	26	0	26	49
Nursery Education	599	573	(26)	0	(26)	0
Education Improvement Grant	579	581	2	0	2	0
Management	1,351	1,308	(43)	0	(43)	(20)
Additional Learning Needs Unit	1,940	1,921	(19)	0	(19)	(10)
Inclusion Strategy	348	316	(32)	0	(32)	(32)
Further Education	0	0	0	0	0	0
School Reserves	(40)	0	40	0	40	0
Education Contribution to Joint Committees	1,576	1,571	(5)	0	(5)	0
ALN Joint-Committee	(8)	(8)	0	0	0	0
Other	(1,763)	(1,790)	(27)	0	(27)	58
Education Total	81,864	81,816	(48)	0	(48)	(4)

Education Summary

Main Issues:-

Integration:

A neutral position was forecasted in the third quarter but by year end an overspend of £34k was seen, due to the additional support provided for pupils with additional learning needs (non stated) within the primary schools.

Out-of County:

A reduction of £39k in the forecasted underspend, down to (£68k) by year end due to the impact of one additional case.

Reserve Provision (Special School Requirements):

An additional spend of £40k was seen under this heading in the last quarter due to the release of an additional allocation to one school as a result of an increase in pupil numbers.

Other:

An improvement of (£85k) on this heading since the third quarter, with a final underspend of (£27k). Which includes a number of variances and in particular an underspend of (£24k) on external services and provisions, an underspend of (£21k) on Large Classes Provision, and an underspend of (£9k) on Discretionary Grants.

REVENUE BUDGET 2015/16 - FINAL						
Economy and Community Department Summary Position	Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
Area:-	£'000	£'000	£'000	£'000	£'000	£'000
Management	383	378	(5)	0	(5)	2
Business Support	7	16	9	0	9	10
Marketing and Customer Care	575	571	(4)	0	(4)	0
Community Regeneration	808	790	(18)	0	(18)	(12)
Skills and Enterprise	55	63	8	0	8	0
Strategic Projects Team	287	305	18	0	18	0
Strategy and Development	273	268	(5)	0	(5)	0
Archives	312	305	(7)	0	(7)	(7)
Museums	97	96	(1)	0	(1)	0
Galleries	50	51	1	0	1	0
Halls	156	189	33	0	33	21
Arts	260	256	(4)	0	(4)	0
Country Parks	39	28	(11)	0	(11)	(4)
Maritime	(169)	(151)	18	0	18	17
Youth Service	943	865	(78)	0	(78)	(78)
Healthy Communities Service (Leisure Facilities)	1,744	1,778	34	0	34	56
Sports Development	197	196	(1)	0	(1)	0
Libraries	1,542	1,560	18	0	18	20
Total Economy a Community	7,559	7,564	5	0	5	25

Economy and Community Summary**Summary:-**

The departmental position shows an overspend of £5k by year end which is an improvement of (£20k) since the third quarter and whilst including a number of small variances, it can be seen that the overspend on Halls has increased from £21k to £33k due mainly to a reduction in income, but that the overspend on Healthy Communities Services (Leisure Facilities) has reduced from £56k in the third quarter to £34k by year end.

REVENUE BUDGET 2015/16 - FINAL						
Highways and Municipal Department Summary Position (including Trunk Road Agency)	Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
Area:-	£'000	£'000	£'000	£'000	£'000	£'000
Highways Services (including Trunk Roads)	8,460	8,239	(221)	0	(221)	(56)
Engineering Services	529	541	12	0	12	16
Municipal Services						
Waste						
Waste Disposal	2,530	2,440	(90)	0	(90)	(112)
Treatment and Transfer Sites	1,047	1,253	206	0	206	224
Recycling Centres	1,128	1,114	(14)	0	(14)	(51)
Waste Collection and Recycling	2,965	3,139	174	0	174	73
Other Waste	338	408	70	0	70	111
Waste Sub-total	8,008	8,354	346	0	346	245
Other Municipal	3,732	3,453	(279)	0	(279)	(204)
	11,740	11,807	67	0	67	41
Municipal Provision Unit	836	918	82	0	82	
Waste Provision Unit	(155)	(124)	31		31	
Fleet Unit	148	171	23	0	23	
Highways and Municipal (including Trunk Roads) Total	21,558	21,552	(6)	0	(6)	1

Highways and Municipal (including Trunk Roads) Summary

Main Issues:-

Highways and Municipal (Including Trunk Roads):

An increase of (£165k) in the final underspend since the third quarter, and including numerous elements, in particular the effect of a mild winter on winter maintenance costs, staff savings and one-off travelling costs of (£93k) and an underspend of (£48k) on street lighting energy costs.

Waste Field:

Waste Disposal - a final underspend of (£90k) was seen on this heading, mainly due to landfill tax savings.

Treatment and Transfer Sites - a final overspend of £206k and including an income shortfall of £298k from the sale of recyclable materials due to the current situation in the related market, but also an underspend of (£98k) in operational costs.

Waste Collection and Recycling - an increase of £101k in the final overspend position of £174k on Waste Collection and Recycling since the third quarter and including, mainly, an income shortfall of £32k, higher costs of £23k in handling recyclable materials and an overspend of £119k on operational costs, due mainly, to higher transport costs.

Other Municipal:

Final overspend of (£279k), including an underspend of (£117k) on Open Spaces, mainly due to additional income of (£97k) and savings on some elements of operational cost, an underspend of (£99k) on Bereavement Services (mainly due to additional income) and an underspend of (£76k) on Street Cleaning, due to underspend in staff costs.

Summary

Although a small department net underspend of (£6k) is evident, within this there are some substantial variances, in particular within the waste area. Where it will be necessary to take a longer term view to avoid a permanent situation developing.

CYLLIDEB REFENIW 2015/16 - TERFYNOL						
Regulatory Department Summary Position	Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
Area:-	£'000	£'000	£'000	£'000	£'000	£'000
Department Management	232	226	(6)	0	(6)	(8)
Planning Services						
Development Control	203	107	(96)	0	(96)	(112)
Other	16	(3)	(19)	0	(19)	(18)
	219	104	(115)	0	(115)	(130)
Street Works and Transport Services						
Forward Planning	44	36	(8)	0	(8)	(6)
Structural Maintenance	1,128	1,153	25	0	25	154
Road Safety	182	146	(36)	0	(36)	(40)
Traffic and Statutory Arrangements	258	246	(12)	0	(12)	(11)
Parking Services and Parking Enforcement Development	(1,475)	(1,558)	(83)		(83)	(83)
Transport	1,704	1,674	(30)	0	(30)	(26)
Other	230	232	2	0	2	3
	2,071	1,929	(142)	0	(142)	(9)
Countryside and Access Services	944	1,031	87	0	87	17
Joint Planning Policy Unit	237	237	0	0	0	0
Public Protection Services	1,599	1,553	(46)	0	(46)	15
Catering, Cleaning and Caretaking Services	(2)	(1)	1	0	1	5
Property Services	1,454	1,435	(19)	0	(19)	(12)
Recommendation				150	150	
Regulatory Total	6,754	6,514	(240)	150	(90)	(122)

Regulatory Summary

Main Issues:-

Development Control:

Net final underspend of (£96k), and including mainly receipt of an additional fee income together with an underspend on some operational costs.

Structural Maintenance:

A planned overspend was forecasted on this heading in the third quarter to respond to the problems arising from last winter's floods. However, by year end, the level of overspend was much less than originally anticipated and leaving a net overspend of £25k.

Parking Services:

The final position was in line with the forecasted third quarter review, with a surplus of (£83k), mainly as a result of additional income.

Summary:

When considering the Highways Strategic Review, the Cabinet decided to recommend the development of a procedure to inspect and assess our bridges, to assess the condition of our assets. The cost was estimated at £104k, and to be financed from the invest to save fund.

An opportunity is seen here with the Regulatory Department showing a gross (£240k) underspend to self-finance the cost from the departmental underspend, rather than use central funds. The (Temporary) Head of Regulatory is also eager to extend the related work to include additional assets such as culverts and some retaining walls, at an additional cost of £46k, making a total of £150k.

It is recommended to use £150k of the gross underspend of the Regulatory Department in 2015/16 to develop an arrangement for the inspection and assessment of the condition of our bridges, culverts and some retaining walls.

REVENUE BUDGET 2015/16 - FINAL						
Consultancy Department Summary Position	Revised Budget 2015/16	Estimated Final Position 2015/16	Estimated Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
Area:-	£'000	£'000	£'000	£'000	£'000	£'000
Roads, Engineering and Environmental Services	(439)	(388)	51	0	51	(118)
Flood Risk Management Unit Services	417	417	0	0	0	0
Building Services	(17)	(34)	(17)	0	(17)	(19)
Consultancy Total	(39)	(5)	34	0	34	(137)

Consultancy Summary

Main Issues:-

Roads, Engineering and Environmental Services:

An underspend position of (£118k) was forecasted under this heading in the third quarter, but by the end of the financial year, a change of £169k was seen to show an overspend of £51k. There are numerous reasons for this change, including being over optimistic in respect of the last quarter work level, slippage with some forecasted schemes into the new year, and a more competitive work pricing situation expected by clients.

REVENUE BUDGET 2015/16 - FINAL						
Central Departments Summary Position	Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 4 review
Area:-	£'000	£'000	£'000	£'000	£'000	£'000
Corporate Management Team and Legal	2,025	2,005	(20)	0	(20)	(30)
Finance	5,604	5,534	(70)	0	(70)	(69)
Corporate Support	7,286	7,191	(95)	0	(95)	(96)
Central Departments Total	14,915	14,730	(185)	0	(185)	(195)

Central Departments Summary

Main Issues:-

Finance:

An underspend position of (£70k) which is fairly consistent with that forecasted in the third quarter, and mainly resulting from staffing savings, which is a combination of early realisation of savings together with savings arising from staff turnover.

Corporate Support:

Again, the final position is an underspend of (£95k), which is fairly constant with that forecasted in the last quarter, and includes an overspend on Corporate Commissioning and Change Management, an underspend of (£17k) on Democracy and Supporting Achievement and an underspend of (£101k) on Human Resources, mainly due to the success of attracting additional external income and achieving staff savings in advance.

REVENUE BUDGET 2015/16 - FINAL						
Corporate Summary Position (Only showing the variances)	Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
Area:-	£'000	£'000	£'000	£'000	£'000	£'000
Council Tax	*	*	(427)	0	(427)	(32)
Benefits	*	*	(394)	0	(394)	(105)
Net Interest Receipt	*	*	94	0	94	216
General Additional Income	*	*	(66)	0	(66)	*
Other	*	*	(59)	0	(59)	(82)
Specific Provision for Fuel and Energy Inflation	*	*	(359)	0	(359)	*
North Wales Residual Waste Partnership Requirements	*	*	0	150	150	*
Contribution Towards the 2016/17 Financial Strategy	*	*	0	769	769	*
Contribution Towards the 2015/16 Financial Strategy	*	*	0	292	292	*
Corporate Total	*	*	(1,211)	1,211	0	(3)

CORPORATE BUDGETS

	Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
	£'000	£'000	£'000	£'000	£'000	£'000
Council Tax			(427)		(427)	(32)

Final "underspend" position which reflects an increase in the total payable on all the Council Tax accounts.

Benefits

Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
£'000	£'000	£'000	£'000	£'000	£'000
		(394)		(394)	(105)

In line with the forecasted trend, there was a final underspend of (£394k).

Net Interest Receipt

Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
£'000	£'000	£'000	£'000	£'000	£'000
		94		94	216

Although a further repayment of (£137k) was seen from the Heritable investment bringing the total repaid to date to nearly 98.5%, with an expectation for the total to be repaid in due course, a reduction of £231k was also seen in the remainder of the interest received which reflects the market situation in general.

