





Brighton & Hove
City Council

Audit & Standards Committee

Title:	Audit & Standards Committee
Date:	25 July 2017
Time:	4.00pm
Venue	Council Chamber, Hove Town Hall
Members:	Councillors: Miller (Chair), Robins (Group Spokesperson), Sykes (Group Spokesperson), Allen, Cobb, Greenbaum, Lewry and Morris Co-opted Members: Diane Bushell and Dr David Horne
Contact:	John Peel Democratic Services Officer 01273 291058 john.peel@brighton-hove.gov.uk
	The Town Hall has facilities for wheelchair users, including lifts and toilets
	An Induction loop operates to enhance sound for anyone wearing a hearing aid or using a transmitter and infra red hearing aids are available for use during the meeting. If you require any further information or assistance, please contact the receptionist on arrival.
	FIRE / EMERGENCY EVACUATION PROCEDURE If the fire alarm sounds continuously, or if you are instructed to do so, you must leave the building by the nearest available exit. You will be directed to the nearest exit by council staff. It is vital that you follow their instructions: <ul style="list-style-type: none">• You should proceed calmly; do not run and do not use the lifts;• Do not stop to collect personal belongings;• Once you are outside, please do not wait immediately next to the building, but move some distance away and await further instructions; and• Do not re-enter the building until told that it is safe to do so.

Democratic Services: Audit & Standards Committee

Monitoring Officer	Executive Director	Councillor Miller (Chair)	Democratic Services Officer
---------------------------	---------------------------	----------------------------------	------------------------------------

OFFICERS

Councillor Allen
Councillor Morris
Councillor Robins
Dr David Horne
Diane Bushell
Officers
Officers

Councillor Cobb
Councillor Lewry
Councillor Sykes
Councillor Greenbaum
Officers
Officers
Officers

Public Speaker	Public Speaker
-----------------------	-----------------------

Press

Public Seating



Public Seating



AGENDA

1 PROCEDURAL BUSINESS

(a) **Declaration of Substitutes:** Where Councillors are unable to attend a meeting, a substitute Member from the same Political Group may attend, speak and vote in their place for that meeting.

(b) **Declarations of Interest:**

- (a) Disclosable pecuniary interests;
- (b) Any other interests required to be registered under the local code;
- (c) Any other general interest as a result of which a decision on the matter might reasonably be regarded as affecting you or a partner more than a majority of other people or businesses in the ward/s affected by the decision.

In each case, you need to declare

- (i) the item on the agenda the interest relates to;
- (ii) the nature of the interest; and
- (iii) whether it is a disclosable pecuniary interest or some other interest.

If unsure, Members should seek advice from the committee lawyer or administrator preferably before the meeting.

(c) **Exclusion of Press and Public:** To consider whether, in view of the nature of the business to be transacted, or the nature of the proceedings, the press and public should be excluded from the meeting when any of the following items are under consideration.

NOTE: *Any item appearing in Part Two of the Agenda states in its heading the category under which the information disclosed in the report is exempt from disclosure and therefore not available to the public.*

A list and description of the exempt categories is available for public inspection at Brighton and Hove Town Halls.

2 MINUTES & COMMITTEE ACTION LOG

1 - 12

To consider the minutes of the meeting held on 7 March 2017 (copy attached).

3 CHAIR'S COMMUNICATIONS

AUDIT & STANDARDS COMMITTEE

4 CALL OVER

- (a) Items (7-15) will be read out at the meeting and Members invited to reserve the items for consideration.
- (b) Those items not reserved will be taken as having been received and the reports' recommendations agreed.

5 PUBLIC INVOLVEMENT

To consider the following matters raised by members of the public:

- (a) **Petitions:** to receive any petitions presented to the full council or at the meeting itself;
- (b) **Written Questions:** to receive any questions submitted by the due date of 12 noon on the 17 July 2017;
- (c) **Deputations:** to receive any deputations submitted by the due date of 12 noon on the 17 July 2017.

6 MEMBER INVOLVEMENT

To consider the following matters raised by councillors:

- (a) **Petitions:** to receive any petitions submitted to the full Council or at the meeting itself;
- (b) **Written Questions:** to consider any written questions;
- (c) **Letters:** to consider any letters;
- (d) **Notices of Motion:** to consider any Notices of Motion referred from Council or submitted directly to the Committee.

7 STRATEGIC RISK FOCUS: SR2 FINANCIAL OUTLOOK; SR26 ORGANISATIONAL CAPACITY; AND SR32 HEALTH & SAFETY ASSURANCE

13 - 32

Report of the Executive Lead Officer Strategy, Governance & Law

Contact Officer: Jackie Algar Tel: 01273 291273

Ward Affected: All Wards

8 AUDITED STATEMENT OF ACCOUNTS 2016/17

To Follow

Report of the Executive Director, Finance & Resources

Contact Officer: Nigel Manvell Tel: 01273 293104

Ward Affected: All Wards

AUDIT & STANDARDS COMMITTEE

- 9 ERNST & YOUNG AUDIT RESULTS REPORT 2016/17** **To Follow**
Report of Ernst & Young
- 10 ANNUAL INTERNAL AUDIT REPORT 2016/17** **33 - 58**
Report of the Executive Director, Finance & Resources
Contact Officer: Graham Liddell Tel: 01273 291323
Ward Affected: All Wards
- 11 CODE OF CORPORATE GOVERNANCE** **59 - 66**
Report of the Executive Director, Finance & Resources
Contact Officer: Graham Liddell Tel: 01273 291323
Ward Affected: All Wards
- 12 ANNUAL GOVERNANCE STATEMENT 2016/17** **67 - 104**
Report of the Executive Lead Officer Strategy, Governance and Law and Monitoring Officer
Contact Officer: Jackie Algar Tel: 01273 291273
Ward Affected: All Wards
- 13 ANNUAL REVIEW OF AUDIT & STANDARDS COMMITTEE** **105 - 108**
Report of the Executive Director, Finance & Resources
Contact Officer: Graham Liddell Tel: 01273 291323
Ward Affected: All Wards
- 14 STANDARDS UPDATE** **109 - 120**
Report of the Head of Law & Monitoring Officer
Contact Officer: Victoria Simpson Tel: 01273 294687
Ward Affected: All Wards
- 15 HUMAN RESOURCES & ORGANISATIONAL DEVELOPMENT ANNUAL REPORT** **121 - 212**
Report of the Executive Director, Finance & Resources
Contact Officer: Janice Percy Tel: 01273 291636
Ward Affected: All Wards
- 16 ITEMS REFERRED FOR COUNCIL**
To consider items to be submitted to the 2 November 2017 Council meeting for information.

In accordance with Procedure Rule 24.3a, the Committee may determine that any item is to be included in its report to Council. In addition,

AUDIT & STANDARDS COMMITTEE

any Group may specify one further item to be included by notifying the Chief Executive no later than 10am on the eighth working day before the Council meeting at which the report is to be made, or if the Committee meeting take place after this deadline, immediately at the conclusion of the Committee meeting

17 ITEMS FOR THE NEXT MEETING

The City Council actively welcomes members of the public and the press to attend its meetings and holds as many of its meetings as possible in public. Provision is also made on the agendas for public questions to committees and details of how questions can be raised can be found on the website and/or on agendas for the meetings.

The closing date for receipt of public questions and deputations for the next meeting is 12 noon on the fifth working day before the meeting.

Agendas and minutes are published on the council's website www.brighton-hove.gov.uk. Agendas are available to view five working days prior to the meeting date.

Electronic agendas can also be accessed through our meetings app available through www.moderngov.co.uk

Meeting papers can be provided, on request, in large print, in Braille, on audio tape or on disc, or translated into any other language as requested.

For further details and general enquiries about this meeting contact John Peel, (01273 291058, email john.peel@brighton-hove.gov.uk) or email democratic.services@brighton-hove.gov.uk.

Date of Publication - Monday, 17 July 2017

BRIGHTON & HOVE CITY COUNCIL

AUDIT & STANDARDS COMMITTEE

4.00pm 7 MARCH 2017

HOVE TOWN HALL, COUNCIL CHAMBER

MINUTES

Present: Councillors A Norman (Chair) Chapman, Cobb, Druitt, Morris, Robins (Group Spokesperson), Sykes (Group Spokesperson) and Taylor

PART ONE

71 PROCEDURAL BUSINESS

71a Declarations of substitutes

71.1 There were none.

71b Declarations of interests

71.2 There were none

71c Exclusion of the press and public

71.3 In accordance with Section 100A of the Local Government Act 1972 ("the Act"), the Committee considered whether the public should be excluded from the meeting during consideration of any item of business on the grounds that it is likely in view of the business to be transacted or the nature of the proceedings, that if members of the public were present during it, there would be disclosure to them of confidential information as defined in Section 100A (3) of the Act.

71.4 **RESOLVED** - That the public are not be excluded from the meeting.

72 MINUTES AND COMMITTEE ACTION LOG

72.1 **RESOLVED** – That the minutes of the previous meeting held on 10 January 2017 be approved and signed as the correct record.

73 CALL OVER

73.1 The following items on the agenda were reserved for discussion:

- Risk Management Strategy Annual Progress Report 2016/17
- Strategic Risk Focus: SR15 Keeping Children Safe from Harm and Abuse: SR17 School Places Planning and SR24 Welfare Reform

- Ernst & Young: February 2017 External Audit Progress Report
- Internal Audit Plan 2017/18
- Internal Audit and Corporate Fraud Progress Report
- Council Policies Considered by the Audit & Standards Committee

73.2 The Democratic Services Officer confirmed that the items listed above had been reserved for discussion and that the following reports on the agenda with the recommendations therein had been approved and adopted:

- Standards Update

74 PUBLIC INVOLVEMENT

74.1 There were none.

75 MEMBER INVOLVEMENT

75.1 There were none.

76 RISK MANAGEMENT STRATEGY ANNUAL PROGRESS REPORT 2016 -17

76.1 The Committee considered a report of the Executive Director, Finance & Resources detailing progress made against the Risk Management Strategy 2014-17, specifically the outcome work on the Strategy during 2016/17.

76.2 Diane Bushell noted that the business framework was due to launch imminently and asked for confirmation of a specific date if that was known and enquired if risk management would form part of the content of that framework.

76.3 The Executive Director, Finance & Resources answered that the business framework would be launched next week for management tiers 1-4 and alongside the performance management framework. Risk management would be specifically referenced in the framework.

76.4 **RESOLVED-** That the Committee notes Appendix 1 which provides a summary of progress made in 2016/17.

77 STRATEGIC RISK FOCUS: SR15 KEEPING CHILDREN SAFE FROM HARM AND ABUSE; SR17 SCHOOL PLACES PLANNING; AND SR24 WELFARE REFORM

77.1 The Executive Director, Families, Children & Learning provided a verbal update and answered Members questions for SR15: Keeping Children Safe from Harm and Abuse and SR17: School Places Planning.

77.2 Councillor Sykes asked for the Executive Director, Families, Children & Learning views on the recent reductions made as part of Budget Council and the likely impact upon management controls, strategies and the first line of defence.

77.3 The Executive Director, Families, Children & Learning replied that financial resources were declining and that had led to a necessary review of structures to continue a high

standard of provision. Furthermore, in his statutory role, he had the mechanism to formally raise the issue of resource with the Chief Executive if he felt that budget allocations meant that the council's duty to keep children safe from harm was compromised which he had not done.

- 77.4 Councillor Taylor asked what was meant by the terms 'two front doors'. In addition, Councillor Taylor noted that progress against the risk actions was currently 75% and asked if this would reach 100% to the deadline of 31 March 2017.
- 77.5 The Executive Director, Families, Children & Learning clarified that 'front doors' was a summary of the entrance into support services. The first front door was the multi-agency safeguarding hub including the police, NHS and community staff. Cases were assessed and responded to on the basis of shared, secured information. The second front door was a reference to the Early Help Hub that would soon be joining up with the multi-agency safeguarding hub. The Risk Management Lead clarified that 75% of risk actions were complete as at the review date of 19 January 2017 and would have progressed since that point.
- 77.6 Diane Bushell noted that BHCC had historically higher levels of Children in Care (CiC) and on Child Protection Plans (CPP) than other authorities. Diane added that last time Pinaki had presented on this item he had stated that numbers in both these areas had declined. Diane asked if that decline had continued and furthermore, asked why children in poverty were no longer listed in the strategic risk document.
- 77.7 The Executive Director, Families, Children & Learning answered that levels of CiC had increased and the reason for that was a rise in unaccompanied asylum seekers into the City, a bilateral agreement with Kent to become responsible for some of their unaccompanied asylum seekers (although they continued to be based in Kent) and a certain number given refuge in co-ordination with central government. The Executive Director, Families, Children & Learning noted that Brighton & Hove was a city of sanctuary and decisions were made in accordance with that status. He added that excluding the above, the number of CiC would have declined. The level of children with CPP had continued to decline and was now below some surrounding authorities. In relation to Child Poverty being listed as a strategic risk indicator, the Executive Director, Families, Children & Learning clarified that it had been removed because it showed only a symptom and not the cause. Levels of child poverty were still collected and plans for continuing reduction were in place.
- 77.8 In relation to the potential new secondary school site, Councillor Sykes noted that there had been lengthy delays to the process of identification and securing a site and asked if alternative options were in place should negotiations fall through.
- 77.9 The Executive Director, Families, Children & Learning stated that identifying a site for a secondary school was a more complicated process than for primary schools as a larger site was required and temporary expansion was not feasible. The Executive Director, Families, Children & Learning added that due to changes in government legislation, local authorities were no longer permitted to open new schools and therefore the council were working with four partners on the development of a free school that in itself had complications. In relation to alternative options, the Executive Director, Families, Children & Learning stated that whilst the council had a statutory duty to provide

sufficient school places, there was no duty to provide places based on proximity and therefore, school capacity could be increased across the city.

- 77.10 Councillor Taylor stated that the council had recognised there would be bulge in population for some time and asked why solutions for pressures on school places had not been adequately anticipated.
- 77.11 The Executive Director, Families, Children & Learning responded that the council had firstly considered whether existing school structures could be expanded to accommodate for the increase in secondary school children and it was eventually found that the cost of doing such would be beyond the financial capability of the council. The issue of a new school was also complex as it was a decision made by the Department for Education (DfE) and not one the council could make. Furthermore, sufficient resource to invest in a new school had only recently become available and had not been at the time the initial assessment of options had been made.
- 77.12 The Revenues & Benefits Manager and Head of Revenue & Benefits provided a verbal update and answered Members questions for SR24: Welfare Reform.
- 77.13 Diane Bushell asked for details of the financial impact of the benefit cap upon the council and the predicted financial impact of universal credit.
- 77.14 The Revenues & Benefits Manager stated he was uncertain as to a precise figure as the changes also encompassed a housing benefit cap. Locally there had been a £1.3 million reduction in housing benefit payments and the discretionary housing payment fund provided by central government was £776,000 during the current financial year and would rise to £1.3 million in 2017/18. Officers were working actively and in a multitude of ways with the people and families affected to provide a package of support. In relation to universal credit, ground work for its implementation was being undertaken with other agencies to ensure a co-ordinated approach. It was as yet too early to anticipate what the risk to the council was.
- 77.15 Councillor Sykes enquired as to the challenges to the service in decreases to the Council Tax Reduction (CTR) scheme and Discretionary Support funds.
- 77.16 The Revenues & Benefits Manager answered that other sources of funding and new revenue streams were being pursued and officers were reviewing the programme on a year on year basis. The council worked closely with other agencies to ensure that the resources that were available, particularly in the third sector were used as effectively as they could be.
- 77.17 **RESOLVED-** That the Audit & Standards Committee notes the Strategic Risk Assessment Report at Appendix 1.