General Additional Income

Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
£'000	£'000	£'000	£'000	£'000	£'000
		(66)		(66)	

Attracting additional income from external activities.

Other

Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
£'000	£'000	£'000	£'000	£'000	£'000
		(59)		(59)	(82)

Final net position including a combination of variances on numerous headings.

Specific Provision for Fuel and Energy Inflation

Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
£'000	£'000	£'000	£'000	£'000	£'000
		(359)		(359)	

The final position for 2015/16 enables the release of the remainder of the provision.

**North Wales Residual
Waste Partnership
Requirement**

Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
£'000	£'000	£'000	£'000	£'000	£'000
			150	150	

As included in a separate report to this meeting, it can be seen that additional costs have arisen in relation to the commissioning element of the Waste Partnership. Whilst the requirement over the next two years is over £600k, it is forecasted that £150k will be more than adequate in respect of the 2016/17 requirements.

It is recommended that £150k of the Corporate Budget underspend for 2015/16 is transferred to the North Wales Residual Waste Partnership reserve fund for the 2016/17 requirements, with the remainder required in 2017/18 being recognised whilst considering the financial strategy for that year.

Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
£'000	£'000	£'000	£'000	£'000	£'000
			769	769	

**Contribution Towards
the 2016/17 Financial
Strategy**

The decision on the Financial Strategy for 2016/17 included the need to identify a total of £2.780m from different sources (reserves, etc) to assist the financing package requirement for the year.

Included in Attachment 3 is the detail from the review and harvesting work undertaken from various sources, and a total of £2.011m has been identified for release.

A further £769k is therefore required to reach the total required of £2.780m.

It is recommended that £769k of the Corporate Budgets underspend for 2015/16 should be transferred to a reserve to finance the 2016/17 financial strategy.

**Contribution Towards the
2015/16 Financial Strategy
(and use of Council's
balances)**

Revised Budget 2015/16	Final Position 2015/16	Overspend / (Underspend) 2015/16	Use of Other Sources or Other Recommended Adjustments	Revised Overspend/ (Underspend)	Net Overspend/ (Underspend) Quarter 3 review
£'000	£'000	£'000	£'000	£'000	£'000
			292	292	

The decision on the Financial Strategy for 2015/16 included using £2.019m of the Council's balances.

We have already during this years quarter 2 and quarter 3 reviews taken advantage of favourable circumstances to transfer to a specific fund a total of £894k towards the Council's financial position.

We can now add the remainder of the underspend from the Corporate Budgets headings for the same purpose, that is £292k.

The use of (£894k) from the previous quarterly reviews and the (£292k) underspend position of Corporate Budgets (above) for 2015/16 gives a total of (£1,186m), which enables us to reduce the demand for the use of the Council's balances for this year from (£2,019m) as originally decided down to (£833k).

It is recommended that £292k of the Corporate Budgets underspend for 2015/16 should be used towards the 2015/16 financial strategy.

This resulting in using of £833k from the Council balances instead of the original £2.019m, in order to complete the financing package for the 2015/16 financial strategy.

Following a review of the reserves it's recommended that the following could be released for the purpose of the 2016/17 Financial Strategy:

Reserves	Amount to be released (£)
Environmental Stewardship Fund	35,672.91
Gwynedd and Môn Partnership - Supporting Joint Partnership Unit	67,190.00
Financing project managers posts	50,000.00
Contribution towards the North Wales Procurement arrangement requirements	16,500.00
Lone Working	68,000.00
Democratic Requirements	35,000.00
Financing projects in order to create future savings	17,560.00
Fund towards employing graduates	4,030.00
Financing temporary Internal Communications Officer	55,400.00
Welfare Reform Requirements	161,000.00
Benefit Officer	24,140.00
Engagement Project	20,000.00
Public Protection Requirements	66,450.00
General Contracts Works	100,000.00
Contracts Tendering Reserve	150,000.00
Total	870,942.91

Review of the Provision Requirements

Following a review of the provision requirements, it's recommended that the following could be released for the purpose of the 2016/17 Financial Strategy:

Provision	Amount to be released (£)
Equal Pay Provision	540,000.00
(Corporate) Pension Provision	400,000.00
Transport Provision Requirement	200,000.00
Total	1,140,000.00

TOTAL 2,010,942.91

Agenda Item 9

MEETING	Audit Committee
DATE	23 June 2016
TITLE	Gwynedd Harbours' Final Accounts for the year ended 31 March 2016
PURPOSE	To submit – <ul style="list-style-type: none">• The Revenue Income and Expenditure Account Report for 2015/16, and• Statements of accounts return , duly certified, but pre-Audit
RECOMMENDATION	Receive and Approve the Accounts
AUTHOR	William E Jones, Senior Finance Manager, Gwynedd Council

1. HARBOUR REPORTING REQUIREMENTS

- 1.1 The Harbours Act 1964 requires that Gwynedd, as a harbour authority, prepares an annual statement of accounts relating to harbour activities.
- 1.2 Gwynedd Harbours, due to its turnover not exceeding £2.5m is considered to be a small local government body as defined in the Accounts and Audit Regulations (Wales) 2014.
- 1.3 For a “small local government body”, completion of a statements of accounts return prepared by the Wales Audit Office satisfies the statutory requirement. It will be subject to a separate audit, but production of full statutory financial statements (complying with “IFRS” International Financial Reporting Standards) are not required.

2. 2015/16 ACCOUNTS

- 2.1 The Revenue Income and Expenditure Account for 2015/16 is submitted herewith as Appendix A in simple “outturn” format.
- 2.2 The statements of accounts return for 2015/16 is submitted herewith as Appendix B, duly completed and certified prior to audit, by Dafydd L Edwards, the Statutory Finance Officer for the Harbours.
- 2.3 The accounts and return will be subject to imminent audit by Deloitte, Gwynedd Council’s external auditors appointed by the Auditor General for Wales. Should any amendments be necessary then a revised version will be presented to the Audit Committee in September.

- 2.4 Following Deloitte's audit and any required amendments, the Auditor General's representative will certify the return prior to 30 September.
- 2.5 Appendix A relates to the revenue account only whereas the accounting statements in Appendix B incorporates both revenue and capital. Gwynedd Harbours' capital expenditure for 2015/16 was £75,644. This figure is part of the sum shown on line 6, with the financing income included in line 2.

3. RECOMMENDATION

- 3.1 **The Audit Committee is asked to receive and approve the information in the appendices, i.e. –**
- Revenue Income and Expenditure Account for 2015/16 – Appendix A
 - 2015/16 statements of accounts return, subject to audit – Appendix B

Audit Committee

Cyngor Gwynedd Harbours' Report

Income and Expenditure Account 2015-16

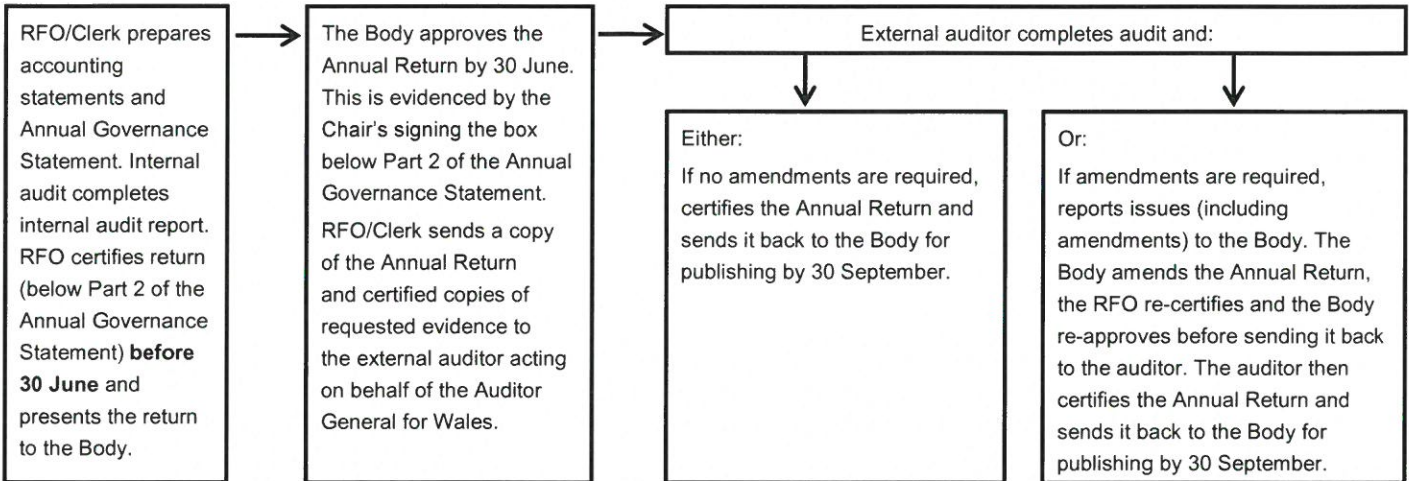
	Final Budget 2015-16 £	Final Accounts 2015-16 £	Variance Over (Under) spend £
EXPENDITURE			
Employees			
Salaries	172,540	152,578	-19,962
Training	0	55	55
Insurance Liability	3,250	791	-2,459
Other Miscellaneous	1,570	243	-1,327
Buildings			
Maintenance, Equipment etc	48,399	6,105	-42,294
Energy	6,940	12,182	5,242
NNDR	17,180	17,164	-16
Water Rates	2,310	3,753	1,443
Crown Lease	4,330	5,200	870
Refuse Collection and Cleaning	4,000	4,316	316
Buildings Insurance	2,730	535	-2,195
Transport			
Vehicle Running Costs (Including Boats)	2,020	814	-1,206
Travel Expenses	510	319	-191
Insurances on Vehicles	0	407	407
Supplies and Services			
Equipment - Including safety	20,480	25,158	4,678
Underwater Inspections	7,060	12,200	5,140
Signiges	0	3,406	3,406
Boat Maintenance	3,000	3,142	142
Specialists' Fees	0	23,203	23,203
Licences	600	300	-300
Office Supplies & Network costs	4,630	4,581	-49
Audit Fees	0	650	650
Miscellaneous	0	5,549	5,549
Insurance on Handling Cash	2,760	2,470	-290
Central Support			
Central Reimbursement Costs	25,890	29,714	3,824
Total Expenditure	330,199	314,835	-15,364
INCOME			
Fees	-222,700	-191,722	30,978
Rent	-6,200	-5,250	950
Contribution from Reserves	0	-30,053	-30,053
Total Income	-228,900	-227,025	1,875
Net Expenditure	101,299	87,810	-13,489

Smaller local government bodies in Wales Annual Return for the Year Ended 31 March 2016

Smaller local government bodies in Wales must prepare annual accounts following proper practices as set out in the One Voice Wales/SLCC publication **Governance and accountability for local councils in Wales – A Practitioners' Guide** (the Practitioners' Guide). The Practitioners' Guide states that bodies may prepare their accounts in the form of an annual return prepared by the Wales Audit Office.

The accounts and audit process

The accounts and audit arrangements follow the process as set out below.



Please complete all sections highlighted in red. Incomplete or incorrect returns may require additional external audit work and incur additional costs. Send the **original** Annual Return, together with all additional information requested, to the external auditor acting on behalf of the Auditor General for Wales. **Please note that copies of all documents provided for the purposes of the audit must be certified as true copies of the originals by the Clerk and Chair.** Unless requested, please **do not** send any original financial or other records to the external auditor.

Bodies should note the changes to the Annual Governance Statement. This is to be completed in full by all Bodies.

Audited and certified returns are sent back to the Body for publication or display of the accounting statements, Annual Governance Statement and the Auditor General for Wales' certificate and report.

Completion checklist

'No' answers mean that you may not have met requirements		Done?	
Initial submission to the external auditor		Yes	No
Accounts	Has the RFO certified the accounting statements and the body approved the Annual Return (as evidenced by the relevant signatures), no later than 30 June 2016?	<input checked="" type="radio"/>	<input type="radio"/>
	Do the accounts add up and does the balance carried forward from last year equal the opening balance this year?	<input checked="" type="radio"/>	<input type="radio"/>
	Do the papers to be sent to the external auditor include an explanation of significant variations, including a quantified analysis of the changes from last year to this year?	<input checked="" type="radio"/>	<input type="radio"/>
	Does the bank reconciliation as at 31 March 2016 agree to line 9?	<input checked="" type="radio"/>	<input type="radio"/>
All sections	Have all red boxes been completed and explanations provided where needed?	<input checked="" type="radio"/>	<input type="radio"/>
	Has all the information requested by the external auditor been sent with this Annual Return? Please refer to your notice of audit and any additional schedules provided by your external auditor.	<input checked="" type="radio"/>	<input type="radio"/>
Supporting evidence	Have all items and pages of supporting evidence provided to the audit been certified as a true copy of the original by the Clerk and Chair?	<input checked="" type="radio"/>	<input type="radio"/>

Accounting statements 2015-16 for:

Name of body: **GWYNEDD COUNCIL HARBOURS**

	Year ending		Notes and guidance for compilers
	31 March 2015 (£)	31 March 2016 (£)	

Please round all figures to nearest £.
Do not leave any boxes blank and report £0 or nil balances.
All figures must agree to the underlying financial records for the relevant year.

Statement of income and expenditure/receipts and payments

1. Balances brought forward	0	0	Total balances and reserves at the beginning of the year as recorded in the financial records. Must agree to line 7 of the previous year.
2. (+) Income from local taxation/levy	64,175	163,454	Total amount of income received/receivable in the year from local taxation (precept) or levy/contribution from principal bodies.
3. (+) Total other receipts	220,196	227,025	Total income or receipts recorded in the cashbook minus amounts included in line 2. Includes support, discretionary and revenue grants.
4. (-) Staff costs	-132,781	-153,666	Total expenditure or payments made to and on behalf of all employees. Include salaries and wages, PAYE and NI (employees and employers), pension contributions and related expenses eg termination costs.
5. (-) Loan interest/capital repayments	0	0	Total expenditure or payments of capital and interest made during the year on external borrowing (if any).
6. (-) Total other payments	-151,590	-236,813	Total expenditure or payments as recorded in the cashbook minus staff costs (line 4) and loan interest/capital repayments (line 5).
7. (=) Balances carried forward	0	0	Total balances and reserves at the end of the year. Must equal (1+2+3) – (4+5+6).

Statement of balances

8. (+) Debtors and stock balances	18,914	17,322	Income and expenditure accounts only: Enter the value of debts owed to the body and stock balances held at the year-end.
9. (+) Total cash and investments	1,792	534	All accounts: The sum of all current and deposit bank accounts, cash holdings and investments held at 31 March. This must agree with the reconciled cashbook balance as per the bank reconciliation.
10. (-) Creditors	-20,706	-17,856	Income and expenditure accounts only: Enter the value of monies owed by the body (except borrowing) at the year-end.
11. (=) Balances carried forward	0	0	Total balances should equal line 7 above: Enter the total of (8+9-10).
12. Total fixed assets and long-term assets	404,246	479,891	The original asset and investment register value of all fixed assets and any other long-term assets held as at 31 March.
13. Total borrowing	0	0	The outstanding capital balance as at 31 March of all loans from third parties (including PWLB).

14. Trust funds disclosure note	Yes	No	N/A	Yes	No	N/A	The Body acts as sole trustee for and is responsible for managing (a) trust fund(s)/assets (readers should note that the figures above do not include any trust transactions).
	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	

Annual Governance Statement (Part 1)

We acknowledge as the members of the Council/Board/Committee, our responsibility for ensuring that there is a sound system of internal control, including the preparation of the accounting statements. We confirm, to the best of our knowledge and belief, with respect to the accounting statements for the year ended 31 March 2016, that:

	Agreed?		'YES' means that the Council/Board/Committee:	PG Ref	
	Yes	No*			
1. We have approved the accounting statements which have been prepared in accordance with the requirements of the Accounts and Audit (Wales) Regulations 2014 and proper practices.	<input checked="" type="radio"/>	<input type="radio"/>	Prepared its accounting statements in the way prescribed by law.	6, 12	
2. We have maintained an adequate system of internal control, including measures designed to prevent and detect fraud and corruption, and reviewed its effectiveness.	<input checked="" type="radio"/>	<input type="radio"/>	Made proper arrangements and accepted responsibility for safeguarding the public money and resources in its charge.	6, 7	
3. We have taken all reasonable steps to assure ourselves that there are no matters of actual or potential non-compliance with laws, regulations and codes of practice that could have a significant financial effect on the ability of the Council/Board/Committee to conduct its business or on its finances.	<input checked="" type="radio"/>	<input type="radio"/>	Has only done things that it has the legal power to do and has conformed to codes of practice and standards in the way it has done so.	6	
4. We have provided proper opportunity for the exercise of electors' rights in accordance with the requirements of the Accounts and Audit (Wales) Regulations 2014.	<input checked="" type="radio"/>	<input type="radio"/>	Has given all persons interested the opportunity to inspect and to ask questions about the Body's accounts.	6, 23	
5. We have carried out an assessment of the risks facing the Council/Board/Committee and taken appropriate steps to manage those risks, including the introduction of internal controls and/or external insurance cover where required.	<input checked="" type="radio"/>	<input type="radio"/>	Considered the financial and other risks it faces in the operation of the Body and has dealt with them properly.	6, 9	
6. We have maintained an adequate and effective system of internal audit of the accounting records and control systems throughout the year and have received a report from the internal auditor.	<input checked="" type="radio"/>	<input type="radio"/>	Arranged for a competent person, independent of the financial controls and procedures, to give an objective view on whether these meet the needs of the Body.	6, 8	
7. We have considered whether any litigation, liabilities or commitments, events or transactions, occurring either during or after the year-end, have a financial impact on the Council/Board/Committee and, where appropriate, have included them on the accounting statements.	<input checked="" type="radio"/>	<input type="radio"/>	Disclosed everything it should have about its business during the year including events taking place after the year-end if relevant.	6	
8. We have taken appropriate action on all matters raised in previous reports from internal and external audit.	<input checked="" type="radio"/>	<input type="radio"/>	Considered and taken appropriate action to address issues/weaknesses brought to its attention by both the internal and external auditors.	6, 8, 23	
9. Trust funds – in our capacity as trustee, we have: <ul style="list-style-type: none"> Discharged our responsibility in relation to the accountability for the fund(s) including financial reporting and, if required, independent examination or audit. 	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Has met all of its responsibilities where it is a sole managing trustee of a local trust or trusts.	3, 6

* Please provide explanations to the external auditor on a separate sheet for each 'no' response given; and describe what action is being taken to address the weaknesses identified.

Annual Governance Statement (Part 2)

	Agreed?		'YES' means that the Council/Board/Committee:	PG Ref
	Yes	No*		
1. We calculated and approved the Council/Board/Committee's budget requirement for the 2015-16 financial year in accordance the Local Government Finance Act 1992 and proper practices [and issued the precept in accordance with Sections 39 to 42 of the Local Government Finance Act 1992.]*	<input checked="" type="radio"/>	<input type="radio"/>	Properly planned its financial activities for the year and set a budget in accordance with statutory requirements.	13
2. We have received detailed financial reports setting out the [income and expenditure* receipts and payments*] and a summary of the Council/Board/Committee's financial position on a regular [monthly* / quarterly*] basis throughout the year.	<input checked="" type="radio"/>	<input type="radio"/>	Effectively monitored its financial position, income and expenditure against that budget throughout the financial year.	13
3. We have ensured that the Council/Board/Committee's internal audit is independent of its day-to-day decision-making process and maintenance of the accounting records and have agreed appropriate terms of reference for the internal audit.	<input checked="" type="radio"/>	<input type="radio"/>	Ensured that its internal audit function is able to undertake its work without potential conflicts of interest and with sufficient scope to provide an adequate and effective service.	8

* Please delete as appropriate.

Council/Board/Committee approval and certification

The Council/Board/Committee is responsible for the preparation of the accounting statements in accordance with the requirements of the Accounts and Audit (Wales) Regulations 2014 and for the preparation of the Annual Governance Statement.

Certification by the RFO I certify that the accounting statements contained in this Annual Return presents fairly the financial position of the Council/Board/Committee, and its income and expenditure, or properly presents receipts and payments, as the case may be, for the year ended 31 March 2016.	Approval by the Council/Board/Committee I confirm that these accounting statements and Annual Governance Statement were approved by the Council/Board/Committee under minute reference:
RFO signature: 	Chair signature:
Name: Dafydd L Edwards Date: 15/06/16 Statutory Finance Officer Gwynedd Council	Name: Date:

Council/Board/Committee re-approval and re-certification (only required if the annual return has been amended at audit)

Certification by the RFO I certify that the accounting statements contained in this Annual Return presents fairly the financial position of the Council/Board/Committee, and its income and expenditure, or properly presents receipts and payments, as the case may be, for the year ended 31 March 2016.	Approval by the Council/Board/Committee I confirm that these accounting statements and Annual Governance Statement were approved by the Council/Board/Committee under minute reference:
RFO signature:	Chair signature:
Name:	Name:
Date:	Date:

Auditor General for Wales' Audit Certificate and report

The external auditor conducts the audit on behalf of, and in accordance with, guidance issued by the Auditor General for Wales. On the basis of their review of the Annual Return and supporting information, they report whether any matters that come to their attention give cause for concern that relevant legislation and regulatory requirements have not been met.

We certify that we have completed the audit of the Annual Return for the year ended 31 March 2016 of:

GWYNEDD COUNCIL HARBOURS

External auditor's report

[Except for the matters reported below]* On the basis of our review, in our opinion, the information contained in the Annual Return is in accordance with proper practices and no matters have come to our attention giving cause for concern that relevant legislation and regulatory requirements have not been met.

[[These matters along with]* Other matters not affecting our opinion which we draw to the attention of the body and our recommendations for improvement are included in our report to the body dated _____.]

Other matters and recommendations

On the basis of our review, we draw the Body's attention to the following matters and recommendations which do not affect our audit opinion but should be addressed by the Body.

(Continue on a separate sheet if required.)

External auditor's name:

External auditor's signature:

Date:

For and on behalf of the Auditor General for Wales

* Delete as appropriate.

Annual internal audit report to:

Name of body: **GWYNEDD COUNCIL HARBOURS**

The Council/Board/Committee's internal audit, acting independently and on the basis of an assessment of risk, has included carrying out a selective assessment of compliance with relevant procedures and controls expected to be in operation during the financial year ending 31 March 2016.