78 ERNST & YOUNG: FEBRUARY 2017 EXTERNAL AUDIT PROGRESS REPORT

- 78.1 The Committee considered a report of Ernst & Young that provided an update on the progress against their 2016/17 audit and updated Members on any recent developments or changes to accounting requirements.

78.2 Councillor Morris asked if the investigation into the objection made in relation to Lender Option Borrower Option (LOBO) loans remained confidential.

78.3 The Assistant Manager- Ernst & Young confirmed that there were strict processes in place in relation to such types of investigation and the issue remained confidential.

78.4 **RESOLVED-** That the Committee note the report.

79 INTERNAL AUDIT PLAN 2017/18

79.1 The Committee considered a report of the Executive Director, Finance & Resources that requested approval of the Internal Audit Plan 2017/18.

79.2 Councillor Druitt enquired as to the reason behind the drop in planned audit days for finance.

79.3 The Head of Internal Audit stated that financial systems had regularly achieved reasonable assurance and the audit team were satisfied the number of days allocated were sufficient for a detailed audit. Furthermore, this would give an increase in audit days for areas with limited assurance.

79.1 Councillor Sykes asked if assurance could be provided that 1038 audit days would be sufficient to deliver effective audit work. In addition, Councillor Sykes asked if contract management audits would overlap with the work of the Procurement team and noted the significant overspend on healthcare equipment that may benefit from audit focus.

79.4 The Head of Internal Audit replied that he could give assurance that 1,038 days would be sufficient and that figure only dealt with specific audit days and there was provision of a further 254 days for support, advice and liaison with senior management and recommendation tracking. The Audit team would consider healthcare equipment as part of reviews of integration with health services. He also noted that in relation to contract management, Budget Council had allocated further resource that would provide opportunity for increased examination.

79.5 **RESOVLED-** That the Committee approves the Internal Audit Plan including the Internal Audit Charter and Quality Assurance Improvement Programme.

80 INTERNAL AUDIT AND CORPORATE FRAUD PROGRESS REPORT

80.1 The Committee considered a report of the Executive Director, Finance & Resources that summarised the progress made against the Internal Audit and Corporate Fraud Plan, the key issues identified and action being taken and progress made by management in implementing audit recommendations.

80.2 Dr Horne noted that a submission to the National Fraud Initiative (NFI) had returned data match reports of more than 21,000 potential cases of which 2,300 had been recommended for further investigation. Dr Horne asked how those matches were selected and by whom.

- 80.3 The Head of Internal Audit clarified that the matches were identified by the Cabinet Office.
- 80.4 Dr Horne asked if the matches were identified in the Corporate Fraud Plan.
- 80.5 The Head of Internal Audit answered that the matches were separated into categories and the Corporate Fraud team acted as co-ordinators in assigning to specific departments to investigate further.
- 80.6 In relation to council dwellings that were the subject of fraudulent activity, Councillor Sykes asked whether the 20 properties returned to stock was a year to date figure and for a reminder of why right to buy applications were occasionally rejected.
- 80.7 The Head of Internal Audit clarified that the figure was as year to date. The review of right to buy applications by the corporate fraud team related primarily to our duties in respect of money laundering. It included an assessment of whether an individual had sufficient funds to purchase properties under the right to buy scheme and was used as a deterrent to reduce loan shark activity.
- 80.8 Diane Bushell noted that on every occasion the report was considered by the committee, there were a certain number with no progress against the audit recommendations. Diane asked if this was a failure on the part of senior managers to effectively implement the recommendations or if the systems used were overly-onerous and complex.
- 80.9 The Executive Director, Finance & Resource stated that a key emphasis of work going forward would be a clearer system for accountability of senior managers to ensure that the council's control environment was kept to a high standard. This comprised a tool called Data Insight that would track performance across a series of KPIs, thereby increasing accountability. One of the KPIs was to be progress in relation to audit reports. The Head of Internal Audit supplemented that whilst it was understood that the systems used were user-friendly, an individual member of the audit team was assigned to heads of service and were available to assist with any problems using the software.
- 80.10 In relation to the update requested by the committee in relation information governance issues, Diane Bushell enquired as to the expected timescale to resolve the issues, specifically buildings and system access and enquired as to any obstacles preventing progress.
- 80.11 The Chief Technology Officer answered that there would always a number of assurance related issues, however the emphasis was on improving and minimising risk. The most recent audits had acknowledged that work had been done in relation to systems and buildings access and there had been improvements in data management. The focus going forward would be on shifting the organisational culture and harmonising standards, and this would be aided by the introduction of clearer information governance framework.
- 80.12 Diane Bushell asked when it was estimated that the assurance rating would improve from limited.

- 80.13 The Chief Technology Officer stated that the aim was to improve to reasonable assurance at the point of the next audit. The Executive Director, Finance & Resources supplemented that there had been a heavy increase in scrutiny in this area at senior management level and the Information Governance Board had started to speed the work up, and it 'had teeth' through its accountability to the Executive Leadership Team (ELT).
- 80.14 The Chair asked if any problems were anticipated in relation to the Orbis arrangement.
- 80.1 The Chief Technology Officer stated that joining the Orbis service would create a level of complexity and was being reviewed as part of the change work. There would be an opportunity to run tests in order to gain assurance that systems were resilient. Furthermore, the Orbis arrangement would give the opportunity to increase capacity and bring the benefit of collective knowledge.
- 80.15 Dr Horne asked what assurance could be given on improvements in relation to controls when staff left the organisation and asked when the work of the modernisation project was expected to be completed.
- 80.2 The Chief Technology Officer answered that effective controls on staff leavers were related to confirmation of termination of employment by the Payroll team and senior management completing the necessary actions when this occurred. In relation to the former, the Payroll and ICT processes were being streamlined to enhance performance and the latter action would be assisted by the recent introduction of new information governance policies. This specific modernisation project was expected to reach completion within one year.
- 80.16 **RESOLVED-** That the Audit & Standards Committee notes the report.

81 COUNCIL POLICIES CONSIDERED BY THE AUDIT & STANDARDS COMMITTEE

- 81.1 The Committee considered a report that set out the results of a review conducted into the functions discharged by the committee.
- 81.2 Councillor Druitt noted that the committee had responsibility for the approval of the council's whistleblowing policy yet he had carried out an internet search that appeared the policy was last agreed in 2009.
- 81.3 The Executive Director, Finance & Resources clarified that the policy had been approved since 2009 but a database issue meant that searches on both the internet and council's intranet meant that the results returned were sometimes out of date or unrelated to the search term. Improvements to the council's database would be the subjected of a targeted piece of work.
- 81.4 Dr Horne stated that he did not believe the committee were receiving information that the other committees with responsibility for functions such as the approval of the Information Governance Strategy were being effectively reviewed and agreed. Dr Horne stated his belief that the Audit & Standards Committee should have a wider range of responsibility.

81.5 The Lawyer stated changes to the committees Terms of Reference and wider constitutional changes was a long process but could form part of the next review of committee effectiveness. The Democratic Services Officer added that the Terms of Reference for each committee could only be amended by Policy, Resources & Growth Committee and approved by Full Council. Any potential amendments would also have to be submitted to the Constitutional Working Group for consideration.

81.6 Diane Bushell stated that the committee no longer received Targeted Budget Management (TBM) reports which made it harder to review financial practices.

81.7 The Head of Internal Audit stated that it had been acknowledged that the TBM report received a large amount of scrutiny from other boards and committees and often was quite out of date at the point it was referred to this committee for information. The Audit & Standards Committee was scheduled to carry out a 'deep dive' for TBM in September 2017. The Head of Internal Audit suggested that this could be reconsidered as part of the next effectiveness review.

81.8 RESOLVED-

- 1) That the Committee notes that there are no proposed amendments to the council's:
 - whistleblowing policy
 - policy and guidance in relation to the Regulation of Investigatory Powers Act 2000
 - counter fraud strategy and framework
- 2) That the Committee notes that changes to the council's accounting policies for presenting financial information will be considered by the Audit & Standards Committee as part of the approval of the statement of accounts.
- 3) That the Committee notes the progress being made to assess the completeness and effectiveness of policies that inform the council's Corporate Risk Assurance Framework.

82 STANDARDS UPDATE

82.1 **RESOLVED-** That Members note the report.

83 ITEMS REFERRED FOR COUNCIL

83.1 No items were referred to Full Council for information.

The meeting concluded at 6.40pm

Signed

Chair

Dated this

day of

Action Log: A&S Meeting 7 March 2017

Agenda Item		Owner	Actions	Status
	79: Internal Audit Plan and Corporate Fraud Progress Report	Graham Liddell	Cllr Druitt asked for a breakdown of audit days per strategic area	Completed

11

Subject:	Strategic Risk Focus SR2 Financial Outlook for the Council; SR25 Organisational Capacity as a result of Change; and SR32 Health & Safety Assurance.		
Date of Meeting:	25 July 2017		
Report of:	Executive Lead Officer, Strategy, Governance & Law		
Contact Officer:	Name:	Jackie Algar	Tel: 01273 291273
	Email:	Jackie.algar@brighton-hove.gov.uk	
Ward(s) affected:	All		

FOR GENERAL RELEASE**1. PURPOSE OF REPORT AND POLICY CONTEXT**

- 1.1 The Audit & Standards Committee has a role to monitor and form an opinion on the effectiveness of risk management and internal control. As part of discharging this role it reviews specific Strategic Risks contained in the Strategic Risk Register (SRR). The SRR was last formally updated by the Executive Leadership Team (ELT) on 31 May 2017; and will be reviewed as scheduled on 26 July 2017. However, this report includes a new risk, SR32 Health & Safety Assurance, which has been approved outside of the regular quarterly SRR in order to provide timely information to Committee.
- 1.2 The Audit & Standards Committee have agreed to focus on at least two Strategic Risks at each of their meetings.
- 1.3 The Strategic Risk Assessment Report (Appendix 1) provides further detail on the actions taken (existing controls) and future actions to manage each strategic risk.
- 1.4 The officers available to answer Members' questions on the Strategic Risks reported to this committee meeting will be the Executive Director, Finance & Resources, supported by the Executive Director, Neighbourhoods, Communities and Housing and the Assistant Director Property & Design.

2. RECOMMENDATIONS:

- 2.1 That the Audit & Standards Committee notes the Strategic Risk Assessment Report at Appendix 1.
- 2.2 That, having considered Appendix 1 and any clarification comments from officers, the Committee makes any recommendations it considers appropriate to the relevant council body.

3. CONTEXT/ BACKGROUND INFORMATION

- 3.1 The SRR details the current prioritised risks which may affect achievement of the council's Corporate Plan purpose, including in relation to its work with other organisations across the city. It is reviewed and agreed by ELT quarterly, and influences service activity within Directorates and Directorates' individual Directorate Risk Registers (DRRs). There is a risk reporting timetable for the SRR and DRRs which is adhered to on a quarterly basis, however the risk management process is responsive to incidents emerging in between scheduled reviews.
- 3.2 The risk management process prioritises risks consistently by assigning risk scores 1-5 that the risk will occur, and the potential impact (denoted by 'I') if it should occur. These L and I scores are multiplied; the higher the result of L x I, the greater the risk e.g.L4xI4 which denotes a Likelihood score of 4 (Likely) x Impact score of 4 (Major). A colour coded system, similar to the traffic light system, is used to distinguish risks that require intervention.
- 3.3 Each strategic risk has a unique identifying number and is prefixed by 'SR' representing that it is a strategic risk. Each is recorded on the Integrated Risk Manager (IRM) software system, part of the Interplan package. Appendix 1 gives details of existing controls and future actions to manage each strategic risk.

4. FINANCIAL & OTHER IMPLICATIONS:

- 4.1 For each Strategic Risk there is detail of the actions already in place ('Existing Controls') or work to be done as part of business or project plans ('Risk Actions') to address the strategic risk. Potentially these may have significant financial implications for the authority either directly or indirectly. The associated financial risks are considered during the Targeted Budget Management process and the development of the Medium Term Financial Strategy.

Finance Officer Consulted: James Hengeveld

Date: 06/07/2017

LEGAL IMPLICATIONS:

- 4.2 Members of the Committee are entitled to any information, data and other evidence which enable them to reach an informed view as to whether the council's strategic risks are being adequately managed; and to make recommendations based on their conclusions.

Lawyer Consulted: Victoria Simpson

Date: 06/07/2017

SUPPORTING DOCUMENTATION

Appendices:

1. Strategic Risk Assessment Report SR2; SR25; and SR32.

Documents in Members' Rooms

1. None.

Background Documents

1. Strategic Risk Register Review, May 2017 as published on Wave (council intranet) in June 2017.

Brighton & Hove City Council

Strategic Risk Focus Item for Audit & Standards Committee 25
July 2017:

SR2 Financial Outlook;

→ SR25 Organisational Capacity as a result of Change; and
SR32 Health & Safety Assurance

Print Date: 06-Jul-2017

06-Jul-2017

Initial Rating

		IMPACT				
		Insignificant (1)	Minor (2)	Moderate (3)	Major (4)	Catastrophic (5)
LIKELIHOOD	Almost Certain (5)	0	0	0	1	0
	Likely (4)	0	0	0	0	0
	Possible (3)	0	0	0	2	0
	Unlikely (2)	0	0	0	0	0
	Almost Impossible (1)	0	0	0	0	0

Revised Rating

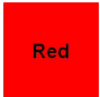

		IMPACT				
		Insignificant (1)	Minor (2)	Moderate (3)	Major (4)	Catastrophic (5)
LIKELIHOOD	Almost Certain (5)	0	0	0	0	0
	Likely (4)	0	0	0	0	0
	Possible (3)	0	0	1	1	0
	Unlikely (2)	0	0	0	1	0
	Almost Impossible (1)	0	0	0	0	0

1 - 3
Low
Monitor periodically

4 - 7
Moderate
Monitor if the risk levels increase

8 - 14
Significant
Review and ensure effective controls

15 - 25
High
Immediate action required & need to escalate to the management level above

Risk Code	Risk	Responsible Officer	Risk Category	Last Reviewed	Issue Type	Risk Treatment	Initial Rating	Revised Rating	Future Rating	Eff. of Control
SR2	Financial Outlook for the Council	Executive Director of Finance & Resources Head of Integrated Financial Management & Planning Deputy Chief Finance Officer Head of Performance, Improvement & Programmes	BHCC Strategic Risk, Economic / Financial	20/10/16	Threat	Treat	 L5 x I4	 L3 x I4		Revised: Adequate

Causes

Link to Corporate Plan: Outcome ' A modern council: Providing open civic leadership and effective public services'

Reductions in central government funding may continue well beyond the current Comprehensive Spending Review period through to 2020. The changes to local government funding introduced in 2013/14 transferred greater risks to the council, particularly in relation to Business Rate valuation appeals. There is a cumulative impact of reductions in government funding to other public agencies in the city. The biggest impact is from demand-led services such as social care and homelessness.

Implementing the current budget strategy and devising budget plans for 2016/17 is challenging and there is increased uncertainty until HM Govt re-focuses on local government funding further to speculation that Business Rates Retention has been shelved.

Potential Consequence(s)

The council will need to continue robust financial planning in a highly complex environment. Failure to do so could impact on financial resilience and mean that outcomes for residents are not optimised.

Existing Controls

First Line of Defence: Management Controls

- * Ongoing review of the adequacy of risk provisions and reserves to support the budget strategy and to ensure financial resilience;
- * Financial recovery planning introduced in May 2016 for demand-led services to help mitigate an in-year forecast overspend in 2016/17 (recovery plans already in place for 2017/18 for Families, Children & Learning).
- * Consultation and engagement for budget proposals completed.
- * Revenue and capital budgets approved by Full Council 23 Feb 2017 - balanced budget.
- * TBM zero analysis undertaken.

Second Line of Defence: Corporate Oversight

- * Modernisation portfolio including VfM projects/programmes reviewed by cross-party Member Oversight group;
- * Close alignment of Corporate Plan and Medium Term Financial Strategy (MTFS) and service and financial planning;
- * Ongoing review by Policy, Resources & Growth (PR&G) Committee of the MTFS assumptions, the impact of legislative changes; cost and demand pressures; savings programmes; and income and grant assumptions;
- * Adoption by PR&G of 4-year service & financial planning approach which sets out what services propose to Stop, Retain and redesign, or commercialise;
- * Close monitoring by PR&G of council tax, business rates and other income and regular updating of forecasts;
- * Continued review by PR&G of the adequacy of savings programmes alongside other budget measures to support the budget strategy;
- * Ongoing review and challenge of value for money including Member review, benchmarking, and external audit review;
- * The cross-party Budget Review Group reviews monthly TBM performance, including financial recovery plans.

Third Line of Defence: Independent Assurance

- * Annual review by Ernst Young (external auditors) of VfM arrangements leading to an opinion in the annual audit report.
- * Internal audit reviews of budget management arrangements.

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
* Development of skills and knowledge and/or investment to support options appraisal of new delivery models (action);	Executive Director of Finance & Resources	100	01/04/17	01/09/16	01/04/17

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
<p>Comments: Business Canvass Model review completed in November 2017 - service managers needing support identified. ELT to decide next steps as part of wider Modernisation Programme. Mgmt development programme in preparation - will include commercial element to be provided by CIPFA.</p>					
<p>Corporate Modernisation Delivery Board board includes monitoring and RAG rating of critical VFM and other savings programmes that support the council's current and medium term financial position. Reporting links to TBM reporting which also monitors savings delivery.</p>	<p>Head of Performance, Improvement & Programmes</p>	<p>90</p>	<p>31/03/20</p>	<p>01/04/15</p>	<p>31/03/20</p>
<p>Comments: Corporate Modernisation governance arrangements in place. Internal audit provided 'reasonable assurance' in May 2016. Corporate Modernisation Delivery Board to continue to provide support and challenge to project/programme managers and Senior Responsible Owners.</p> <p>All budget figures reported link to TBM process. Modernisation arrangements fully integrated within Service & Finance Planning. Finance guidance has been drafted for project/programme managers to ensure consistency of figures being reported to accurately calculate 'return on investment'. 10% savings at risk according to TBM2 for 17/18</p>					
<p>Schedule regular sessions at City Management Board to enable Finance Directors to review city wide impact & opportunities for joint budget planning</p>	<p>Executive Director of Finance & Resources</p>	<p>60</p>	<p>31/03/18</p>	<p>04/10/16</p>	<p>31/03/18</p>
<p>Comments: Exec Director, F&R chairs new Finance & Performance Board to drive integration of social care (finance, commissioning, data). Clear programme of work now emerging. FD group re-calibrated - social care aside, first area of focus is neighbourhoods and enforcement.</p>					

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
SR 2 Risk Action: Continue to monitor impact of health sector reforms and local savings strategies.	Deputy Chief Finance Officer	75	31/03/18	01/04/15	31/03/18
<p>Comments: Attending monthly Finance & Performance Better Care Fund Board chaired by the CCG. S75 Agreement has been signed and is in place (April 2016). Pool Manager has reverted to the CCG Director of Finance from April 2016. Reporting on pool performance will be to F&P Board and the BCF Programme Board on a monthly basis. Recovery plans and corrective measures will be proposed where necessary. Other discussions with the CCG regarding funding have been undertaken by the DAS resulting in £1.3m additional Better Care Funding and additional S75 risk funding in 2015/16. More recently working with CCG to integrate social care and health budgets - co-chair Finance & Performance Board.</p>					
SR 2 Risk Action: Delivery of value for money programme financial and non-financial benefits as part of the Modernisation Programme	Deputy Chief Finance Officer	100	31/03/17	01/04/15	31/03/17
<p>Comments: Regular monitoring of performance against target is submitted to CMDDB. Member Oversight Group meets quarterly to focus on each area of the Modernisation Programme including VFM programmes.. All VFM programmes have appropriate project and programme management resources in place. Detailed implementation plans are in place. Regular monitoring will be through monthly TBM reports to DMT's, ELT, Budget Review Group, and PR&G (5 times per year). The TBM position indicates continued underlying pressures across social care budgets which are impacting on achievement of VFM targets in 2016/17 and later years. Pressures on demand-led budgets have been recognised in setting the 2016/17 budget with over £11m of Service Pressure funding provided. A Financial Recovery Plan approach has been adopted for 2016/17 to ensure early consideration and planning to mitigate against in-year forecast risks, including savings/VFM risks.</p>					
SR 2 Risk Action: Devise and implement Corporate Plan & MTFS service and financial planning timetable and process.	Deputy Chief Finance Officer	100	31/07/16	01/05/15	31/07/16

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
<p>Comments: 4-year Integrated Service & Financial Plans have now been developed and considered by Full Council including approval of the 2016/17 savings programme. An MTFS update will be undertaken in Summer 2016 to complement a Corporate Plan refresh. Early planning discussions have been held between Finance and the ED Finance & Resources (May 16) and these will continue through to development of a PR&G report to 14 July meeting which will set out a refreshed MTFS and a recommended financial planning approach for setting the 2017/18 budget. This will include a high level refresh of the 4-Year Integrated Service & Financial Plans.</p>					
<p>SR 2 Risk Action: Meet Targeted Budget Management (TBM) reporting timetable and identify risk mitigation and corrective action where necessary</p>	<p>Deputy Chief Finance Officer</p>	<p>100</p>	<p>31/03/17</p>	<p>01/04/15</p>	<p>31/03/17</p>
<p>Comments: 2016/17 TBM Timetable produced and agreed. TBM Month 2 will be the first reporting period for 2016/17 to 9 June PR&G. ELT have considered an early draft and a discussion was held at CMT (11 May) to consider the approach to addressing forecast overspend risks. CMT agreed to the development of Financial Recovery Plans for ELT consideration on 8 June. As last year, TBM reports will continue to be reported to the cross-party Budget Review Group (BRG) to ensure additional member oversight of the financial position. TBM reporting will identify risk mitigation and corrective action for overspending areas. All savings programmes will also be monitored (including key VFM programmes) through TBM. A review of the financial accountability regime is being undertaken by the ED F&R to consider an escalation process for continued overspending or underachievement of savings.</p>					
<p>SR 2 Risk Action: Regular MTFS updates of the City Council's projected financial position for future years</p>	<p>Head of Integrated Financial Management & Planning</p>	<p>100</p>	<p>31/03/17</p>	<p>01/04/15</p>	<p>31/03/17</p>

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
<p>Comments: MTFS 2015/16-2019/2020 updated and approved by P&R and Full Council in March 2015. 4-year. An updated MTFS was provided to 9 July P&R titled 'Corporate Plan & MTFS 2015 - 2019: Budget Planning and Resource Update 2016/17'. 4-year Service & Financial Plans were considered by P&R and Full Council for the 2016/17 budget process and approved a £20m savings programme for 2016/17 and around £58m savings over 4-years toward meeting the £68m gap over the period. The approved 2016/17 budget also included over £11m service pressure funding together with £20m investment funding (for Restructure & Redundancy, Modernisation, 4 year plans and CFDA) and £3m risk provisions to support and ensure delivery of the budget and savings targets. The budget and 4-year plan therefore identifies clear plans and opportunities for managing the financial situation over the next 4 years. Potential changes to Local Government Finance are being closely monitored including 100% Business Rate Retention, Attendance Allowance transfer, 2017 Business Rate revaluation, etc.</p>					

Risk Code	Risk	Responsible Officer	Risk Category	Last Reviewed	Issue Type	Risk Treatment	Initial Rating	Revised Rating	Future Rating	Eff. of Control
SR25	Organisational Capacity as a Result of Change	Executive Director of Finance & Resources Head of Human Resources & Organisational Development	BHCC Strategic Risk, Professional / Managerial	18/01/17	Threat	Treat	Amber L3 x I4	Amber L3 x I3		Revised: Uncertain

Causes

Link to Corporate Plan: Outcome ' A modern council: Providing open civic leadership and effective public services'
 Loss of resilience of organisation due to pace of change, reduction in staff numbers, changing staff and loss of knowledge and history.
 Expectations over the services that the council is able to provide and they way in which they are provided.

Potential Consequence(s)

- * Capacity to undertake change work to design high quality services is lost
- * Negative impact on fulfilment of statutory duties
- * Partnership working becomes more fragile as a result of personnel change
- * Personal resilience tested by increased workloads leading to potential stress and sickness
- * Difficulty of recruiting staff to key posts as a consequence of the rapidly increasing costs of living in the city

Existing Controls

First Line of Defence Management Control:

1. New Director of NCH is bringing the Neighbourhoods agenda forward – this includes the potential for delivering services in different ways, including by extending use of Digital.
2. Management capacity and capability will be enhanced by new Behaviour Framework and Management Development Programme
3. Adverse operating conditions are identified, and plans are being created to mitigate these.
4. 'Better Brighton & Hove' think tank is being set up to deliver greater capacity for research and policy development.
5. HROD activity to be pulled together into single 'People Strategy' to ensure staff-related initiatives are better co-ordinated.
6. Business Planning process including Directorate Plans applies delivery of Corporate Plan to each service area
7. Some statutory Performance Indicators (PIs) are Key PIs and are reported regularly to ELT, quarterly or annually.
8. Other Management Information for example from the annual Staff Survey highlighting areas for focus.
9. HR Business Partners support DMT to monitor staff absence & welfare including managers' compliance with. regular 1 to 1s, return to work interviews and record keeping on PIER. This include regular data insight reports bi-annually.
10. HR policies and arrangements in place to address concerns of both management and staff, e.g. Occupational Health Referral newly procured with provider operational across Orbis partners; whistle-blowing; and PDP guidance for managers
11. HR & OD organised consultative groups developed a council Behavioural Framework approved by ELT in November 2016. This sets expectations of standards of behaviour and performance
12. HR Business Partners assist DMTs to determine any necessary interventions to improve service capacity

Second Line of Defence Corporate Oversight:

ELT and City Management Board exchange details of working arrangements and changes to key personnel across organisations

ELT tasked with taking stronger cross-City leadership role, e.g. with universities and the health sector.

Emerging actions following Budget Stress Testing exercise

Third Line of Defence Independent Assurance:

None

Reason for Uncertain Status of Effectiveness of Controls

Management to ascertain impact on services following outcome of 2017/18 budget round.

Where resources have been reduced, management to identify the validity and strength of key controls.

Formal assurances to be sought from these areas over the ability to maintain and operate the controls.

Material concerns to be reported by Internal Audit to Audit & Standards Committee.

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
'Better Brighton & Hove' think tank is being set up to deliver greater capacity for research and policy development.	Executive Lead Officer Strategy, Governance and Law	50	31/03/18	04/07/17	31/03/18
Business case has been developed to pilot First Care Solutions as a pro-active absence management solution which has shown results and is in use at Surrey; and East Sussex Councils	Head of Human Resources & Organisational Development	60	31/03/18	01/02/17	31/03/18
<p>Comments: Full business case will be submitted to CMBD for approval in April 2017 with options for a a full council service role out or a targeted approach to test the model in terms of staff attendance and cost efficiency. Unions have been consulted and have raised some questions that are being worked through ahead of the case presentation.</p>					
<p>Full business case agreed at CMBD and approved at PRG. Contract signed in July. Need to highlight the benefits for staff of OH approach linked to wellbeing. Monitoring of sick stats once in place to assess impact but one clear benefot will be the improvement to management information.</p>					
Corporate services now integrating into Orbis partnership following conclusion of Inter Authority Agreement in May 2017.	Executive Director of Finance & Resources	50	01/04/18	13/10/16	01/04/18
HR & OD developing management development programme, including commissioning of Digital First training, to enhance capacity of first 4 tiers of staff	Head of Human Resources & Organisational Development	75	31/03/18	02/01/17	31/03/18

27

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
<p>Comments: Project Manager recruited and will commence 30 Jan 17. Membership of CEB to provide qulaiyt resource for training materials that can be tailored to BHCC and learning and development activity managed via the councils learning management system.</p>					
<p>First module completed and further modules planned to March 18.</p>					
<p>HR working with others to develop a people strategy taking into account organisational needs and informed by Corporate Plan refresh and Medium Term Financial Plan</p>	<p>Head of Human Resources & Organisational Development</p>	<p>50</p>	<p>31/03/18</p>	<p>01/04/16</p>	<p>31/03/18</p>
<p>Comments: Current work on People Strategy identification is ongoing and will be prepared for Policy & Resources and Growth (PR&G) Committee in April 18. Draft strategy scope is available to be informed by refresh of corporate plan to 2020, the outputs of the budget scrutiny process and further informed by EFLG assessment report and workforce planning activity.</p>					

Risk Code	Risk	Responsible Officer	Risk Category	Last Reviewed	Issue Type	Risk Treatment	Initial Rating	Revised Rating	Future Rating	Eff. of Control
SR32	Health & Safety Assurance	Executive Director of Finance & Resources Head of Health and Safety	BHCC Strategic Risk		Threat	Treat	Amber L3 x 14	Amber L2 x 14		Revised: Adequate

Causes

To ensure that the council meets the requirements of law and controls the likelihood and impact of risks which have potential to cause harm to residents, visitors and stakeholders there must be robust oversight of arrangements in delivering services and procuring goods to meet health and safety legislation and other regulatory requirements. This is challenged by reducing resources, increasing demands and changes to our operating environment.

Potential Consequence(s)

- * Actual and potential harm
- * Custodial sentences for duty holders
- * Fines and litigation
- * Resources wasted
- * Decisions made are challenged
- * Increased costs of rectifying mistakes
- * Financial stability of organisation compromised
- * Reputational damage

Existing Controls

First Line of Defence: Management Controls

- * Health & Safety policy which sets out roles, responsibility and arrangements
- * Access to competent advice (Health & Safety team) including investigation of all incidents
- * Safety management framework - Team Safety
- * H&S Training core programme
- * Fire Risk Assessments (FRAs) in place on all council buildings and tracked on database

Second Line of Defence - Corporate Oversight

- * Corporate H&S Committee
- * Data insight on managers' health and safety checklists reported annual at ELT and DMT
- * H&S audit programme
- * Housing, Fire, Health & Safety Board meets regularly includes representation from East Sussex Fire & Rescue Service, the council's health & safety, Communications and Building Control Teams alongside housing managers
- * Community Initiatives Partnership (CIP) involving council, voluntary sector, health sector
- * H&S representation at Risk Management Steering Group/Safety Advisory Group/Major Incident Support Team (MIST)

Third Line of Defence: Independent Assurance

- * Health & Safety Executive (HSE) - last HSE visit as part of National Waste Initiatives at Depot in 2016 resulted in minor recommendations which were actioned
- * East Sussex Fire & Rescue Service (ESFRS) Regulatory Reform (Fire Safety) Order - ESFRS undertake citywide audits according to a prioritised programme which includes a range of council buildings. No inspections of council buildings have led to the need for enforcement action
- * Internal Audit
- * CQC/Ofsted

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
All housing blocks have had fire safety checks by council surveyors, a number of these jointly with ESFRS	Assistant Director Housing	90	07/07/17	16/06/17	07/07/17

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
Continue Community Initiative Partnership agreed actions - meetings quarterly to review progress. Annual report each June will detail activity	Head of Health and Safety	50	30/03/18	03/04/17	30/03/18
Contribute to Department for Education (DfE) on-line survey of construction of schools premises returned by the council 30/6/17	Assistant Director - Property & Design	100	30/06/17	16/06/17	30/06/17
Independent survey to be commissioned to double check council housing buildings aimed to provide tenants with extra assurance, communications will be provided ahead of the survey to each tenant	Assistant Director Housing	10	01/09/17	05/07/17	01/09/17
Property & Design team check of cladding on all non housing buildings in the operational portfolio, eg. civic officers, historic (museums and libraries) , social care, schools, sports pavilions etc. and the non-operational commercial portfolio	Assistant Director - Property & Design	20	16/08/17	05/07/17	16/08/17

06-Jul-2017

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
Provide information to the DCLG review of Fire Safety in response to the Grenfell Tower fire	Assistant Director Housing	100	30/06/17	16/06/17	30/06/17

Subject:	Annual Internal Audit Report 2016/17		
Date of Meeting:	25 July 2017		
Report of:	Head of Internal Audit		
Contact Officer:	Name:	Graham Liddell	Tel: 01273 291323
	Email:	Graham.liddell@brighton-hove.gov.uk	
Ward(s) affected:	All		

FOR GENERAL RELEASE

1. PURPOSE OF REPORT AND POLICY CONTEXT

1.1 The Internal Audit annual report sets out:

- the Head of Internal Audit's opinion on:
 - the overall adequacy and effectiveness of the council's framework of governance, risk management and control for the year-ended 31 March 2017
 - whether the council's arrangements continue to be fit for purpose in accordance with Delivering Good Governance in Local Government Framework 2016 published by CIPFA/SOLACE
- a summary of the results of internal audit work for the year
- the Head of Internal Audit's assessment of effectiveness of internal audit including conformance with UK Public Sector Internal Audit Standards and actions to make further improvements to the internal audit function.