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

	Agreed?				Outline of work undertaken as part of the internal audit (NB not required if detailed internal audit report presented to body)
	Yes	No*	N/A	Not covered**	
1. Appropriate books of account have been properly kept throughout the year.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
2. Financial regulations have been met, payments were supported by invoices, expenditure was approved and VAT was appropriately accounted for.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
3. The body assessed the significant risks to achieving its objectives and reviewed the adequacy of arrangements to manage these.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
4. The annual precept/levy/resource demand requirement resulted from an adequate budgetary process, progress against the budget was regularly monitored, and reserves were appropriate.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
5. Expected income was fully received, based on correct prices, properly recorded and promptly banked, and VAT was appropriately accounted for.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
6. Petty cash payments were properly supported by receipts, expenditure was approved and VAT appropriately accounted for.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
7. Salaries to employees and allowances to members were paid in accordance with minuted approvals, and PAYE and NI requirements were properly applied.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
8. Asset and investment registers were complete, accurate, and properly maintained.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

	Agreed?				Outline of work undertaken as part of the internal audit (NB not required if detailed internal audit report presented to body)
	Yes	No*	N/A	Not covered**	
9. Periodic and year-end bank account reconciliations were properly carried out.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
10. Accounting statements prepared during the year were prepared on the correct accounting basis (receipts and payments/income and expenditure), agreed with the cashbook, were supported by an adequate audit trail from underlying records, and where appropriate, debtors and creditors were properly recorded.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
11. Trust funds (including charitable trusts). The Council/Board/Committee has met its responsibilities as a trustee.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	

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

	Agreed?				Outline of work undertaken as part of the internal audit (NB not required if detailed internal audit report presented to body)
	Yes	No*	N/A	Not covered**	
12.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	
13.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	
14.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	

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

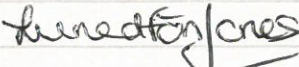
** If the response is 'not covered', please state when the most recent internal audit work was done in this area and when it is next planned, or if coverage is not required, internal audit must explain why not.

[My detailed findings and recommendations which I draw to the attention of the Council/Board/Committee are included in my detailed report to the Council/Board/Committee dated 05/05/2016. * Delete if no report prepared.

Internal audit confirmation

I confirm that as the Council's internal auditor, I have not been involved in a management or administrative role within the body or as a member of the body during the financial years 2014-15 and 2015-16. I also confirm that there are no conflicts of interest surrounding my appointment.

Name of person who carried out the internal audit: Luned Fôn Jones

Signature of person who carried out the internal audit: 

Date: 24/05/2016

Guidance notes on completing the Annual Return

1. You must apply proper practices when preparing this annual return. For guidance, please read the Practitioners' Guide (**Governance and accountability for local councils: A Practitioners' Guide (Wales)**) – available from One Voice Wales and SLCC. It contains everything you need for the financial year-end and the statutory audit.
2. The Wales Audit Office Good Practice Exchange (www.audit.wales/good-practice/finance/community-council-money) provides further information on the accounts and audit process along with guidance on governance matters.
3. Make sure that the Annual Return is fully completed ie, no empty red boxes. Please avoid making any amendments to the completed return. If this is unavoidable, cross out the incorrect entries, make sure the amendments are drawn to the attention of the body, properly initialled and an explanation for them is provided to the external auditor. **Please do not use correction fluid.** Annual returns that are incomplete or contain unapproved and/or unexplained amendments or correction fluid will be returned unaudited and may incur additional costs.
4. **There are now two boxes for certification and approval by the Body. The second box is only required if the annual return has to be amended as a result of the audit. You should only complete the top box before sending the form to the auditor.**
5. Use a second pair of eyes, perhaps the Chair or a member, to review your Annual Return for completeness before sending the original form to the auditor.
6. Make sure that your accounting statements add up, that the balance carried forward from the previous year (line 7 of 2015) equals the balance brought forward in the current year (line 1 of 2016). Explain any differences between the 2015 figures on this annual return and the amounts recorded in last year's annual return.
7. Explain fully any significant variances in the accounting statements. Do not just send in a copy of your detailed accounting records instead of this explanation. The external auditor wants to know that you understand the reasons for all variances. Include a detailed analysis to support your explanation and be specific about the values of individual elements making up the variances.
8. Make sure that the copy of the bank reconciliation you send to your auditor with the Annual Return covers **all** your bank accounts and cash balances. If there are no reconciling items, please state this and provide evidence of the bank balances. If your Council holds any short-term investments, please note their value on the bank reconciliation. The auditor should also be able to agree your bank reconciliation to line 9 in section 1. More help on bank reconciliation is available in the Practitioners' Guide*.
9. **Every** small body is now required to send to the external auditor, information to support the assertions made in the Annual Governance Statement. Your auditor will tell you what information you need to provide. Please read the audit notice carefully to ensure you include all the information the auditor has asked for. You should send **copies** of the original records (certified by the Clerk and Chair as accurate copies) to the external auditor and not the original documents themselves.
10. Please do not send the auditor any information that you are not specifically asked for. Doing so is not helpful.
11. If the auditor has to review unsolicited information, repeat a request for information, receives an incomplete bank reconciliation or explanation of variances or receives original documents that must be returned, the auditor will incur additional costs for which they are entitled to charge additional fees.
12. **Do not complete the Auditor General for Wales' Audit Certificate and report.** The external auditor completes this on behalf of the Auditor General for Wales on completion of the audit.
13. **Please deal with all correspondence with the external auditor promptly.** This will help you to meet your statutory obligations and will minimise the cost of the audit.
14. **Please note that if completing the electronic form, you must print the form for it to be certified by the RFO and signed by the Chair before it is sent to the auditor.**

COMMITTEE	AUDIT COMMITTEE
DATE	23 JUNE 2016
TITLE	SELF-ASSESSMENT OF THE EFFECTIVENESS OF THE AUDIT COMMITTEE
PURPOSE OF REPORT	TO REPORT BACK FROM THE WORKSHOP HELD ON 31 MAY 2016
AUTHOR	DEWI MORGAN, SENIOR MANAGER REVENUES AND RISK
ACTION	TO CONSIDER THE CONTENTS AND AGREE TO RECEIVE REGULAR UPDATES IN ORDER TO FURTHER IMPROVE ITS EFFECTIVENESS

1. INTRODUCTION

- 1.1 At its last meeting, on 5 May 2016, the Audit Committee resolved to organise a workshop during May/June 2016 in order to conduct a self assessment of its effectiveness.
- 1.2 The purpose of the Workshop would be to consider if the Committee operates in the most effective way, and where there is scope to do more.
- 1.3 The workshop was held at the Council's offices at Galw Gwynedd, Penrhyndeudraeth, on 31 May. Seven members of the Committee attended, including the Chair and Vice Chair. The Head of Finance, the Senior Manager Revenues & Risk and the Audit Manager attended to facilitate.

2. THE CONTENTS OF THE DAY

- 2.1 As a first step, a presentation was given on the evolution of the Committee since its establishment in 1999, and particular attention was given to the statutory requirements for an Audit Committee that are in place in Wales since 2012 pursuant to the Local Government (Wales) Measure 2011.
- 2.2 Specific reference was made to the CIPFA publication *Audit Committee – Practical Guidance for Local Authorities and Police*. In accordance with Statutory Guidance for the 2011 Measure, it is expected that the audit committees of local authorities in Wales pay attention to this publication. The Statutory Guidance refers to the version of the CIPFA guidance that was available at that time, namely the 2005 version, but an updated version has now been published, in 2013.
- 2.3 The CIPFA guidance was used to consider:
 - If the Committee is undertaking the things that it should, in accordance with the statutory requirements and best practice
 - How effectively it is doing these things.

3. SELF-ASSESSMENT OF GOOD PRACTICE

- 3.1 Appendix D of the CIPFA guidance, Self-Assessment of Good Practice, was used to consider if the Committee delivers what is expected from it in terms of statutory requirements and the best practice of professional bodies. The Senior Manager Revenues and Risk and the Audit Manager had already addressed these questions in the run-up to the workshop, and the results were presented to the workshop for discussion.
- 3.2 The results of the Self-assessment of Good Practice can be found on the following pages. After identifying any gaps, an action plan to improve compliance was drawn up.

SELF-ASSESSMENT OF GOOD PRACTICE

	Good practice questions	Yes	Partly	No	Evidence/Comments
Audit committee purpose and governance					
1	Does the authority have a dedicated audit committee?	✓			Part 9.2.1 of Gwynedd Council's Constitution states <i>"The Council will appoint an Audit Committee to discharge the functions described in Section 13 of this constitution and in accordance with sections 81-87 of The Measure."</i>
2	Does the audit committee report directly to full council? (Applicable to local government only.)		✓		<p>The Audit Committee reports directly to the Full Council, and is a full committee (i.e. not a sub-committee).</p> <p>The Council's Scheme of Delegation (Part 13 of the Council's Constitution) specifically delegates the duty to approve the authority's statement of its accounts, income, expenditure and balance sheet or its record of its proceeds and payments (as it happens) to the Audit Committee.</p> <p>However, the Audit Committee has not presented an Annual Report to the full Council, despite this requirement being detailed in the Audit Committee's Terms of Reference.</p>
3	Do the terms of reference clearly set out the purpose of the committee in accordance with CIPFA's Position Statement?	✓			Paragraph 1.1 of the Audit Committee's Terms of Reference.
4	Is the role and purpose of the audit committee understood and accepted across the authority?	✓			No evidence to suggest to the contrary.

	Good practice questions	Yes	Partly	No	Evidence/Comments
5	Does the audit committee provide support to the authority in meeting the requirements of good governance?	✓			The Governance Arrangements Assessment Group presents regular reports to the Audit Committee. The Annual Governance Statement is presented to the Audit Committee to be challenged and approved.
6	Are the arrangements to hold the committee to account for its performance operating satisfactorily?			✓	No such formal arrangements have been put in place.
Functions of the committee					
7	Do the committee's terms of reference explicitly address all the core areas identified in CIPFA's Position Statement?				
	<ul style="list-style-type: none"> good governance 	✓			TOR – Section 2.2
	<ul style="list-style-type: none"> assurance framework 	✓			TOR – Section 2.2
Page 115	<ul style="list-style-type: none"> internal audit 	✓			TOR – para. 2.2.5 – 2.2.9 and Section 2.3
	<ul style="list-style-type: none"> external audit 	✓			TOR – Section 2.3
	<ul style="list-style-type: none"> financial reporting 	✓			TOR – Sections 2.1 and 2.4
	<ul style="list-style-type: none"> risk management 	✓			TOR – Section 2.2
	<ul style="list-style-type: none"> value for money or best value 			✓	
	<ul style="list-style-type: none"> counter-fraud and corruption. 		✓		TOR – para.2.2.10 – 2.2.13
8	Is an annual evaluation undertaken to assess whether the committee is fulfilling its terms of reference and that adequate consideration has been given to all core areas?			✓	A formal annual evaluation is not undertaken.

	Good practice questions	Yes	Partly	No	Evidence/Comments
9	<p>Has the audit committee considered the wider areas identified in CIPFA's Position Statement and whether it would be appropriate for the committee to undertake them?</p> <p>These four areas are:</p> <ul style="list-style-type: none"> • Considering governance, risk or control matters at the request of other committees or statutory officers. • Working with local standards committees to support ethical values and reviewing the arrangements to achieve those values. • Reviewing and monitoring treasury management arrangements in accordance with the CIPFA Treasury Management Code of Practice. • Providing oversight of other public reports, such as the annual report. 		✓		<p>The Audit Committee does undertake some of these areas, e.g. reviewing and monitoring treasury management arrangements.</p> <p>However, the Audit Committee has not formally considered whether it should undertake the "wider areas".</p> <p>The Audit Committee does not currently provide oversight of the Annual Report.</p>
Page 116	Where coverage of core areas has been found to be limited, are plans in place to address this?		✓		<p>The core areas where coverage is limited are value for money / best value and proactive fraud work.</p> <p>A report on work undertaken on the National Fraud Initiative will be presented to the Committee in due course.</p>
11	Has the committee maintained its non-advisory role by not taking on any decision-making powers that are not in line with its core purpose?	✓			

	Good practice questions	Yes	Partly	No	Evidence/Comments
Membership and support					
12	<p>Has an effective audit committee structure and composition of the committee been selected?</p> <p>This should include:</p> <ul style="list-style-type: none"> • separation from the executive • an appropriate mix of knowledge and skills among the membership • a size of committee that is not unwieldy • where independent members are used, that they have been appointed using an appropriate process. 	✓			<p>Gwynedd Council's Constitution – Section 9.2</p> <p>The Audit Committee comprises of 18 members and one lay member. The Control Improvement Working Group has been established to deal with areas where the full committee would be unwieldy.</p> <p>Appropriate procedures were followed, including adverts in the press.</p>
13	Does the chair of the committee have appropriate knowledge and skills?	✓			
14	Are arrangements in place to support the committee with briefings and training?		✓		Although incorporated in the TOR – para. 3.1.2 – induction training for new members has not been provided, although any new areas are explained to the Committee in meetings. Training has been provided on Treasury Management issues.
15	Has the membership of the committee been assessed against the core knowledge and skills framework and found to be satisfactory?		✓		A members self-assessment of knowledge and skills has not been undertaken.
16	Does the committee have good working relations with key people and organisations, including external audit, internal audit and the chief financial officer?	✓			There are very good working relationships with these key stakeholders
17	Is adequate secretariat and administrative support to the committee provided?	✓			Yes, in accordance with the Council's arrangements

	Good practice questions	Yes	Partly	No	Evidence/Comments
Effectiveness of the committee					
18	Has the committee obtained feedback on its performance from those interacting with the committee or relying on its work?			✓	This area will be addressed in the Workshop on 31 May 2016.
19	Has the committee evaluated whether and how it is adding value to the organisation?			✓	
20	Does the committee have an action plan to improve any areas of weakness?			✓	

Matters requiring attention

3.3 In considering the results of the Self-assessment of Good Practice, members' views that the following gaps need attention were noted:

Question	Matter requiring attention	Ways of Responding
2	The Committee does not formally submit an annual report to the full Council	The Committee will follow the example of other committees who are already doing this, and learn lessons from them, in order to submit an annual report to the Full Council at the appropriate time of year.
6	Members of the Committee do not currently reflect on their performance.	Committee members will assess their own performance individually, and the Committee as a body, through various means, including Webcasts. This may involve the use of external specialist, if it is felt that this is appropriate and would add value.
7	The Committee's understanding of value for money work	Learning through workshops, seminars etc. about examples from other authorities.
7, 10	To strengthen the proactive consideration given to the issues of prevention of fraud, corruption and bribery.	Developing a programme to present regular reports to the Committee.
9	The Committee has not formally considered if it should undertake the additional areas outlined in the guidelines. Instead, it has done so in an "ad hoc" manner.	Submitting a report to a meeting in 2016/17 giving particular consideration to this. This will include examining what other Councils do.
14	Need to strengthen training for the Committee members. It was noted that training was mandatory for some committees are prepared (e.g. Planning Committee), members felt that the same situation exists for the Audit Committee.	Finance officers will draw up a proposed training programme for members of the Audit Committee, which will include discussions with relevant units of the Corporate Support Department. This training programme will include, as a minimum: <ul style="list-style-type: none"> • Training Gap assessments. • The responsibilities of the Audit Committee, and how this compares with other committees. • Induction sessions for new members on the roles of internal audit and external audit.

4. EVALUATING THE EFFECTIVENESS OF THE AUDIT COMMITTEE

- 4.1 "Appendix E" of the CIFPA guidelines was used to consider if the Audit Committee is discharging its duties in the most effective manner possible. In order to do this the method of scoring as recommended to the Committee at its meeting on 5 May was used, namely to work through the questions in Appendix E and give a score from 1 to 5 based on the following:

Assessment key

- 5 Clear evidence is available from a number of sources that the committee is actively supporting improvements across all aspects of this area. The improvements made are clearly identifiable
 - 4 Clear evidence from some sources that the committee is actively and effectively supporting improvement across some aspects of this area.
 - 3 The committee has had mixed experience in supporting improvement in this area. There is some evidence that demonstrates their impact but there are also significant gaps.
 - 2 There is some evidence that the committee has supported improvements, but the impact of this support is limited.
 - 1 No evidence can be found that the audit committee has supported improvements in this area.
-
- 4.2 There was an opportunity at the workshop for the officers to challenge the proposed scores that were suggested – this was an effective way of stimulating debate and ensuring that appropriate issues had been identified.
- 4.3 The self-assessment by the members of the Audit Committee's effectiveness has been included on the following pages.

Areas where the audit committee can add value by supporting improvement	Examples of how the audit committee can add value and provide evidence of effectiveness	Self-evaluation, examples, areas of strength and weakness	Overall assessment
Promoting the principles of good governance and their application to decision making.	<p>Providing robust review of the AGS and the assurances underpinning it.</p> <p>Working with key members/governors to improve their understanding of the AGS and their contribution to it.</p> <p>Supporting reviews/audits of governance arrangements.</p> <p>Participating in self-assessments of governance arrangements.</p> <p>Working with partner audit committees to review governance arrangements in partnerships.</p>	<p>In general this is good, but there may be scope for greater participation in the self-assessment of governance arrangements.</p> <p>The Committee does not give detailed consideration to partnerships at present.</p>	4
Contributing to the development of an effective control environment.	<p>Monitoring the implementation of recommendations from auditors.</p> <p>Encouraging ownership of the internal control framework by appropriate managers.</p> <p>Raising significant concerns over controls with appropriate senior managers.</p>	<p>There is clear evidence available that the Committee fulfils this role</p>	5
Supporting the establishment of arrangements for the governance of risk and for effective arrangements to manage risks.	<p>Reviewing risk management arrangements and their effectiveness, eg risk management benchmarking.</p> <p>Monitoring improvements.</p> <p>Holding risk owners to account for major/strategic risks</p>	<p>The Committee does not receive the corporate risk register at the moment. There is scope to strengthen the Committee's oversight of the authority's risk management arrangements.</p>	3
Advising on the adequacy of the assurance framework and considering whether assurance is deployed efficiently and effectively.	<p>Specifying its assurance needs, identifying gaps or overlaps in assurance.</p> <p>Seeking to streamline assurance gathering and reporting.</p> <p>Reviewing the effectiveness of assurance providers, eg internal audit, risk management, external audit.</p>	<p>Is generally good, but the Committee does not receive full detail by all joint committees at present</p>	4
Supporting the quality of the internal audit activity, particularly by underpinning its organisational independence	<p>Reviewing the audit charter and functional reporting arrangements.</p> <p>Assessing the effectiveness of internal audit arrangements and supporting improvements</p>	<p>This has been very effective for several years, and the Controls Improvement Working Group is supportive.</p>	5

Areas where the audit committee can add value by supporting improvement	Examples of how the audit committee can add value and provide evidence of effectiveness	Self-evaluation, examples, areas of strength and weakness	Overall assessment
Aiding the achievement of the authority's goals and objectives through helping to ensure appropriate governance, risk, control and assurance arrangements.	Reviewing major projects and programmes to ensure that governance and assurance arrangements are in place. Reviewing the effectiveness of performance management arrangements.	Is generally good, but a gap was noted in the sense that the Committee does not review the project plans and risk registers of large projects as a matter of course	4
Supporting the development of robust arrangements for ensuring value for money.	Ensuring that assurance on value for money arrangements is included in the assurances received by the audit committee. Considering how performance in value for money is evaluated as part of the AGS.	Is generally good, but consideration of value for money could be improved	4
Helping the authority to implement the values of good governance, including effective arrangements for countering fraud and corruption risks.	Reviewing arrangements against the standards set out in CIPFA's <i>Managing the Risk of Fraud (Red Book 2)</i> . Reviewing fraud risks and the effectiveness of the organisation's strategy to address those risks. Assessing the effectiveness of ethical governance arrangements for both staff and governors.	The Committee has not reviewed the arrangements against the recommended standards, and there is scope to strengthen here.	3
Promoting effective public reporting to the authority's stakeholders and local community and measures to improve transparency and accountability.	Improving how the authority discharges its responsibilities for public reporting; for example, better targeting at the audience, plain language. Reviewing whether decision making through partnership organisations remains transparent and publicly accessible and encouraging greater transparency.	The workshop felt that the Committee achieves what it can in this area and could not do more	5

4.4 This gives an average score of 4.1. This will be reported back to the Governance Arrangements Assessment Group, to be considered by the Group in the context of the Self-Assessment of the Council's Governance Arrangements.

Matters requiring attention

4.5 The following are further actions arising from the Self assessment of Effectiveness, and are in addition to those set out in part 3.3 of this report:

Matter requiring attention	Ways of Responding
The Committee does not give detailed consideration to partnerships at present	Research, possibly by a task group, to the partnerships in which the Council is involved.
Details of the Corporate Risk Register	The Committee to receive regular reports detailing the content of the Corporate Risk Register.
Major projects	The Committee to consider accepting project plans and risk registers of major projects where appropriate. Further research will be needed to establish what is needed, and when.
Anti-fraud arrangements	Finance officers to complete an assessment against the appropriate guidelines, and report on them to the Committee

4.6 In addition to the above, the following points were noted during the workshop:

- That representatives of the Council's new financial auditors, Deloitte, had attended the meeting of the Audit Committee on 5 May, and their first impressions were very positive.
- Work continues to be necessary to be clear about the boundary between the role of the Audit Committee and the role of scrutiny committees.
- There is scope to strengthen collaboration between the committees, e.g. when looking at large, strategic projects such as Pont Briwet.
- Concern was expressed about the number of members who attend some meetings of the Committee and had attended the workshop.
- There is scope for the Committee to do more in terms of challenging the performance of the external auditors as well as Internal Audit.

5. RECOMMENDATION

5.1 The Committee is requested to:

- **Receive confirmation by those members who were at the workshop on 31 May that this report is a fair reflection of the discussion held there.**
- **Accept the contents of this report as the basis for an action plan for the further development of the Committee, and to resolve to accept an update to every meeting on progress against these actions.**

Agenda Item 11

COMMITTEE

AUDIT COMMITTEE

DATE

23 JUNE 2016

TITLE

GWYNEDD COUNCIL'S ANNUAL GOVERNANCE STATEMENT FOR 2015/16

PURPOSE OF REPORT

TO PRESENT THE ANNUAL GOVERNANCE STATEMENT (INCORPORATING THE STATUTORY STATEMENT ON INTERNAL CONTROL) FOR 2015/16 TO THE AUDIT COMMITTEE FOR APPROVAL

AUTHOR

DEWI MORGAN, SENIOR MANAGER REVENUES AND RISK

ACTION

TO APPROVE THE STATEMENT SO THAT IT CAN BE SIGNED BY THE COUNCIL LEADER AND THE CHIEF EXECUTIVE

1. INTRODUCTION – WHAT DOES THE AUDIT COMMITTEE NEED TO DO?

1.1 In order fulfil its duties as "those charged with governance", it is necessary for the Audit Committee to:

- **Consider the Draft Annual Governance Statement that appears in the appendix.**
- **Challenge the Senior Manager Revenues and Risk on the "Impact" and "Effectiveness" scores that have been identified, and the narrative that explains the justification for the score.**
- **Consider the action plan contained in the draft Annual Governance Statement.**
- **Approve the Statement, and recommend that the Council Leader and Chief Executive sign it.**

2. BACKGROUND

2.1 There is a statutory requirement for an Annual Governance Statement as a result of:

- The Accounts and Audit (Wales) Regulations 2014, which state:

The relevant body must ensure that there is a sound system of internal control which facilitates the effective exercise of that body's functions and which includes arrangements for the management of risk, and adequate and effective financial management.