2. RECOMMENDATIONS

2.1 That the Committee notes that the Head of Internal Audit has given reasonable assurance on:

- the overall adequacy and effectiveness of the council's framework of governance, risk management and control for the year-ended 31 March 2017
- that the council's arrangements continue to be fit for purpose in accordance with Delivering Good Governance in Local Government Framework 2016 published by CIPFA/SOLACE.

2.2 That the Committee notes the council has an effective internal audit function which has achieved some notable successes in 2016/17.

2.3 That the Committee notes that opportunities to strengthen the function further have been identified and will be implemented as part of Orbis IA.

2.4 That the Committee considers the implications of the Annual Audit Report for the Annual Governance Statement.

3. CONTEXT/ BACKGROUND INFORMATION

3.1 The Accounts and Audit Regulations (England) 2015 require local authorities to undertake an effective internal audit to evaluate the effectiveness of risk management, control and governance processes taking into account public sector internal auditing standards or guidance.

3.2 As part of these requirements the Head of Internal Audit is required to:

- give an opinion on the control environment
- conduct an annual review of the effectiveness of the internal audit function and have the findings considered by a committee. This can be a self-assessment, provided that an external review is carried out at least every five years. For Brighton & Hove City Council an external review is required for 2017/18.

4. ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS

4.1 The Head of Internal Audit's opinion is set out in the Internal Audit Annual Report (see appendix 1). This states that in the opinion of the Head of Internal Audit reasonable assurance can be provided:

- on the overall adequacy and effectiveness of the council's framework of governance, risk management and control for the year-ended 31 March 2017
- that the council's arrangements continue to be fit for purpose in accordance with Delivering Good Governance in Local Government Framework 2016 published by CIPFA/SOLACE.

4.2 This judgment has been based on the effectiveness of core financial systems, good governance principles being in place, the council delivering a challenging budget and the council's objectives being largely on track.

4.3 The report identifies key challenges which have been included in the draft Annual Governance Statement:

- risks from continued financial challenges, especially school balances
- the risk that reduced capacity will compromise effectiveness of internal controls
- ensuring the robustness of our arrangements to keep data secure
- addressing variable contract management practices.

4.4 At the same time as delivering its own efficiency savings of £64k (9.8%), Internal Audit has achieved some notable successes in 2016/17 including:

- delivering 95% of the audit plan (91% in 2015/16) with 90% of recommendations implemented (88% in 2014/15)
 - supporting the council to
 - develop a corporate risk assurance framework,
 - address new and emerging risks such as changes to the General Data Protection Regulations
 - recover council assets and cash
 - improving further customer satisfaction
 - being shortlisted and winning awards in Brighton & Hove and across the Orbis partnership.
- 4.5 The Head of Internal Audit has carried out a self-assessment of the effectiveness of Internal Audit. This has concluded that for 2016/17 Internal Audit delivered its Quality Assurance Improvement Plan (QAIP) and conformed with International Standards for the Professional Practice of Internal Auditing.
- 4.6 For 2017/18 the function is being formally delivered in partnership with East Sussex County Council and Surrey County Council as part of Orbis IA:
- The 2017/18 QAIP for Brighton & Hove will be integrated within Orbis IA.
 - An external review covering the audit function for all three councils is planned for 2017/18.

5. COMMUNITY ENGAGEMENT & CONSULTATION

- 5.1 The annual report has been prepared by the Head of Internal Audit and informed by audit and corporate fraud work carried out during the year which has included extensive engagement with officers and members.

6. CONCLUSION

- 6.1 The council has an effective internal audit function which has achieved some notable successes in 2016/17. Opportunities to strengthen the function further have been identified and will be implemented as part of Orbis IA.
- 6.2 The Head of Internal Audit has concluded that reasonable assurance can be provided:
- on the overall adequacy and effectiveness of the council's framework of governance, risk management and control for the year-ended 31 March 2017
 - that the council's arrangements continue to be fit for purpose in accordance with Delivering Good Governance in Local Government Framework 2016 published by CIPFA/SOLACE.

6.3 The council has set out in the annual governance statement how it plans to address the areas for improvement.

7. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

7.1 The areas for service development within this review can be managed within the budget of the Internal Audit service for 2017/18.

Finance Officer Consulted: James Hengeveld

Date: 06/07/17

Legal Implications:

7.2 The statutory provisions are set out in the Accounts and Audit Regulations 2015. These regulations require the findings of the effectiveness review to be considered by full Council or a council committee. In the case of Brighton & Hove, the Audit & Standards Committee is the designated committee for this purpose. Following the review, the Committee must approve an annual governance statement prepared in accordance with proper practices in relation to internal control.

Lawyer Consulted: Victoria Simpson

Date: 23/6/17

Equalities Implications:

7.3 None.

Sustainability Implications:

7.4 None

Any Other Significant Implications:

7.5 None

SUPPORTING DOCUMENTATION

Appendices:

1. Internal Audit Annual Report

Documents in Members' Rooms

1. None

Background Documents

1. None

Internal Audit Annual Report

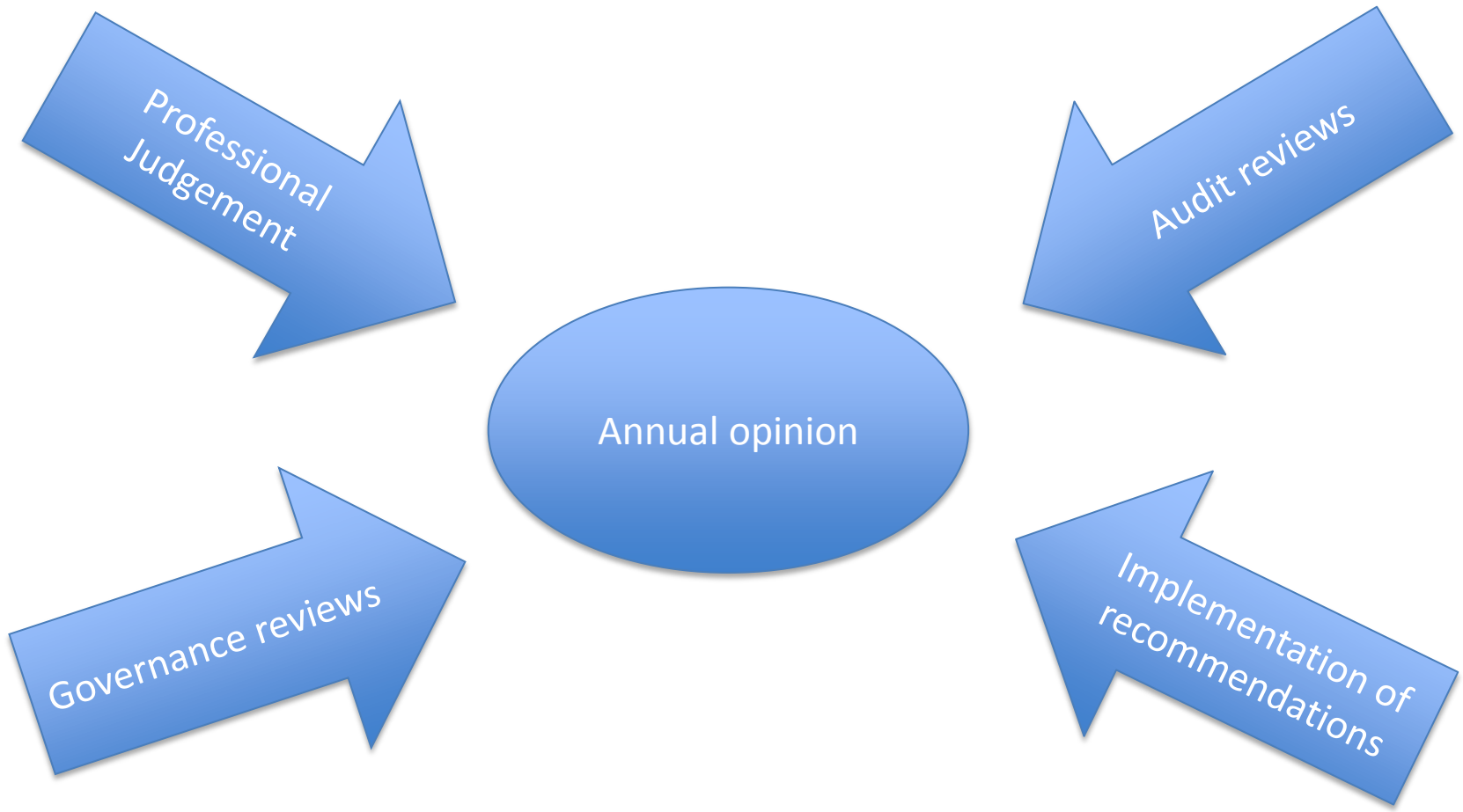
Brighton & Hove City Council
2016/17

Head of Internal Audit Opinion

Brighton & Hove City Council 2016/17

38

Basis of opinion



Summary findings



- Good Governance principles in place
- Core financial systems effective
- Challenging budget delivered
- Objectives largely on track

- Risk from continued financial challenges, especially school balances.
- Risk that reduced capacity will compromise effectiveness of internal controls

- Robustness of our arrangements to keep our data secure.
- Variable contract management practices (general fund, capital and housing)

In my opinion, reasonable assurance can be provided:

- on the overall adequacy and effectiveness of the council's framework of governance, risk management and control for the year-ended 31 March 2017
- that the arrangements continue to be fit for purpose in accordance with Delivering Good Governance in Local Government Framework 2016 published by CIPFA/SOLACE.

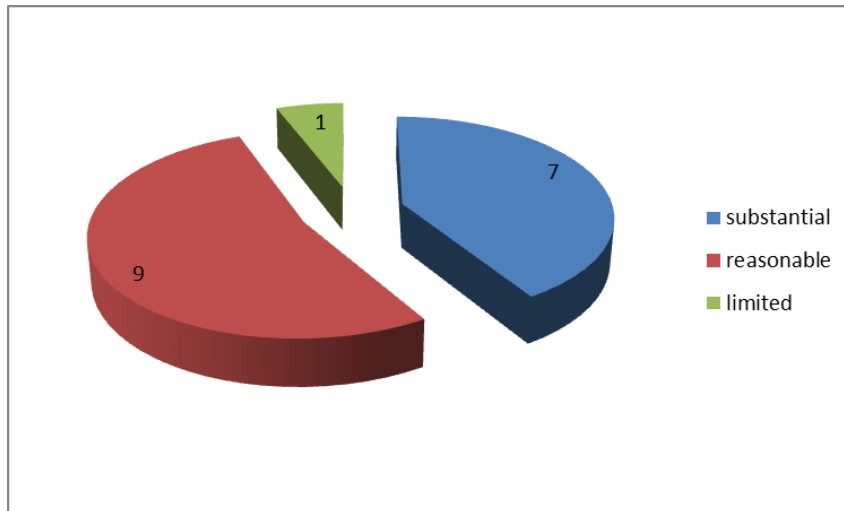
Graham Liddell
Head of Internal Audit
July 2017

Audit reviews

Brighton & Hove City Council 2016/17

42

Assurance levels

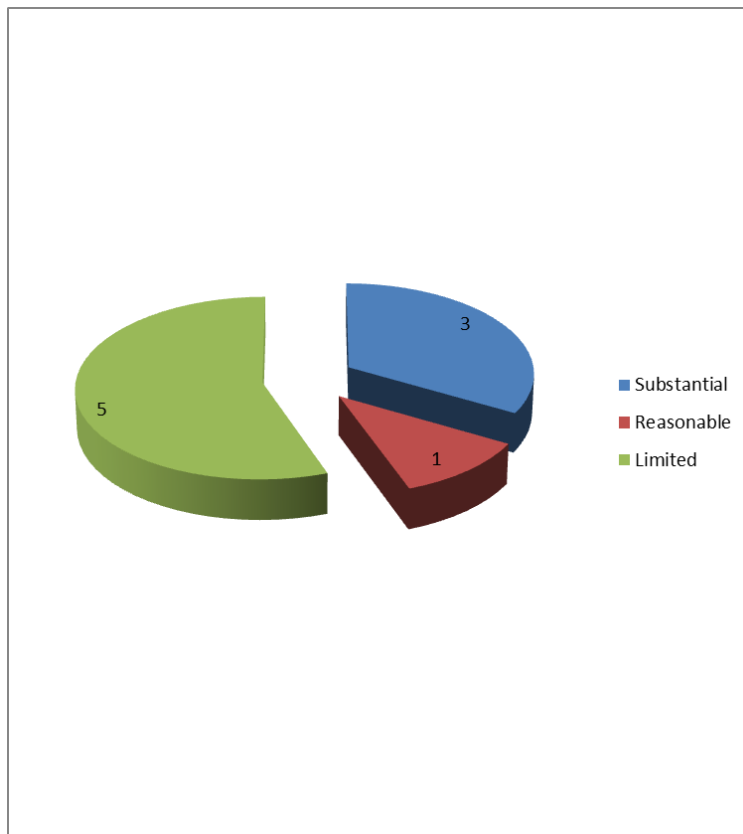


Key findings

- The finance team have continued to secure savings and maintain robust financial systems. This forms the basis for our 'reasonable assurance' opinion for the control environment as a whole.
- Payments made with purchasing cards relatively small* but compliance levels with internal controls over their use need to be improved.

* £500k per year

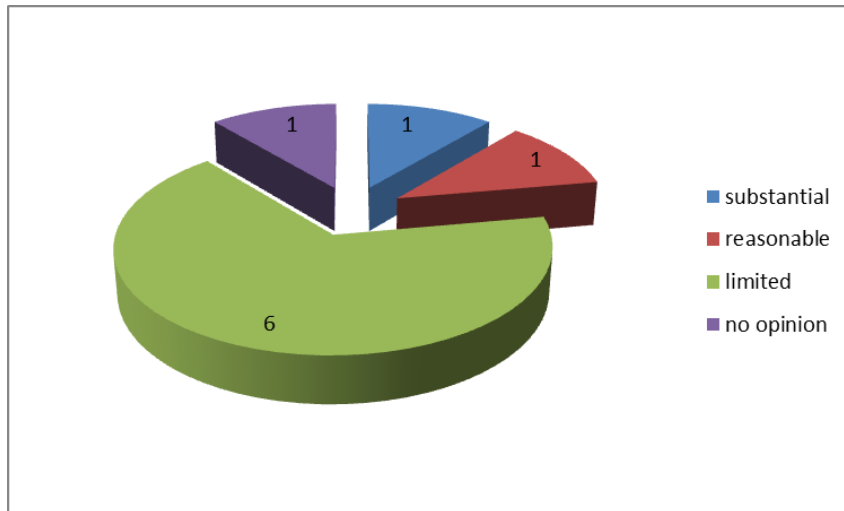
Assurance levels



Key findings

- Robust arrangements for housing rent collection and new builds.
- Contract management arrangements are being strengthened but further improvements are required.
- Significant issues identified relating to housing repairs, emergency accommodation and the management of voids for temporary accommodation.

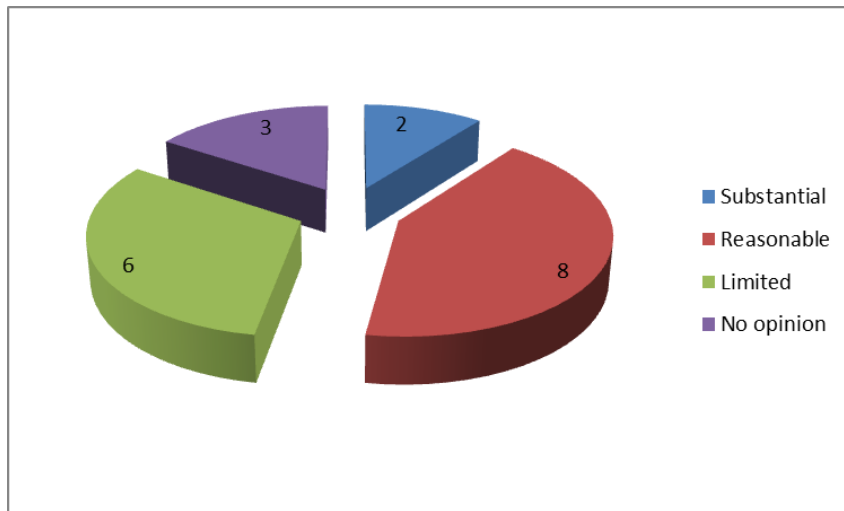
Assurance levels



Key findings

- The council did not fall victim to the well publicised international 'ransomware' attacks that paralysed other parts of the public sector.
- However, the council remains at risk and needs to ensure that it:
 - identifies and addresses its cyber-security risks
 - improves controls in vulnerable areas
 - develops a robust action plan to ensure that the council complies with new data protection regulations (which come into effect in May 2018)

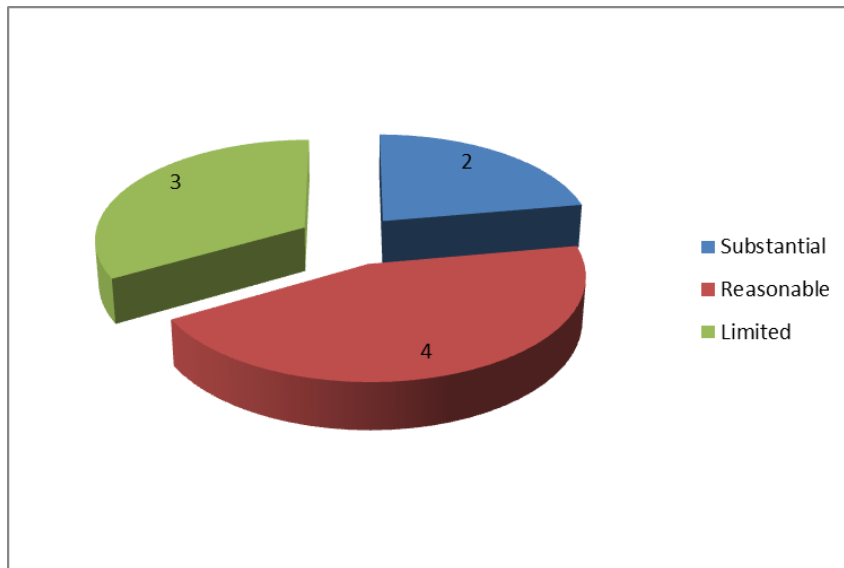
Assurance levels



Key findings

- Controls are in place to address key risks.
- The council is improving its controls to prevent parking fraud and losses but progress has been slower than anticipated.
- Controls over income from life-events need to be strengthened
- The council has made good progress in addressing weaknesses in business continuity arrangements following our audit early in 2016/17.

Assurance levels



Key findings

- Many schools have started to take difficult decisions on staffing levels to ensure their financial security, but school balances are reducing with some schools projecting financial deficits. This is likely to impact on the council's general fund.
- Financial governance arrangements, such as budget reporting to governors, need strengthening.
- Other common areas for improving controls include:
 - collecting cash income
 - use of debit cards

Governance reviews

Brighton & Hove City Council 2016/17

48

Governance reviews



Good governance principles

Reasonable assurance

- Policies and processes in place
- Need to improve information governance and arrangements for keeping data secure
- Some areas where further internal audit or other independent assurance required.

Declarations of Interests, Gifts & Hospitality

Reasonable assurance

- Improved processes in place for making declarations.
- More consistent follow up needed to ensure resultant risks are addressed.

Risk management

Reasonable assurance

- Risk management strategy and systems in place.
- Integration with business planning and sharing of risks with partners need to be strengthened .

Managing risk: keeping vulnerable adults safe from harm and abuse

Reasonable assurance

- Risks are well managed
- The risk register does not fully reflect the arrangements in place.

Audit recommendations

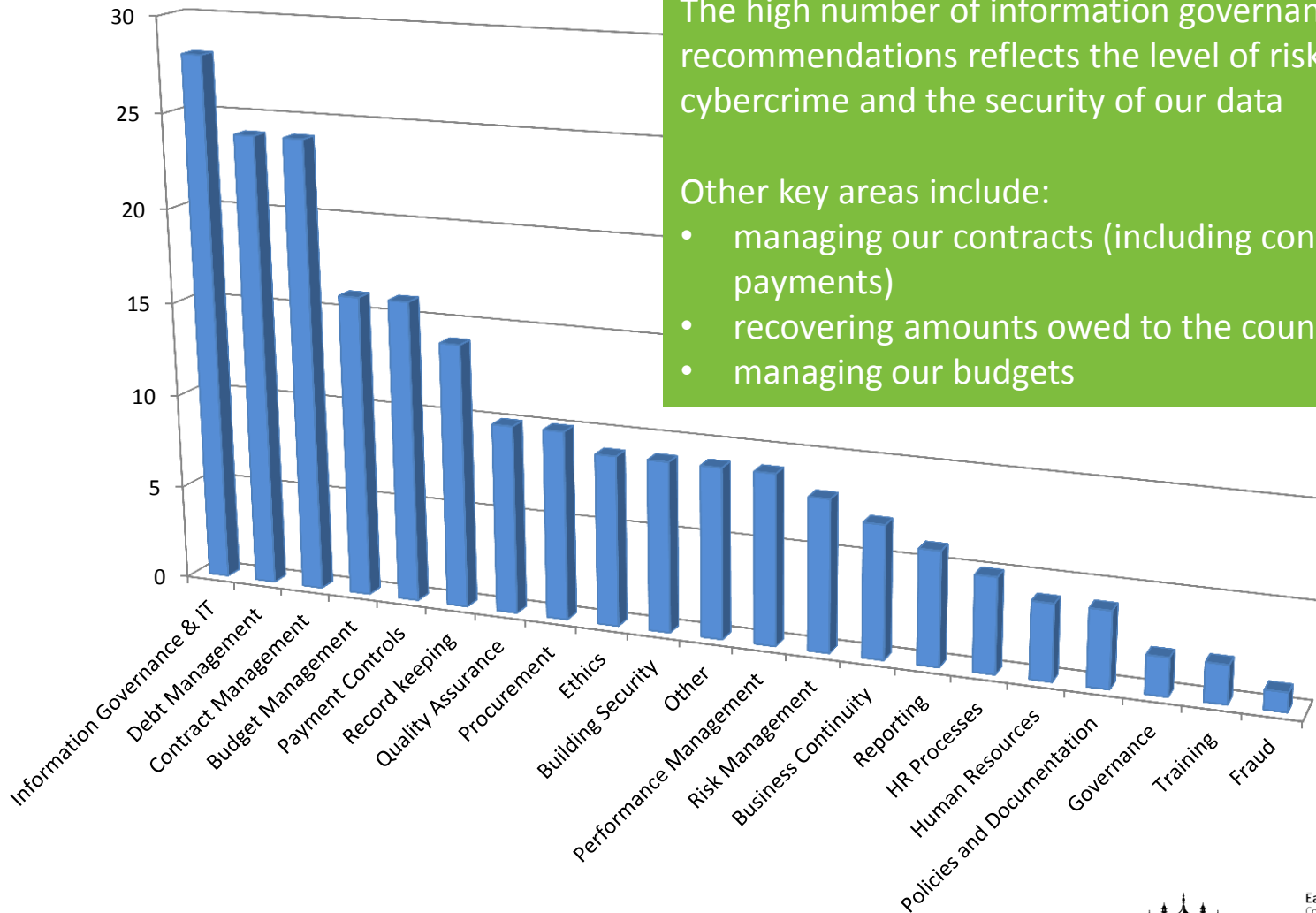
Brighton & Hove City Council 2016/17

50

Audit recommendations by category



51



The high number of information governance recommendations reflects the level of risk relating to cybercrime and the security of our data

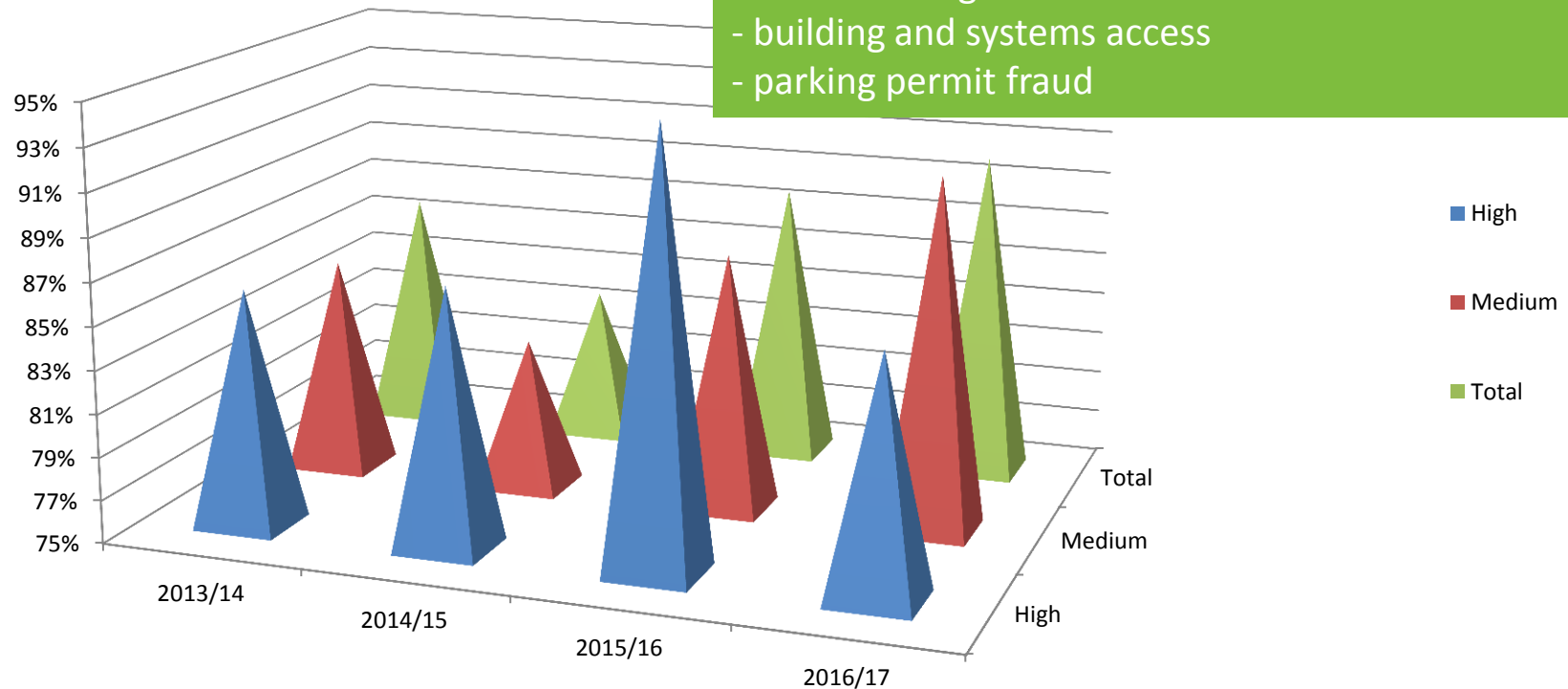
Other key areas include:

- managing our contracts (including controls over payments)
- recovering amounts owed to the council
- managing our budgets

Recommendations implemented

Overall implementation rates improved to 90%. However, 14% of high priority recommendations have not been implemented (5% in 2015/16). This reflects the complexity of the issues raised such as:

- Information governance
- building and systems access
- parking permit fraud



BHCC Internal Audit performance

Brighton & Hove City Council 2016/17

53

Achievements



Awards

- BHCC Big Difference finalist (Tenancy Fraud Amnesty)
- Orbis Ingenium winner (Kathleen Downes)

Recovering assets and cash

- 20 council dwellings recovered
- 21 Right To Buys prevented
- £513k overpayments recovered
- £190k additional income identified



Delivering assurance, strengthening controls

- 95% of audit plan delivered
- 90% of recommendations implemented
- Three lines of defence assurance framework in place
- Supported development of Audit & Standards Committee

Supporting integration with Orbis

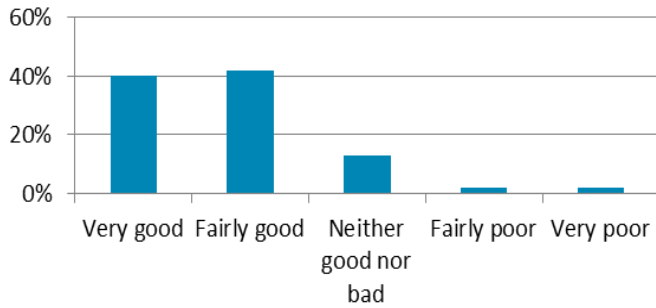
- Review of overall arrangements
- Secondments to/from Orbis
- Joint audit methodology developed
- Joint working piloted



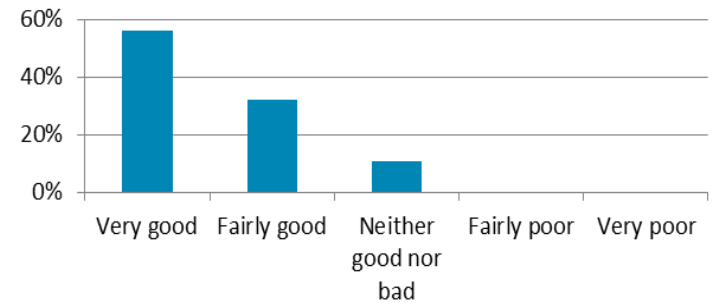
Survey results



Overall how was the standard of customer service you received? 2015/16

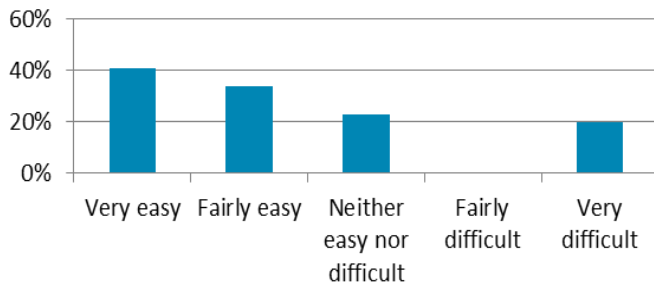


2016/17

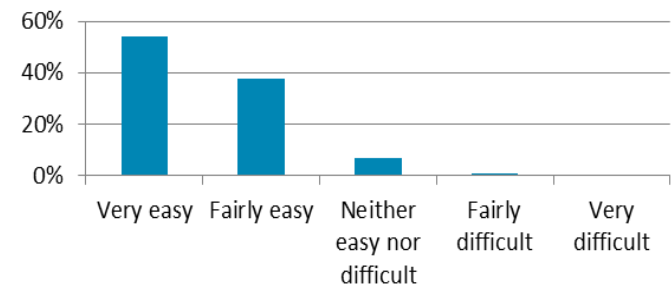


Overall how easy or difficult is it for you to contact our service?