The relevant body must conduct a review at least once in a year of the effectiveness of its system of internal control. The findings of the review must be considered by the members of the body meeting as a whole or by a committee.

Following the review, the body or committee must approve a statement on internal control prepared in accordance with proper practices. The relevant body must ensure that the statement accompanies any statement of accounts which it is obliged to prepare.

- CIPFA's Code of Practice on Local Authority Accounting in the United Kingdom (the "SORP")
- CIPFA / SOLACE Framework *Delivering Good Governance in Local Government* and subsequent addenda. A new version of the framework was published during April 2016. During the summer of 2016 the Council will begin the work of reviewing its governance arrangements in the context of the new framework, but the 2015/16 Statement has been drawn up on the basis of the framework that was in force during the year.

3. SELF-ASSESSMENT OF THE EFFECTIVENESS OF THE GOVERNANCE ARRANGEMENTS

3.1 The Audit Committee has a key function in challenging the preparation procedures and the contents of the draft Annual Governance Statement. When signing the Governance Statement, the Chief Executive and Council Leader confirm:

"We have been advised on the implications of the result of the **review of the effectiveness of the governance framework** by the Audit Committee, and that the arrangements **continue to be regarded as fit for purpose in accordance with the governance framework**. The areas already addressed and those to be specifically addressed with new actions planned are outlined below".

3.2 The Annual Governance Statement summarises the results of the governance self-assessment, as updated by the Governance Arrangements Assessment Group, in a statement that tells the People of Gwynedd what our governance framework is, and how well it is working. The members of the Group are the Chief Executive, the Monitoring Officer, the Head of Corporate Support, two Corporate Support Senior Managers and the Senior Manager Revenues and Risk.

3.3 The diagram containing the Impact and Effectiveness scores follow the same format as the 2015 Statement. When approving that statement, the Audit Committee resolved to accept that the definition of "good governance" should be arrangements that place providing for the people of Gwynedd at their centre.

3.4 The Audit Committee needs to satisfy itself that the narrative justifying the scores is a fair reflection of the Council as far as it is aware, based on the information that it has received over the year.

4. THE SCORING PROCEDURES

4.1 The arrangements for setting the Impact and Effectiveness scores for elements of the Council's Governance Framework have been the subject of reports to the last two meetings of the Audit Committee, on 11 February 2016 and 5 May 2016.

4.2 The report to the 11 February meeting presented details of a recent assessment of all elements of the governance framework, including changes in the scores where appropriate. A link to this report is found below:

Report:

<https://democracy.cyngor.gwynedd.gov.uk/documents/s3720/Self-Assessment%20of%20Governance%20Arrangements.pdf>

Appendix:

<https://democracy.cyngor.gwynedd.gov.uk/documents/s3721/Appendix.pdf>

4.3 The meeting of 5 May resolved that the Council would use a 5x5 matrix rather than 10x10 from now on to display its Impact and Effectiveness scores. This was based on a recommendation by the Management Group, and consideration by the Governance Arrangements Assessment Group. The report set out the results of the assessment that was reported in February within the new matrix:

Report:

<https://democracy.cyngor.gwynedd.gov.uk/documents/s4442/Self-Assessment%20of%20Governance%20Arrangements.pdf>

Appendix:

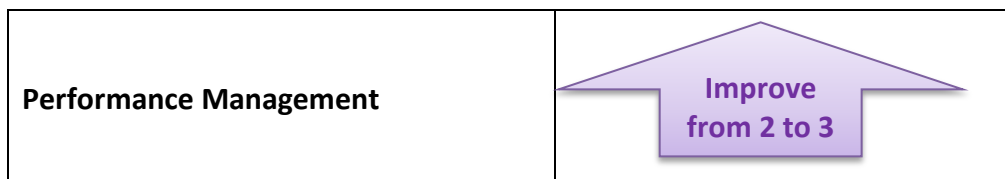
<https://democracy.cyngor.gwynedd.gov.uk/documents/s4443/Appendix.pdf>

Impact Scores

4.4 None of the Impact scores have changed since the presentation to the Audit Committee on 5 May.

Effectiveness Scores

4.5 One Effectiveness score has changed since the previous presentation to the Committee on 5 May, which is an increase in the Performance Management score from 2 to 3 out of 5.



4.6 That reflects the progress that has been made in introducing a new performance management regime across the Council, with business units across the authority now considering if we are measuring the right things.

5. THE COUNCIL'S PRIORITIES

5.1 The result of the changes made during the year since the approval of the 2014/15 Annual Governance Statement is the following changes to the Council's governance priorities:

- The Council's Values has been renamed "The Council's Culture" and has moved from red to orange
- Engagement has moved from red to orange
- Leadership Programme has moved from orange to yellow
- Information Governance has moved from red to orange
- The 'Cyflawni' arrangements has been renamed "Performance Management" and has moved from red to orange
- External Auditor's Annual Letter has been renamed "Response to the External Auditor's Annual Letter" and has moved from orange to yellow
- Standards Committee has moved from yellow to green
- Member Inter-relationships has moved from orange to yellow
- Whistleblowing Code of Practice has moved from yellow to green
- Use of Technology is a new element that is orange
- Asset Management is a new element that is yellow
- Staff Appraisal, Training and Development has been renamed "Workforce Planning" and remains orange.

5.2 Therefore, there are now no Very High Priorities Areas (red).

5.3 The High Priority Areas (orange) are:

- The Council's Culture
- Integrated Public Services
- The Council's Strategic Plan
- Engagement
- Information Governance
- Risk Management Arrangements
- Performance Management
- The Scrutiny Process
- Workforce Planning
- Use of Technology

6. RECOMMENDATION

6.1 The Audit Committee is requested to

- Consider the Draft Annual Governance Statement that appears in the appendix.
- Challenge the Senior Manager Revenues and Risk on the "Impact" and "Effectiveness" scores that have been identified, and the narrative that explains the justification for the score.
- Consider the action plan contained in the draft Annual Governance Statement.
- Approve the Statement, and recommend that the Council Leader and Chief Executive sign it.

ANNUAL GOVERNANCE STATEMENT

This statement meets the requirement to produce a Statement of Internal Control pursuant to Regulation 5 of the Accounts and Audit (Wales) Regulation 2014.

Part 1: SCOPE OF RESPONSIBILITY

Gwynedd Council is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively. Gwynedd Council also has a duty under the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness.

In discharging this overall responsibility, Gwynedd Council is also responsible for putting in place proper arrangements for the governance of its affairs, facilitating the effective exercise of its functions, and which includes arrangements for the management of risk and adequate and effective financial management.

Gwynedd Council has approved and adopted a code of corporate governance, which is consistent with the principles of the CIPFA/Solace Framework *Delivering Good Governance in Local Government*. A copy of the code is available on our website or can be obtained by writing to the Gwynedd Council, Council Offices, Shirehall Street, Caernarfon, Gwynedd LL55 1SH. This statement explains how the Authority has complied with the code and also meets the requirements of regulation 5(5) of the Accounts and Audit (Wales) Regulations 2014 in relation to the publication of a statement on internal control.

Part 2: THE PURPOSE OF THE GOVERNANCE FRAMEWORK

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

The system of internal control is a significant part of the governance framework and is designed to manage risk to a reasonable level rather than to eliminate all risk of failure to achieve policies, aims and objectives; it can therefore only provide reasonable and not absolute assurance of effectiveness. The system of internal control is based on an on-going process designed to identify and prioritise the risks to the achievement of Gwynedd Council's policies, aims and objectives, to evaluate the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively and economically.

The governance framework described above has been in place at Gwynedd Council for the year ended 31 March 2016 and up to the date of approval of the statement of accounts.

Part 3: GOVERNANCE FRAMEWORK

- 3.1 The **Governance Arrangements Assessment Group** keeps a continuous, disciplined overview on matters of governance, raising a wider awareness of them and promoting a wider ownership of the Annual Governance Statement. The Group comprises the Chief Executive, the Monitoring Officer, the Head of Corporate Support, two Corporate Support Senior Managers and the Senior Manager Revenues and Risk.
- 3.2 The Group has identified 33 elements that form Gwynedd Council’s Governance framework and special consideration is given to the effect that each one of these is expected to have as they add public value for the people of Gwynedd. Prior to assessing the effectiveness of these elements, an Impact score was noted for each of the elements to reflect how comparatively large the effect of each one of them will be as they add public value.
- 3.3 During 2015/16, on the recommendation of the Management Group and the Audit Committee, these range of Impact scores was changed. These scores now vary from 1 (little impact) to 5 (very large impact). These scores have been assessed, challenged and confirmed by the Council's Audit Committee and Management Group.
- 3.4 The Council is of the opinion that the elements that have the greatest impact as they enable it to achieve are:

Impact Score of 5 (out of 5):

The Council’s Culture	Having the right culture means that this outweighs everything else that affects our ability to achieve as the principles of good governance would be an integral part of the day to day behaviour of each individual within the organisation.
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Impact Score of 4:

Integrated Public Services	The willingness of public sector bodies, including Gwynedd Council, other neighbouring unitary councils, the Police, the Health Board and others to collaborate in order to deliver public services jointly will have a substantial and visible effect on the People of Gwynedd.
The Council’s Strategic Plan	This is the high level statement that outlines what the Council aims to achieve during the life of the current Council and this ensures that we are clear and open about what we intend to achieve.
Engagement	Clear engagement with the People of Gwynedd, to establish clear communication and to get a true understanding of their needs, is one of the most important elements of the governance arrangements.
Leadership Programme	Leadership sets the standard that every member and employee in the Council follows. Therefore, its impact is great – good Leadership can overcome everything else, whilst poor Leadership can destroy what the Council is trying to achieve. This facilitates the underpinning of the Council’s culture.
Information Governance	Having the right information is essential if the Council is to provide the right services to the right people in the right way. The information that is collected and stored must be current and relevant, not only to comply with the Data Protection Act but also to ensure that the services we provide are those that doing the right things. Good Information Governance is the foundation of good decision making.