2015/16



2016/17



Conformance with the Public Sector Internal Audit Standards

Brighton & Hove City Council 2016/17

56

Statement of conformance



The council's internal audit service conformed with International Standards for the Professional Practice of Internal Auditing for 2016/17

Requirement	Achieved?	Areas for improvement to be included in quality assurance improvement plan
Definition of internal audit	Yes	
Code of Ethics	Yes	
Attribute standards <ul style="list-style-type: none"> • Purpose, authority and responsibility • Independence and objectivity • Proficiency and due professional care • Quality assurance and improvement programme 	Yes	Commission external assessment of conformance with professional standards Set out formal arrangements for maintaining objectivity when carrying out consultancy work
Performance standards <ul style="list-style-type: none"> • Managing the internal audit activity • Nature of work • Engagement planning • Performing the engagement • Communicating results • Monitoring progress • Communicating the acceptance of risk 	Yes	Fully embed integration with Orbis IA Develop tool kit and deliver training to embed joint Orbis audit methodology

Improving audit quality



Quality improvements achieved in 2016/17

- ✓ Developed richer understanding of customer needs through nominated liaison leads
- ✓ Supported development of the corporate risk assurance framework and used for 2017/18 planning
- ✓ Completed Orbis professional due diligence
- ✓ Improvements in quality and efficiencies through developing joint audit approach, joint working and securing economies of scale
- ✓ Revised IA charter in response to changes in professional auditing standards

Quality improvements planned for 2017/18

- Full integration with Orbis IA including
 - management responsibilities
 - working practices
 - quality assurance arrangements
- Set out formal processes for maintaining objectivity when carrying out consultancy work
- Develop tool kit and deliver training to embed audit approach
- Commission external review of compliance with professional auditing standards

Subject:	Local Code of Corporate Governance		
Date of Meeting:	25 July 2017		
Report of:	Executive Director, Finance & Resources		
Contact Officer:	Name:	Graham Liddell	Tel: 01273 291323
	Email:	Graham.liddell@brighton-hove.gov.uk	
Ward(s) affected:	All		

FOR GENERAL RELEASE**1. PURPOSE OF REPORT AND POLICY CONTEXT**

- 1.1 This report updates the council's Local Code of Corporate Governance in response to changes in guidance from The Chartered Institute of Public Finance and Accountancy (CIPFA) and the Society of Local Authority Chief Executives and Senior Managers (SOLACE).

2. RECOMMENDATIONS:

- 2.1 That the Committee approves the revised draft Local Code of Corporate Governance set out in Appendix 1

3. CONTEXT/ BACKGROUND INFORMATION

- 3.1 Governance refers to the arrangements put in place to makes sure that the council

- does the right things
- in the right way
- for the right people.

- 3.2 A code of corporate governance explains how an organisation complies with statutory requirements and best practice guidance. It helps increase the credibility, accountability and public confidence in an organisation.

4. ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS

- 4.1 The Code is based on the guidance published jointly in 2016 by CIPFA and SOLACE entitled 'Delivering Good Governance in Local Government Framework' (the Framework). This requires local authorities to develop and maintain an up-to-date local code of governance, including arrangements for ensuring ongoing effectiveness.

- 4.2 The draft Local Code sets out how the council:

- compares its arrangements to the six core principles set out in the Framework

- makes sure its arrangements are working
- reports compliance with the local code

5. COMMUNITY ENGAGEMENT & CONSULTATION

5.1 None

6. CONCLUSION

6.1 A Code of Corporate Governance forms a key part of the council's drive to ensure continuous improvement in the way the council operates. Members of the Audit & Standards Committee should consider and approve the proposed update.

7. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

7.1 There are no direct financial implications arising from this report. The draft local code supports good stewardship of public money and risk management.

Finance Officer Consulted: James Hengeveld

Date: 21/06/17

Legal Implications:

The Council's Code of Corporate Governance forms part of the Constitution. Its existence is key to the annual governance review (reported to this Committee via the Annual Governance Statement) and to the success of the project to ensure continuous approval in how the council operates.

Lawyer Consulted: Victoria Simpson

Date: 23.6.17

Equalities Implications:

7.2 None

Sustainability Implications:

7.3 None

SUPPORTING DOCUMENTATION

Appendices:

1. Draft Local Code of Corporate Governance

Code of Corporate Governance Draft v1.0

Developed in accordance with the Delivering Good Governance in Local Government Framework 2016 (the Good Governance Framework) published by the Chartered Institute of Public Finance and Accountancy (CIPFA) and the Society of Local Authority Chief Executives and Senior Managers (SOLACE).



**Brighton & Hove
City Council**

What we mean by governance

The arrangements put in place to ensure that the intended outcomes for stakeholders are defined and achieved

=

How the council makes sure it

- does the right things
- in the right way
- for the right people

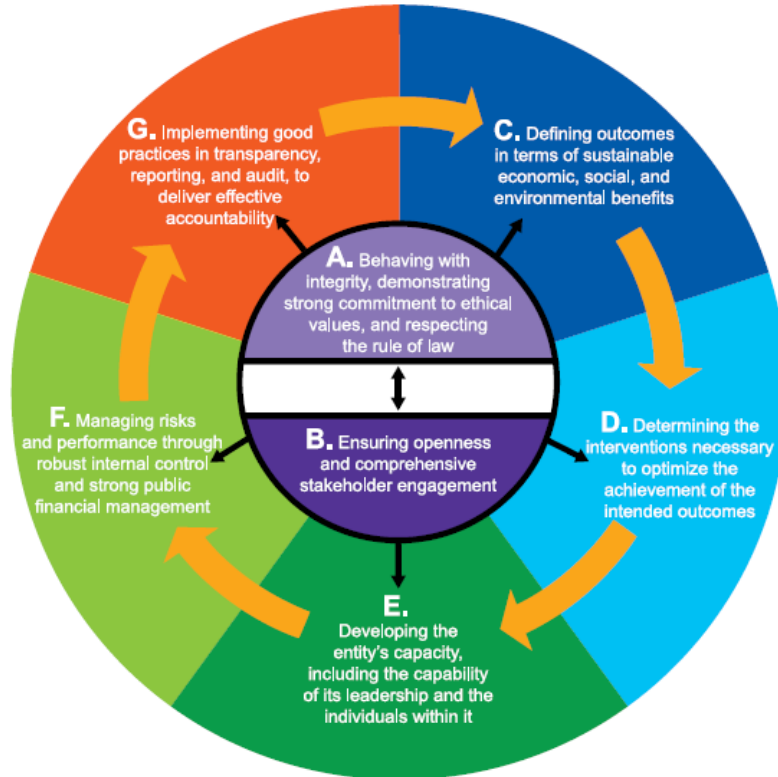


Brighton & Hove
City Council

Why we have published this Code

- To demonstrate how our governance framework conforms to principles of good governance
- Because the council believes that good governance leads to good
 - management
 - performance
 - stewardship of public money
 - public engagement
 - outcomes for citizens and service users

How we compare our arrangements to good governance principles



Our Corporate Risk Assurance Framework maps our policies, processes and risks to the good governance principles set out in this diagram*.

* Originally from the International Framework: Good Governance in the Public Sector (CIPFA/IFAC, 2014) and adopted by the Good Governance Framework



Brighton & Hove
City Council

How we make sure our arrangements are working



We use the 'three lines of defence model' to assess the effectiveness of our policies and procedures and to make sure our risks are addressed

How we report compliance with this code

- Officers prepare an Annual Governance Statement (AGS) that
 - meets the requirements of the Good Governance Framework
 - includes an opinion on the council's governance arrangements
 - sets out actions to make improvements
- The AGS is then
 - approved by the Audit & Standards Committee
 - signed by the Chief Executive and the Council Leader
 - published with our statement of accounts

Subject:	Annual Governance Statement 2016-17		
Date of Meeting:	25 July 2017		
Report of:	Executive Lead Officer Strategy, Governance and Law and Monitoring Officer		
Contact Officer:	Name:	Jackie Algar	Tel: 01273 291273
	Email:	Jackie.algar@brighton-hove.gov.uk	
Ward(s) affected:	All		

FOR GENERAL RELEASE**1. PURPOSE OF REPORT AND POLICY CONTEXT**

- 1.1 The Annual Governance Statement (AGS) is a requirement of Local Authorities to report publicly on the extent to which they comply with their own Code of Corporate Governance ('the Local Code') which is a separate item on this same meeting agenda.

2. RECOMMENDATIONS:

- 2.1 That the Annual Governance Statement is approved (Appendix 1).
- 2.2 To note the Leader of the City Council and the Chief Executive will be asked to confirm their agreement to the AGS by signing a hard copy of Appendix 1 which will be stored securely.
- 2.3 To note that the AGS once signed by the Leader of the City Council and Chief Executive will be published alongside the council's Annual Accounts.

3. CONTEXT/BACKGROUND INFORMATION

- 3.1 The council is responsible for ensuring a sound system of governance (incorporating the system of internal control).
- 3.2 In April 2016, CIPFA (Chartered Institute of Public Finance & Accountancy) and SOLACE (Society for Local Authority Chief Executives) published revised guidance 'Delivering good governance in local government framework 2016 edition'. The Framework defines the principles that should underpin the governance of local authorities and requires each local authority to:
- review existing governance arrangements
 - develop and maintain an up-to-date local code of governance, including arrangements for ensuring ongoing effectiveness
 - report publicly on compliance with their own code on an annual basis including how they have monitored the effectiveness of their governance arrangements in the year and on any planned changes.

- 3.3 The AGS makes use of the preparatory work undertaken in 2016/17 to construct a [Corporate Risk Assurance Framework](#) (CRAF) which mapped the council's Strategic Risks, Directorate Risks and Policies and Processes to the Good Governance Principles as outlined in the International Framework for Public Sector Good Governance. The CRAF was approved by the Audit & Standards Committee on 10 January 2017 and provides evidence and a structure for this AGS.
- The CRAF sets out how the council gains assurance using the three lines of defence model:
 - First line: management controls
 - Second line: corporate oversight
 - Third line: independent assurance
 - The council's Risk Management Process forms a large basis for the Corporate Risk Assurance Framework (CRAF) is active, regularly reviewed and evidence of how the council keeps its arrangements up to date and relevant.
- 3.4 The AGS is shorter than in previous years and has been revised to enhance stakeholder understanding by making it a more readable and user friendly document. It publicises how the council strives to be effective in meeting the highest standards of governance. It also provides information on the review of governance that has taken place and the governance structures.
- 3.5 The council is required to detail in the final Annual Governance Statement 2016/17 'significant events or developments relating to the governance system, which have occurred between the reporting date, and the date on which the Statement of Accounts is signed by the responsible officer'. As at 12 July 2017 there are none but any issue between now and the date the Statement of Accounts are signed will be included in a version of the AGS. If this arises, this will be reported to the Committee Chair and reported back to the Audit & Standards Committee at the next meeting.

4. ANALYSIS & CONSIDERATION OF ALTERNATIVE OPTIONS

- 4.1 The Council has made good progress in addressing issues from the AGS for 2015/16 and has strengthened its governance arrangements in other areas.
- 4.2 The overall opinion from the Head of Internal Audit is that reasonable assurance can be provided on the overall effectiveness of the council's control environment for the year ended 31 March 2017.
- 4.3 The AGS does not identify any significant weaknesses but sets out further areas for improvement.
- 4.4 The council is required to report on any planned changes in the current period beyond the AGS period covered in this report (2016/17). There are no significant issues to be reported.

5. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

- 5.1 Sound corporate governance and proper systems of internal control are essential to the financial health and reputation of the council. The resources required to implement the actions outlined to strengthen the governance arrangements are provided for the agreed 2016/17 budget.

Finance Officer Consulted: James Hengeveld

Date: 14/06/17

Legal Implications:

- 5.2 The council is under a duty to ensure that its financial management is adequate and effective and that it has a sound system of internal control which includes arrangements for the management of risk. Regulation 6 of the Accounts and Audit Regulations 2015 further require the council to at least annually conduct a review of the effectiveness of its system of internal control and prepare an annual governance statement in addition to the statement of accounts which it is obliged to prepare in accordance with regs. 9 and 12.

The council's Audit & Standards Committee is responsible for amongst other things reviewing the outcome of the annual review of governance arrangements and approving the Annual Governance Statement, thereby ensuring that the council meets the requirements of the Accounts and Audit Regulations 2015 by fulfilling these requirements as a committee of the council designated for this purpose.

Lawyer Consulted: Victoria Simpson

Date: 19/06/17

SUPPORTING DOCUMENTATION

Appendices:

1. Annual Governance Statement 2016 – 2017.

Documents in Members' Rooms

1. None.

Background Documents

1. International Framework Good Governance in the Public Sector, CIPFA/ IFAC 2014.
2. Delivering good governance in local government framework 2016 edition, CIPFA/SOLACE 2016.