Financial Strategy	<p>The Financial Strategy sets the key context for everything the Council does.</p> <p>The financial projections for the Council suggest that substantial savings must be identified in the years to come. The Financial Strategy establishes how we will achieve this and, therefore, it is a very important statement that outlines how the Council will deal with the situation.</p>
Workforce Planning	<p>To ensure that the Council is in a position to provide services that always place the residents of Gwynedd in the centre, we must ensure that we have the right staff in the right place with the right skills. This means that there must be continuous staff training, their performance must be monitored and their talent fostered and developed. Staff training arrangements are an important method of promoting and dissipating Ffordd Gwynedd thinking across the Council and of course it is vitally important that the Council has officers with the skills to carry out their duties.</p>

Impact Score of 3:

Risk Management Arrangements	<p>Our risk management arrangements are an integral part of the Authority's management arrangements. Robust, correct and proportionate risk management arrangements support innovation and do not inhibit it.</p>
The Local Governance Code	<p>The Local Governance Code is the foundation of the Council's governance arrangements. It encompasses a large number of elements which need to be in place to enable the Council to achieve on behalf of the People of Gwynedd.</p>
The Constitution	<p>As the system and rules for the manner in which the Council operates, it is inevitable that the Constitution, by definition, has a significant impact on the way in which the Council achieves on behalf of the people of Gwynedd.</p>
Performance Management	<p>This is the Council's business planning and performance management system. Consequently, the effect of the system on the Council's ability to provide services on behalf of the people of Gwynedd is crucial.</p>
The Scrutiny Procedure	<p>The scrutiny procedure is the process that is in place to ensure that the Council's Cabinet implements its policies in accordance with its pledges and for the benefit of the people of Gwynedd. It is therefore a very important part of the governance framework.</p>
Use of Technology	<p>The effective use of technology is an essential tool to ensure that services are delivered in a way which meets the needs of our residents and does so in a cost-effective way.</p>
Asset Management	<p>Council departments use a wide range of assets as well as its main asset – its workforce – and it is essential that those assets meet the requirements of our residents while ensuring that we do not spend unnecessarily on assets where the cost of providing them is higher than the benefit that is derived from them.</p>

In addition, the following elements received a lower score in terms of their impact on public value:

Element	Impact Score (out of 5)
Member/Officer Relations Members' Code of Conduct Officers' Code of Conduct Audit Committee Anti-fraud and Anti-corruption Policy Response to The External Auditor's Annual Report Internal Audit Procurement Strategy Gwynedd Council Performance Report Equality	2
The Standards Committee Decision Notices Statutory Officers' Protocols Member Inter-relationship Whistleblowing Code of Practice Member Training and Development The Complaints Process Statement of Accounts	1

3.5 The following developments in our governance arrangements were seen during 2015/16, and in the period since 31 March 2016:

April 2015	The Well-being of Future Generations (Wales) Act 2015 becomes law.
July 2015	The Full Council adopts the Strategic Plan 2015-17.
	The Cabinet adopts the Ffordd Gwynedd Strategy.
	The Cabinet adopts the Procurement Strategy.
December 2015	The Full Council, unopposed, agrees to consider specialisms and experience, rather than implementing political balance on committees inflexibly on each occasion.
January 2016	A special meeting of the Audit Committee to consider recommendations and proposals for improvement in the reports of external auditors and regulators. This starts a practice that will happen every 6 months from now on.
	The establishment of a subgroup of Cabinet members, Scrutiny Forum and Audit Committee to consider our Scrutiny arrangements.
February 2016	The Council presents formal comments of the Draft Local Government (Wales) Bill.
March 2016	The Full Council adopts the Strategic Plan 2016-17.
	The Full Council adopts the Financial Strategy, which includes cuts to meet the funding gap, following the “Gwynedd Challenge” engagement exercise.
	The Cabinet approves the Gwynedd Council 2016-20 Strategic Equality Plan.
	The Cabinet adopts the Property Asset Management Plan.
April 2016	The addition of “Use of Technology” and “Asset Management” to the Governance Framework.
	The Council responds to the Audit General for Wales Consultation - <i>The Well-being of Future Generations and what it means for your audit.</i>
May 2016	The Cabinet adopts the Information Technology Strategy (2016-2018).

Part 4: EFFECTIVENESS OF THE GOVERNANCE FRAMEWORK

- 4.1 Gwynedd Council is responsible for undertaking, at least on an annual basis, a review of the effectiveness of its governance framework including the internal management system. The review of effectiveness is steered by the work of the operational manager within the authority who is responsible for developing and maintaining the governance environment, the annual report of the head of internal audit, along with the observations made by the external auditors and other reviewing agencies and inspectorates.
- 4.2 The Governance Arrangement Assessment Group has convened regularly during the year to continuously assess the Council’s governance arrangements, and it has attended to matters that have been brought to its attention that affect the perception of the governance framework. In doing this, it has assessed the effectiveness of each of the 33 elements of the governance framework by undertaking a systematic assessment of each of these elements in turn, with the assistance of a template prepared by the Wales Audit Office that is based on the CIPFA / Solace Framework.
- 4.3 The following are some of the key steps in assessing our Governance Arrangements during 2015/16 and during the period since 31 March 2016:

October 2015	The Governance Arrangement Assessment Group considers the requirements of the WAO Corporate Assessment, and starts to map out the WAO questions to the Council’s governance framework.
	Visits to Isle of Anglesey County Council and Conwy County Borough Council to learn lessons from their corporate governance reviews.
	The Full Council approves the Council's annual performance report.
November 2015	Publication of the Wales Audit Office report <i>Review of the Effectiveness of Scrutiny Arrangements</i> and the publication of the results of a 360° Review of the opinions of members and senior officers within the Council of the effectiveness of scrutiny arrangements within the Council.
December 2015	The Audit Committee considers the Council's risk management arrangements.
January 2016	The Governance Arrangements Assessment Group completes a half-year review of the effectiveness of the governance arrangements.
	The Governance Arrangements Assessment Group reviews the effectiveness of Use of Technology.
February 2016	Presentation of the result of the half-year review to the Audit Committee and the Management Group.
March 2016	Publication of the Wales Audit Office report <i>Financial Resilience Assessment</i> , which confirms the auditors’ opinion that Gwynedd Council is low risk in terms of financial planning, financial control and financial governance.
May 2016	Based on a recommendation by the Management Group, and after consideration by the Governance Arrangements Assessment Group, the Audit Committee agrees to use a 5x5 matrix rather than 10x10 from now on to assess the effectiveness of the governance framework.
	The Governance Arrangements Assessment Group considers a self-assessment of Asset Management.
	The Governance Arrangements Assessment Group considers a self-assessment of Information Governance.

- 4.4 The following have also contributed in undertaking the assessment of the effectiveness of the governance framework during the year:
- Assessments by members and principal officers in developing the “Ffordd Gwynedd” principles, namely, the same common and clear vision for everyone in the Council regarding the corporate culture needed if the people of Gwynedd are to be central in everything that we do.
 - The work of Internal Audit is summarised in the Head of Internal Audit’s Annual Report, submitted to the Audit Committee in May 2016. The report included the following general assurance: **“On the basis of Internal Audit work completed during 2015/16, in my opinion Gwynedd Council has a sound framework of control to manage risks. This assists in providing assurance in the arrangements for ensuring effective and efficient achievement of the Council’s objectives, as the steps taken by the Council during the accounting period to establish and strengthen internal controls and to ensure that recommendations to remedy weaknesses identified by the Internal Audit service have, overall, been satisfactory.”**
 - Consideration of the results of the work of external auditors and regulators, including the Wales Audit Office, Estyn and the Care and Social Services Inspectorate Wales (CSSIW).
- 4.5 A comparative score is used to show the result of the assessment of the effectiveness of elements of the governance framework described above. Like the Impact scores, the range of the Effectiveness score has also been changed this year to being from 1 to 5 instead of from 1 to 10. The Effectiveness scores vary from 1 (very ineffective) to 5 (very effective), and are shown in the following table.
- 4.6 **The result of the self-assessment work described above is that the two elements identified as being the least effective at present are Scrutiny Arrangements and Member Inter-relationships.**

4.7 No element received an Effectiveness Score of 1 out of 5. The table below shows that elements that have received a score of 2 or 3 out of 5, and the reasons for that.

Effectiveness Score of 2 (out of 5):

Element	Assessment of its Effectiveness in assisting us to deliver
The Scrutiny Procedure	<p>During the year an external auditor report was published which noted that in his opinion significant problems remain with the Scrutiny Arrangements, and an internal Council 360° Review has also confirmed that a number of elements within the regime need further attention in order to improve them</p> <p>Scrutiny and challenging of decisions and policies are transparent and objective but there is uncertainty about how effective that is. This will be addressed in the Scrutiny Review commissioned by the Audit Committee in 2016/17 that looks at further honing of the purpose of scrutiny and the value it adds, and more scrutiny before a decision. Some of the proposals of that action plan are already in place with others will be addressed with a view to the scrutiny arrangements after the elections of May 2017.</p>
Member inter-relationship	<p>There is some evidence of tension in the past between members as the new Cabinet arrangements were implemented within the Council and the resulting changes in roles, and there is no evidence to suggest that those tensions have disappeared, with the recent External Auditor report on Scrutiny reinforcing this view. However there are signs that tensions are starting to ease.</p> <p>Tensions are inevitable during times of significant changes and to be expected.</p>

Effectiveness Score of 3 (out of 5):

Element	Assessment of its Effectiveness in assisting us to deliver
The Council's Culture	<p>The Ffordd Gwynedd Strategy now states that one of the Council's key objectives is to place the People of Gwynedd at the centre to everything we do. In reality this also describes the values of the Council – namely anything which is compatible with that objective.</p> <p>Ffordd Gwynedd work has already started in 6 areas within the Council with further substantial work proceeding so that the change in culture can spread throughout the Council, by highlighting to managers what this means to them and their teams.</p> <p>There are now continuous signs that the culture attached to Ffordd Gwynedd are embedded in the conversations that arise within the Council.</p>
Performance Management	<p>In the past, the relatively low Effectiveness Score for Performance Management reflected the inconsistency across the Council. By now, officers and members question continuously if we are measuring the right things.</p> <p>Cabinet members submit performance reports on their areas to Cabinet meetings on a regular basis.</p>

Element	Assessment of its Effectiveness in assisting us to deliver
Integrated Public Services	<p>Work is going ahead at present to respond to the Well-being of Future Generations (Wales) Act 2015. Among these requirements is the need to establish a statutory Public Services Board, which includes local authorities and a number of other bodies. Work has taken place to undertake an assessment of well-being, which is part of the initial work of the Public Services Board</p> <p>In addition, the system review work in the Care area, which includes close collaboration with stakeholders from external bodies, is showing promising signs. Work has taken place to identify schemes that should be commissioned for the future.</p>
The Council's Strategic Plan	<p>The Strategic Plan is an important guidance for the achievement on behalf of the People of Gwynedd. The Wales Audit Office has identified improvements in the way that the Council is providing its services. However, the Council recognises that the nature of the current Plan means that it is not easy to interpret from it what constitutes the core work of the Council. The Plan in its current form is a catalogue of things that need to be changed within the Council and in the Gwynedd area, rather than a business plan for the Authority. Work is ongoing to identify how this can be changed with a view to introducing changes in 2016.</p>
Engagement	<p>During 2015/16, the Gwynedd Challenge, a scheme to discuss the financial position with Gwynedd residents, showed that substantial progress has been made in our Engagement arrangements.</p> <p>The Gwynedd Challenge exercise was extremely successful, attracting a response from over 2,000 Gwynedd residents and enabling the Council to make logical decisions on priorities for the future in light of the views of the people we serve. While there is a need to ensure that we permeate this good practice among all Council departments the score now reflects the improvement seen in this area given the Gwynedd Challenge and the work undertaken in the field of Waste in particular.</p> <p>However, because the Gwynedd Challenge has been given priority in the last year, some parts of the Engagement Strategy have not moved forward as expected.</p>
Information Governance	<p>Despite efforts to improve Information Governance, the Council continues to hold vast amounts of information, and there is a need to continue working to ensure that it does not hold more data than is needed. There are examples of information being used to make effective decisions, but there is room to challenge whether the practice is as good as it could be, and practiced widely across all Council service units. It is expected that the EDRMS project will contribute to a significant improvement in this regard, and the Governance Arrangements Working Group has also commissioned work within individual departments.</p> <p>Research work has shown that there is continuous need to raise awareness on Data Protection principles, and improve attitudes in this area. This work is continuing as part of the Council's Strategic Plan, and is showing progress.</p>