DRAFT Annual Governance Statement 2016/2017

TO BE Signed by:
Leader of Brighton & Hove City Council,
Warren Morgan
and Chief Executive Officer,
Geoff Raw



Why we have prepared this Annual Governance Statement (AGS) 2016-17

- To fulfil the statutory requirement for each local authority to conduct a review of its system of internal control and prepare and publish an AGS at least once a year in each financial year
- To demonstrate whether, and to what extent, the council complied with its Local Code of Governance ('the Local Code') in 2016/17
- To demonstrate our achievements and help us to be more effective and take action to improve

What we mean by governance

The arrangements put in place to ensure that the intended outcomes for stakeholders are defined and achieved

=

How the council makes sure it

- does the right things
- in the right way
- for the right people

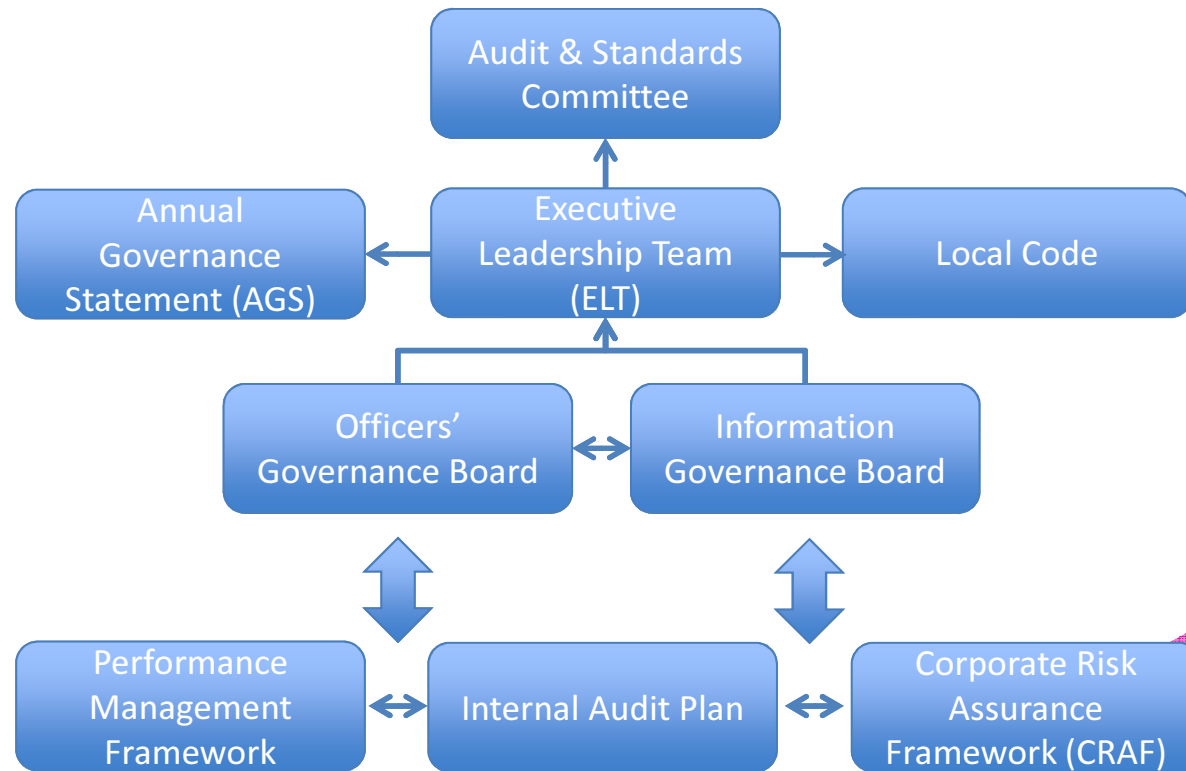


Brighton & Hove
City Council

Our responsibilities

The council is responsible for ensuring that there is a sound system of governance (incorporating the system of internal control) and complying with its local code of governance

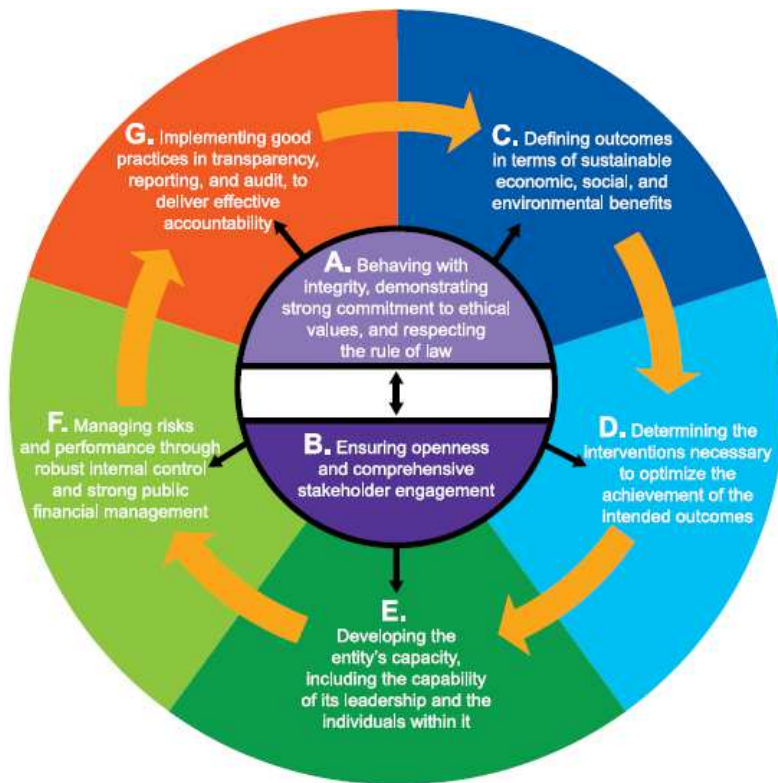
Corporate Governance Structure: within Brighton & Hove City Council



Corporate Governance Structure: working with our partners



How we compare our arrangements to good governance principles



Our Corporate Risk Assurance Framework (CRAF) approved in January 2017 maps our policies, processes and risks to the seven good governance principles set out in this diagram*

* Reproduced from 'Delivering Good Governance in Local Government Framework 2014' published by CIPFA/IFAC

How we make sure our arrangements are working



We use the 'three lines of defence model' to assess the effectiveness of our policies and procedures and to make sure our risks are addressed

Progress made on AGS actions 15/16

What we said we would do	Progress
1) Reporting on progress being made to fully implement the Organisational Review undertaken in early 2015 following the dismissal of the former head of housing	<p>Achieved</p> <ul style="list-style-type: none"> Progress reported to Audit Standards Committee on 21 June 2016
2) Development of a competency framework for the council	<p>Achieved</p> <ul style="list-style-type: none"> Behaviour Framework approved by the ELT on 30 November 2016
3) Developing a corporate risk assurance framework based on the 'three lines of defence' model	<p>Achieved</p> <ul style="list-style-type: none"> <u>Report to Audit & Standards Committee 10 January 2017 Item 65 Corporate Risk Assurance Framework (CRAF)</u>



Progress made on AGS actions 15/16

What we said we would do	Progress
4) Seeking approval of and implementing an updated counter fraud strategy and framework and raise awareness of how staff, citizens and others can report concerns	Achieved <ul style="list-style-type: none">• Counter Fraud Strategy and framework approved by Audit & Standards Committee 21 June 2016• Programme of awareness raising including staff communications, East Sussex Fraud Hub publicity and Tenancy Fraud Amnesty
5) Continuing to give a high priority to understanding and addressing ICT risks, particularly the security of the council's information and systems	Achieved <ul style="list-style-type: none">• Information Governance Board continues to give a high priority to managing ICT risks



Progress made on AGS actions 15/16

What we said we would do	Progress
<p>6) Contract monitoring to be strengthened including ongoing (service specific) training to raise the awareness of Contract Standing Orders and effective contract management; the Procure- to- Pay system will be introduced which will catalogue services with contractual prices. This will improve Purchase Order accuracy and provide exception reporting where suppliers exceed contractual pricing</p>	<p>Ongoing – see Actions 17/18</p> <ul style="list-style-type: none">• Business Case was prepared and approved by Corporate Modernisation Delivery Board for additional contract management capacity• Recruitment activity is well underway with preparation of a Forward Plan for the new team. Roll out expected early July 17



Other areas where we have strengthened our arrangements

1. Executive Director appointments made to complete our Executive Leadership Team (ELT)
2. Audit & Standards Committee strengthened with a revised terms of reference and a programme of 'Deep Dives' into key areas
3. Leadership Training Programme for senior managers based on Behaviour Framework - started January 2017
4. New corporate arrangements for declaring of interests supported by awareness raising across senior management teams.

Head of Internal Audit Opinion

In my opinion, reasonable assurance* can be provided:

- on the overall adequacy and effectiveness of the council's framework of governance, risk management and control for the year ended 2016/17
- that the arrangements continue to be fit for purpose in accordance with Delivering Good Governance in Local Government Framework 2016 published by CIPFA/SOLACE.

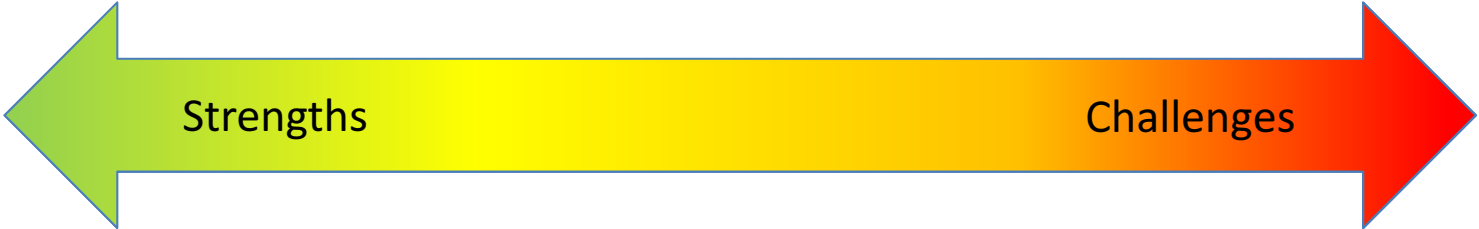
Graham Liddell

Head of Internal Audit for the year ended 31 March 2017

* Assurance can never be absolute. In this context 'reasonable assurance' means that arrangements are in place to manage key risks and to meet good governance principles, but there are one or more areas where improvements are required



Draft rationale for “reasonable assurance” opinion



- Good Governance principles in place
- Core financial systems effective
- Challenging budget delivered
- Objectives largely on track

- Risk from continued financial challenges, especially school balances.
- Risk that reduced capacity will compromise effectiveness of internal controls

- Robustness of our arrangements to keep our data secure.
- Variable contract management practices (general fund, capital and housing)



Further Actions to improve governance for delivery 2017/18, page 1 of 2

What we will do

- 1) Discuss with Lead Members and respond to the recommendation of the April 2017 LGA Peer Review including:
 - i. City-wide leadership
 - ii. The council's long term strategy for the city
 - iii. Partnership & engagement

- 2) Improve contract management
 - i. Analyse current contract portfolio
 - ii. Find opportunities for efficiency gains to contribute to the budget setting process
 - iii. Review housing repairs contract

Lead Officer

Chief Executive

Executive Director (Finance & Resources)



Further Actions to improve governance for delivery 2017/18, page 2 of 2

What we will do

- 3) Improve information governance
 - i. Agree Information Strategy
 - ii. Prepare for General Data Protection Regulations
 - iii. Prioritise Information & Cyber Risks

Lead Officer

Executive Director
(Finance & Resources)

- 4) Address financial challenges facing schools
 - i. Help schools avoid financial difficulties
 - ii. Consider use of formal powers where appropriate

Executive Director
(Families Children & Learning)

What happens next...

We will

- continue to strengthen further our governance arrangements
- monitor the implementation of the actions set out in this statement
- report the progress we have made in our next annual review

In conclusion...

This document:

- shows how we have met the statutory requirement to conduct a review of our system of internal control
- meets the requirement to publish an Annual Governance Statement at least once a year in each financial year
- demonstrates that we have complied with our Local Code of Governance ('the Local Code') in 2016/17
- demonstrates our achievements and helps us to be more effective and take action to improve

Annex 1

Analysis of Corporate Risk Assurance Framework (CRAF) by Internal Audit

Analysis of Corporate Risk Assurance Framework (CRAF) by Internal Audit (IA)

Purpose

- To summarise assurance provided for good governance principles A to G

Content

- Overview
- Heat map showing assessment of policies, processes and risks



Overview – principles A to D

	Good governance principle	Policies/ processes	Commentary on effectiveness
A	Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law	Y	<ul style="list-style-type: none"> Independent assurance confirms that reasonable arrangements generally in place.
B	Ensuring openness and comprehensive stakeholder engagements	Y	<ul style="list-style-type: none"> IA work planned to gain assurance on effectiveness in 2017/18.
C	Defining outcomes in terms of sustainable economic, social, and environmental benefits	Y	<ul style="list-style-type: none"> Local Government Peer review expected to provide independent assurance for 2017/18.
D	Determining the interventions necessary to optimise the achievement of the intended outcome	Y	<ul style="list-style-type: none"> Budget and financial management arrangements are reasonably effective Financial constraints remain a key concern for directorate management teams.



Overview – principles E to G

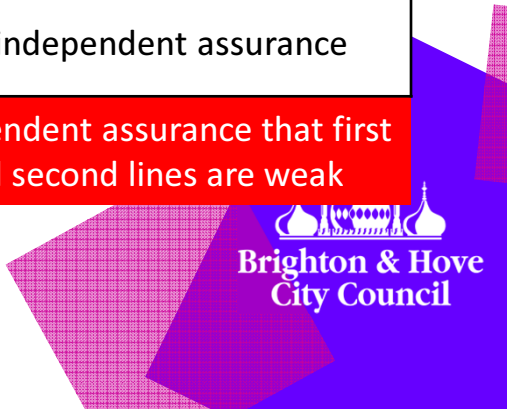
	Good governance principle	Policies/ processes	Commentary on effectiveness
E	Developing the entity's capacity including the capacity of its leadership and with individuals within it	Y	<ul style="list-style-type: none"> Developing capacity remains a key area of focus for the council. Some independent assurance that the council is putting in place reasonable mitigating arrangements (eg Orbis). Further assurance in 2017/18 expected from Local Government Peer review and IA work.
F	Managing risks and performance through robust internal control and strong financial management	Y	<ul style="list-style-type: none"> Independent assurance confirms that reasonable arrangements generally in place. The council needs to improve its arrangements for information governance and keeping its data secure
G	Implementing good practice in transparency, reporting and audit to deliver effective accountability	Y	<ul style="list-style-type: none"> Independent assurance on effectiveness expected from external audit and independent review of internal audit in 2017/18.



Key to Corporate Risk Assurance Framework heat map

93

	First line	Second line	Third line
Green	Management controls set out on CRAF	Sources of corporate assurance set out on the CRAF	Independent assurance that first and second lines are effective
Yellow	Some management controls set out on CRAF	Some sources of corporate assurance set out on the CRAF	Independent assurance that first and second lines are reasonable
Grey	n/a	n/a	Independent assurance in progress or planned
White	Management controls not set out	Sources of corporate assurance not set out	No independent assurance
Red	n/a	n/a	Independent assurance that first and second lines are weak



A: Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law

94

Policy/process	First	Second	Third
A1 Behaving with integrity	green	green	yellow
A2 Demonstrating strong commitment to ethical values	green	green	green
A3 Respecting the Rule of Law	green	green	green

Strategic risk	First	Second	Third
SR13 Keeping Vulnerable Adults safe from harm and abuse	green	green	yellow
SR15 Keeping children safe from harm and abuse	green	green	green

Directorate risk	First	Second	Third
EEC DR 09 - Ensuring best practice to meet Health & Safety standards	yellow	yellow	white
FCL DR 05 - Our Child Protection and Safeguarding arrangements are not effective	green	green	green
HASC DR 05 - Assurance of ASC statutory duties	yellow	green	white
HASC DR 02 - Meeting requirements of Deprivation of Liberty Safeguards (DoLS)	green	green	yellow
NCH DR 03 - Meeting legislative duties in Service Delivery, whether direct or through contractors	green	green	yellow
SGL DR 02 - Skills and resources to lead and support the organisations	green	green	white



B: Ensuring openness and comprehensive stakeholder engagements

Policy/process

	First	Second	Third
B1 Openness	green	green	white
B2 Engaging stakeholders effectively including individual citizens and services users	green	green	grey
B3 Engaging comprehensively with institutional stakeholders	green	green	white

Strategic risk

	First	Second	Third
SR26 Council relationship with Citizens	green	green	grey
SR20 Ability of health and social care to integrate services at a local level to deliver timely and appropriate interventions	green	green	grey

Directorate risk

FCL DR 02 - Changes in effective partnership working affects our service delivery
 HASC DR 03 - Market capacity of Adult Social Care providers

	First	Second	Third
FCL DR 02 - Changes in effective partnership working affects our service delivery	green	green	grey
HASC DR 03 - Market capacity of Adult Social Care providers	green	green	white

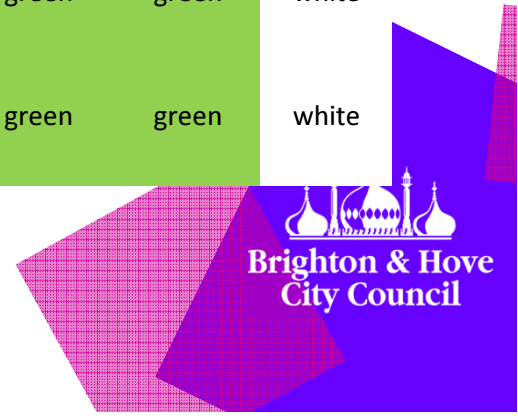


C: Defining outcomes in terms of sustainable economic, social, and environmental benefits