Element	Assessment of its Effectiveness in assisting us to deliver
Risk Management Arrangements	<p>Arrangements are now in place for every department to maintain a departmental risk register and there are also cross-departmental registers in place with supporting protocols. Nevertheless, the permeation of risk management amongst individual business units remains somewhat inconsistent.</p> <p>Also, apart from Health and Safety risks, systems tests show that not all the workforce is aware of the risks that could prevent achievement for the people of Gwynedd and take ownership of them – risk management tends to be seen as a matter for Managers.</p> <p>Substantial work has been undertaken in the field of Emergency Planning and Business Continuity, to better prepare the authority for unforeseen events.</p> <p>Arrangement to deal with risks around Safeguarding Children and Adults continue to receive attention, in order to maintain work done since 2013. Additional work that has been allocated to the Safeguarding Panel during 2015/16 is the “PREVENT” agenda, with regards to radicalisation.</p>
Workforce Planning	<p>Difficulties in filling some senior posts within the Council suggest that there is a need to improve our ability to create progression at least for senior posts. This has been identified as a basis for developing internal talent. Further, there are recruitment difficulties for some posts in certain geographic locations within Gwynedd (e.g. care workers in Meirionnydd).</p> <p>A 360° appraisal procedure for heads, senior managers and some managers has been established, but its development need to continue.</p> <p>In addition to this, a Senior Managers Group has been established and will continue</p>
The Audit Committee	<p>Gwynedd Council’s Audit Committee has been established since 1999 and it has agreed terms of reference.</p> <p>There is evidence that the Audit Committee is very effective in achieving some of the functions that it has undertaken for some time, but its capacity to deal with new responsibilities pursuant the Local Government (Wales) Measure 2011 continue to develop.</p>
Response to the External Auditor’s Annual Letter	<p>Whilst the letter includes constructive criticism, the Council will try to implement the matters raised but sometimes there may be conflict between what the Council feels should be addressed and some matters raised in the letter in terms of the effort required to be given to them and the level of risk they represent. However, these examples are not significant; there were no recommendations in the most recent report, and in general the messages are positive.</p>
Internal Audit	<p>The effectiveness of the Internal Audit system is under continuous review and although the service satisfies the professional standards in accordance with expectation, there is a need to consider further whether it reviews the right things and if it operates in a manner that is compatible with Ffordd Gwynedd. The service’s capacity has decreased significantly since 1 April 2015, down from 10 to 7 full-time officers. It is expected that the adoption of Ffordd Gwynedd principles will ensure the effectiveness of the service will be maintained, but there may be some reduction in the short term.</p>

Element	Assessment of its Effectiveness in assisting us to deliver
Procurement Strategy	<p>A Procurement Project in collaboration with Denbighshire and Flintshire councils has led to a new Procurement Strategy that was adopted by the Cabinet in July 2015.</p> <p>Category Management was introduced during 2015/16. It has already been introduced in the People area, but further progress is needed in other areas.</p>
Member Training and Development	<p>Steps have been taken in the period since the 2012 election to draw up a training programme for members with the Democratic Services leading on the work.</p> <p>Only some members have taken advantage of the Personal Development Interviews that were introduced during 2014/15.</p>
The Complaints Process	<p>The new corporate complaints procedure continues to develop well, and the Service Improvement Officer ensures that we learn lessons from complaints, and avoid repeating mistakes.</p>
Equality	<p>Although an Equality Scheme is in place, there is evidence that awareness of equality is not as rooted as it should be, and that the mentality has not yet spread throughout the Council. For example, there is no evidence to show that the Council is thinking of conducting routinely Equality Impact Assessments when making its decisions.</p> <p>However, an Equality Impact Assessment was undertaken on each of the proposals for cuts that were presented as part of the Gwynedd Challenge.</p>
Use of Technology	<p>Information Technology activities over recent years have focussed on ensuring an appropriate infrastructure in order to guarantee basic support for services.</p> <p>While there are instances where we have been able to use information technology more widely to improve how we deliver services to the residents of Gwynedd, there is no evidence that this is consistent across the authority and that it is happening at the speed that we would like it to happen.</p> <p>The Information Technology Strategy that has been adopted for the forthcoming period seeks to extend the use of technology in order to support the improvement objectives in the Strategic Plan, whilst also improving the ability of services to take advantage of the opportunities to use technology effectively.</p>

The other elements received an effectiveness score of 8 or above:

Element	Effectiveness Score (out of 5)
Financial Strategy Leadership Programme Local Code of Governance Member/Officer Relations Members' Code of Conduct Gwynedd Council Performance Report Standards Committee Whistleblowing Code of Practice Asset Management	4
The Constitution Officers' Code of Conduct Anti-fraud and Anti-corruption Policy Decision Notices Statutory Officers' Protocols Statement of the Accounts	5

We have been advised on the implications of the result of the **review of the effectiveness of the governance framework** by the Audit Committee, and that the arrangements **continue to be regarded as fit for purpose in accordance with the governance framework**. The areas that have already been addressed and those which the Council will address specifically have new on-going action plans and are outlined below.

Part 5: SIGNIFICANT GOVERNANCE ISSUES

In setting the Impact and Effectiveness scores in the diagram below, the issues to be addressed as a matter of priority are displayed, namely those areas that have the greatest impact, but are least effective at the moment

AN ASSESSMENT OF THE KEY ELEMENTS OF THE SYSTEMS AND PROCESSES THAT FORM GWYNEDD COUNCIL'S GOVERNANCE

Impact: How relatively large is the impact when adding public value for the people of Gwynedd?	5		The Council's Culture		
			4		The Council's Strategic Plan
	Workforce Planning				
	Integrated Public Services	Financial Strategy			
	Information Governance				
	Engagement				
	3	The Scrutiny Process	Risk Management Arrangements	Local Code of Governance	The Constitution
			Performance Management	Asset Management	
			Use of Technology		
	2		Response to External Auditor's Annual Report	Gwynedd Council's Performance Report	Officer Code of Conduct
			Audit Committee		
			Internal Audit	Member/Officer Relations	Anti-fraud and Anti-corruption policy
			Procurement Strategy	Members Code of Conduct	
	1	Member Inter-relationships	Member Training and Development	Whistleblowing Code of Practice	Statutory Officer Protocols
			The Complaints Process	The Standards Committee	Decision Notices
				Statement of Accounts	
	1				
	2				
	3				
	4				
	5				
		1			
		2			
		3			
		4			
		5			
			1		
			2		
			3		
			4		
			5		
				1	
				2	
				3	
				4	
				5	

None of the 33 elements are now considered to be issues of very high priority, but many of them are high priority.

Action plans for areas with High Priority are set out below. Where a specific project within the Strategic Plan has been identified as a response, progress will be reported regularly to the Cabinet in the Performance Report of the relevant Cabinet Member.

High Priority

Matter that has been identified	Response Arrangements	Responsibility of whom?
<p>The Council's Culture. There are encouraging signs that the values of giving Gwynedd people central to everything we do are beginning to emerge in staff conversations. Nevertheless, we need to continue the effort of ensuring that everyone is "doing" as well as "saying".</p>	<p>Council Culture will receive attention under the Effective and Efficient Council priority field within the Strategic Plan, namely project C1 – Enabling units to put Ffordd Gwynedd to work.</p> <p>By March 2017, 12 service reviews will have been completed and the Ffordd Gwynedd principles will have been promoted amongst the Council's managers.</p>	<p>Chief Executive</p>
<p>Performance Management. During 2015/16, a new regime was established and Council departments have started to implement the new performance regime by identifying purposes and measures that are consistent with the principles of Ffordd Gwynedd</p>	<p>Will receive attention under the Effective and Efficient Council priority field within the Strategic Plan, namely project C4 – Implementing a performance framework.</p> <p>By the end of March 2017 the framework will be fully operational throughout the Council and there will be assurance that we are measuring and monitoring the appropriate matters.</p>	<p>Head of Corporate Support</p>
<p>The Council's Strategic Plan. There is concern whether all Council staff give due priority to matters that are in the Strategic Plan.</p>	<p>Continuing to refine business planning arrangements of all the Council's business units in order to address the right priorities.</p>	<p>Corporate Support Senior Manager</p>
<p>Workforce Planning. Tests have been conducted in different departments to examine different ways to improve the procedure.</p>	<p>Continue to develop and promulgate the new appraisal process that is based on Ffordd Gwynedd principles.</p>	<p>Head of Corporate Support</p>
<p>Integrated Public Services. We will develop our procedures in order to respond to the requirements of the Welfare of Future Generations Act.</p>	<p>Complete the task of establishing the governance arrangements of the Public Services Board.</p>	<p>Corporate Support Senior Manager</p>

Matter that has been identified	Response Arrangements	Responsibility of whom?
<p>Information Governance. The Council maintains a large amount of data.</p>	<p>Receiving attention under the Effective and Efficient Council priority field within the Strategic Plan, namely projects C7 – Electronic Document and Records Management (EDRMS) and C8 – Information Governance.</p> <p>By the end of March 2017:</p> <ul style="list-style-type: none"> • At least five of the Council’s departments will use the EDRMS system • The Council will have assessed the propriety of our information protection arrangements (including the efficiency of our training arrangements), communicating and introducing a data protection policy for staff, introducing new training arrangements and introducing audit arrangements in order to embed information protection principles throughout the whole establishment. 	<p>Corporate Support Senior Manager</p>
<p>Engagement. The Council’s engagement arrangements are not as good as they should be for the new climate that lies ahead.</p>	<p>Receiving attention under the Effective and Efficient Council priority field within the Strategic Plan, namely project C3 – Engagement.</p> <p>By the end of March 2017, this project will ensure that an Engagement Strategy is implemented that includes a series of activities aimed at improving engagement across the Council.</p>	<p>Chief Executive</p>
<p>The Scrutiny Procedure. Weaknesses have been identified in the scrutiny arrangements and we will develop proposals for focusing on the dialogue between Scrutiny and the Executive, pressure of work within the system, the slow pace and clarity about what is intended to be improved, and the skills and resources for doing so.</p>	<p>Although there is no Strategic Plan project as such, the Audit Committee has set up a task and finish sub-group to address the themes identified.</p> <p>The sub-group works on some elements that need improvement and implemented this year and other changes that will lead to proposals for new scrutiny arrangements to be implemented after the May 2017 election.</p>	<p>Corporate Support Senior Manager</p>

Matter that has been identified	Response Arrangements	Responsibility of whom?
<p>Risk Management Arrangements. The permeation of risk management amongst individual business units is inconsistent and the general perception is that risk management is a hindrance rather than a help in achieving the aims.</p>	<p>Build on the work of ensuring that every department has prepared a risk register on a departmental level and report on it regularly. Continue to support business units to raise awareness of the use of risk management in their day-to-day work in the context of the Ffordd Gwynedd principles.</p>	<p>Senior Manager Revenues and Risk</p>
<p>Use of Technology. The Information Technology Strategy 2016-18 was adopted by the Cabinet on 3 May 2016. When adopting it, the Cabinet noted that IT is a critical tool and enabler when it comes to improving services and reducing the costs of providing services.</p>	<p>Acting in accordance with the programme of work contained in the Information Technology Strategy.</p>	<p>Head of Finance / Senior Manager Information Technology and Business Transformation</p>

In addition to the above, the Council will also review its Governance Framework in relation to the revised CIPFA / Solace Framework *Delivering Good Governance in Local Government*.

Part 6: OPINION

We propose over the coming year to take steps to address the above matters to further enhance our governance arrangements. We are satisfied that these steps will address the need for improvements that were identified in our review of effectiveness and will monitor their implementation and operation as part of our next annual review.

DILWYN O WILLIAMS
CHIEF EXECUTIVE GWYNEDD COUNCIL

Cllr DYFED WYN EDWARDS
LEADER OF GWYNEDD COUNCIL

DATE

DATE