Policy/process	First	Second	Third
C1 Defining Outcomes	green	green	yellow
C2 Sustainable economic, social and environment benefits	yellow	yellow	grey

Strategic risk	First	Second	Third
SR23 Developing an investment strategy to refurbish and develop the city's major asset of the seafront	green	green	grey
SR21 Housing Pressures	green	green	yellow
SR29 Contract Management	green	green	grey

Directorate risk	First	Second	Third
EEC DR 07 - Strategic Co-ordinations and delivery of major regeneration and infrastructure projects	green	green	grey
EEC DR 10 - Delivering the next stages of the City Plan	green	green	white
NCH DR 06 - Impact of Government Policy on Directorate contribution to delivery of Corporate Plan	green	green	white
SGL DR 05 - Managing directorate activity to support the council through substantive changes to operating environment	green	green	white

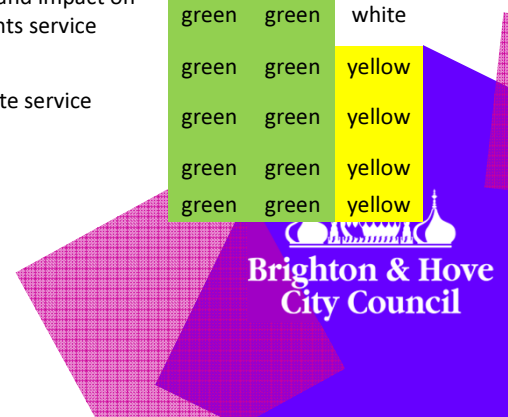


D: Determining the interventions necessary to optimise the achievement of the intended outcome

Policy/process	First	Second	Third
D1 Determining the interventions	green	green	yellow
D2 Planning interventions	yellow	yellow	yellow
D3 Optimising the achievement of intended outcomes	yellow	yellow	yellow

Strategic risk	First	Second	Third
SR18 Transition to modern, digital IT to improve service delivery	yellow	green	yellow
SR17 School Places Planning	green	green	grey

Directorate risk	First	Second	Third
EEC DR 01 - Digital capability to meet customer expectations	green	green	grey
EEC DR 05 - Resilience of the City's Transport Infrastructure	green	yellow	white
FCL DR 07 - There are not sufficient suitable school places across the city	green	green	grey
HASC DR 08 - Improving city wide health and well-being outcomes and the impact on HASC demand management	green	green	white
HASC DR 12 Strategic Organisational Change, involving governance, systems and workforce	green	green	grey
FCL DR 06 - Children underachieve at Secondary and post 16 education within the City	green	green	green
SGL DR 06 - Resources affecting service resilience and impact on front line delivery to customers using the Life Events service	green	green	white
HASC DR 01 - Financial pressures	green	green	yellow
NCH DR 02 - Financial Stability to enable Directorate service delivery	green	green	yellow
FCL DR 03 - Budget pressures are unmanageable	green	green	yellow
EEC DR 03 - Directorate's income and budget	green	green	yellow

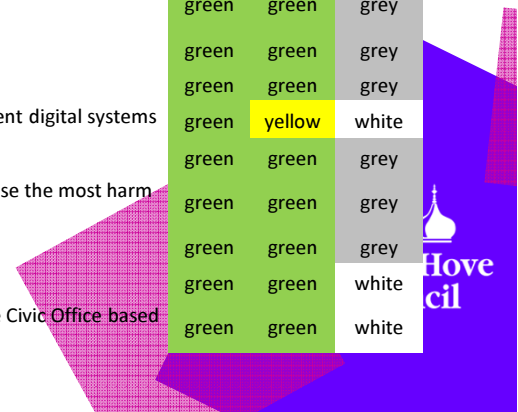


E: Developing the entity's capacity including the capacity of its leadership and with individuals within it

Policy/process	First	Second	Third
E1 Developing the entity's capacity	yellow	yellow	yellow
E2 Developing the capacity of the entity's leadership and other individuals	yellow	yellow	grey

Strategic risk	First	Second	Third
SR22 Modernising the Council	green	green	yellow
SR27 Devolution	green	green	white
SR25 Organisational Capacity as a Result of Change	yellow	yellow	grey

Directorate risk	First	Second	Third
EEC DR 08 - Planning Service Income & Service Delivery	green	green	yellow
EEC DR11 - Transition of RP&M to new Trust to deliver outcomes	green	yellow	white
FCL DR 01 - Service redesign doesn't lead to improved services	green	green	green
FCL DR 04 - Without targeted and effective services for those not meeting the threshold of social care there is an increased potential need of costly interventions for children and families	yellow	green	green
FCL DR 08 - Special Educational Needs and Disability Review recommendations are not implemented	green	green	green
FR DR 01 - Orbis Integration	green	green	yellow
FR DR 02 - Capacity of F&R to meet the Council's expectations given the level of savings required in 2017/18	green	green	yellow
FR DR 03 - Managing staff workload, improving team resilience and enabling staff flexibility	green	green	grey
FR DR 08 - Delivery of Digital First objectives	green	green	grey
HASC DR 04 - Major changes affecting Social Care	green	green	grey
NCH DR 01 - Improving Customer Services through efficient digital systems	green	yellow	white
NCH DR 04 - Increased demands	green	green	grey
NCH DR 05 - Capability to address Serious Crimes that cause the most harm is reducing	green	green	grey
SGL DR 01 - Change capacity and support for staff	green	green	grey
HASC DR 07 - Engaging staff in change	green	green	white
SGL DR 07 Impact of WS4 on Life Events Services and the Civic Office based in Brighton Town Hall	green	green	white



F: Managing risks and performance through robust internal control and strong financial management

Policy/process	First	Second	Third
F1 Managing risk	green	green	yellow
F2 Managing performance	green	green	yellow
F3 a Robust Internal Control	green	green	yellow
F3 b Managing Data	green	green	Red*
F4 Strong public financial management	green	green	yellow

Directorate risk	First	Second	Third
HASC DR 11- IT systems to enable modern working and effectively delivery	yellow	yellow	white
EEC DR 04 - Readiness for Emergencies & Resilience Planning	green	green	yellow

Strategic risk	First	Second	Third
SR24 Welfare Reform	green	green	grey
SR10 Information Governance Management	green	green	Red*
SR2 Financial Outlook	green	green	yellow

*Red ratings based on limited assurance opinion given on information governance audits



G: Implementing good practice in transparency, reporting and audit to deliver effective accountability

Policy/process	First	Second	Third
G1 Implementing good practices in transparency	green	green	white
G2 Implementing good practices in reporting	green	green	green
G3 Assurance and effective accountability	green	green	grey



Glossary of Terms

& Links for more information, 1 of 3

'Local Code' – Local Code of Governance reported to Audit & Standards Committee 25 July 2017

Audit & Standards Committee – oversees Governance arrangements at the council, including monitoring and providing an opinion on the effectiveness of risk management & Internal Control

Executive Leadership Team – officer group chaired by the Chief Executive including all Executive Directors & the Executive Lead Officer, Strategy, Governance & Law

Glossary of Terms

& Links for more information, 2 of 3

- **Officers' Governance Board** – an officers group with a remit to oversee the implementation of actions from the Annual Governance Statement and progress improvements in governance
- **Information Governance Board** as part of Information Governance Strategy 2016-19
- [Brighton & Hove Connected](#) - link to the Sustainable Community Strategy for Brighton & Hove

Glossary of Terms

& Links for more information, 3 of 3

- CRAF [Report to Audit & Standards Committee 10 Jan 17: Corporate Risk Assurance Framework](#)
- [Performance Management Framework](#)



Subject:	Annual review of the Audit & Standards Committee		
Date of Meeting:	25 July 2017		
Report of:	Executive Director, Finance & Resources		
Contact Officer:	Name:	Graham Liddell	Tel: 01273 291323
	Email:	Graham.Liddell@brighton-hove.gov.uk	
Ward(s) affected:	All		

FOR GENERAL RELEASE**1. PURPOSE OF REPORT AND POLICY CONTEXT**

- 1.1 This report reviews the activity of the Audit & Standards Committee during 2016/17.

2. RECOMMENDATIONS:

- 2.1 That the Committee notes that it has many of the characteristics of a good practice audit committee and has built on this strong foundation to make further improvements during 2016/17.

3. CONTEXT/ BACKGROUND INFORMATION

- 3.1 The Audit functions of the Committee relate to the Council's arrangements for the discharge of its powers and duties in connection with financial governance and stewardship, risk management and audit. The Committee makes recommendations to the Council, Policy & Resources Committee, Officers or other relevant body within the Council.
- 3.2 The Standards functions of the Committee seek to ensure that the Members, Co-opted Members and Officers of the Council observe high ethical standards in performing their duties. These functions include advising the Council on its Codes of Conduct and administering related complaints and dispensation procedures.
- 3.3 In addition to the Councillors who serve on the Committee, the Committee includes at least two independent persons who are not Councillors. They are appointed under Chapter 7 of the Localism Act, or otherwise co-opted, and act in an advisory capacity with no voting powers.

4. ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS

4.1 During 2016/17 the Committee held five formal meetings and discharged both its audit and standards functions

Function	Summary of how discharged
Audit	<p>External audit and statement of accounts</p> <ul style="list-style-type: none"> • Received reports from the external auditor • Approved the statement of accounts <p>Internal audit</p> <ul style="list-style-type: none"> • Approved annual internal audit plan • Received reports from internal audit including on contentious issues such as contract overpayments and loss of revenue from car parking • Received annual audit report <p>Risk</p> <ul style="list-style-type: none"> • Approved Corporate risk assurance framework • Reviewed risk register • Reviewed specific strategic risks in detail <p>Review and approval of key policies such as counter fraud strategy and framework.</p>
Standards	<p>Approval of revised Member Code of Conduct</p> <p>Training for members on conducting Standards Panel hearings</p> <p>Receiving regular reports on standards-related issues from the Monitoring Officer, including summaries of member related complaints.</p>

4.2 In June 2016 the Committee, supported by the Head of Internal Audit and Ian Young from EY, carried out a self-assessment by comparing its audit function with the key characteristics of good practice and added value set out by CIPFA. Members considered that the committee:

- supported risk management and internal audit
- helped the council to implement values
- promoted good governance.

4.3 Members identified three key areas for development:

- The Audit & Standards Committee has the potential to play a more active role in contributing to a more effective control environment that is trusted by citizens and stakeholders.
- Members would be better placed to discharge their responsibilities if they were supported by more structured information on assurance sources and co-ordinated training

- The effectiveness of the Committee could be improved through a more flexible agenda that focuses on the issues that are most important for the council and considering these issues in more depth.

4.4 A detailed action plan to address these issues was agreed and implemented including the following.

- Full council approved amendments to the Committee’s terms of reference to:
 - set out the Committee’s role in acting as a critical friend to the Council and in helping to build trust in the Council’s arrangements
 - provide assurance on the arrangements to secure value for money
- The Audit Committee supported the development and introduction of a corporate risk assurance framework to set out how the council ensures that it delivers its corporate strategy and manages its risks.
- The Audit Committee revised its forward plan and introduced “deep dives” into specific topics to provide greater insight to inform discussions at full Committee and to ensure that the Committee’s activities are directed towards the areas of most importance. Deep dives during 2016/17 included reviews of
 - Audit & Standards committee effectiveness
 - Proposals to integrate the Internal Audit function with Orbis IA
 - Review of Adult Social Care risks
 - Review of customer feedback.

4.5 On 8 May 2017, Full Council approved changes to membership of the Committee including four new members including a new Chair of the Committee. The new Committee held its first deep dive on 5 July 2017 and identified the following areas to improve further its effectiveness:

- developing the relationship with any new external auditors following the appointment of auditors by Public Sector Audit Appointments Ltd
- greater involvement of members in setting the agenda for the Committee
- enhancing the scrutiny of items presented to the Committee

5. COMMUNITY ENGAGEMENT & CONSULTATION

5.1 None

6. CONCLUSION

6.1 The Committee has many of the characteristics of a good practice audit committee and built on this strong foundation to make further improvements during 2016/17.

7. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

7.1 There are no financial implications arising from the recommendation in this report.

Finance Officer Consulted: James Hengeveld

Date: 06/07/17

Legal Implications:

- 7.2 The Council's Audit & Standards Committee plays a key role in ensuring the ongoing effectiveness of the Council's financial governance, risk management and audit arrangements, as well as in discharging the statutory duty imposed by the Localism Act 2011 to promote high standards of conduct by members. The actions reported here will inform how the Committee discharges its functions going forward.

Lawyer Consulted: Victoria Simpson

Date: 27.6.17

SUPPORTING DOCUMENTATION

Appendices:

1. None

Documents in Members' Rooms

1. None

Background Documents

1. None

Subject:	Standards Update		
Date of Meeting:	25th July 2017		
Report of:	Head of Law and Monitoring Officer		
Contact Officer:	Name:	Abraham Ghebre-Ghiorghis	Tel: 29-1500
	Email:	Abraham.ghebre-ghiorghis@brighton-hove.gov.uk	
Ward(s) affected:	All		

FOR GENERAL RELEASE**1. PURPOSE OF REPORT AND POLICY CONTEXT**

1.1 This report updates Members on Standards-related matters since the last report.

2. RECOMMENDATIONS

2.1 That this Committee a) notes the information provided in the Report on member complaints, and b) considers the revisions suggested to the Social Media Protocol for Members and approves those.

3. MEMBER-RELATED COMPLAINTS

3.1 Since the last report to the Committee in March 2017, the two outstanding complaints – those referred to in this Report as Complaints 3 and 4 - have been resolved. Meanwhile two additional standards complaints – referred to here as Complaints 1 and 2 respectively - have been received in. Those two new complaints have also been resolved, this in the terms detailed here.

4. STANDARDS COMPLAINTS**4.1 Complaint 1**

4.2 **The allegation:** A complaint was received in toward end of April 2017 alleging that a member had breached the Code of Conduct by making inappropriate use of Council facilities, this by using their Council Blackberry for personal purposes.

4.3 **The outcome:** That complaint was considered by the Monitoring Officer in consultation with the Independent Person and appropriate small scale enquiries were made regarding the context and circumstances of the alleged breach. A decision was made at preliminary assessment stage not to refer the matter for investigation as doing so was not considered to be in the public interest. The complainant was notified of this outcome and of the reasons for it. As a result this complaint has now been determined.

4.4 **Complaint 2**

The allegation: This complaint was made regarding a comment made by a councillor during a broadcast news interview.

The outcome: Small scale enquiries enabled the Monitoring Officer to note the context of the comment which was the subject of the complaint and the circumstances of it. Having consulted with one of the Independent Persons, a decision was made at preliminary assessment stage to take no further action on the basis that the public interest did not merit a referral of the complaint for formal investigation. The parties were informed of the outcome and of the reasons for it and this matter is also at an end.

4.5 **Complaints 3 & 4**

4.6 The complaints made in January 2017 and previously reported to the last meeting of this Committee have now been resolved. **Complaint 3** alleged failures by two elected members to behave in a way which a reasonable person would regard as respectful at meetings of the Council. The complaint was the subject of preliminary assessment by the Monitoring Officer, acting in consultation with the Independent Person. After due consideration, it was considered that an informal resolution was the most appropriate means of determining the matter in the public interest, with the parties involved coming to a mutually acceptable resolution. As a result, this complaint is at an end.

4.7 **Complaint 4** involved an allegation that a comment made on social media by a member amounted to conduct which might reasonably be regarded as bringing their office or authority into disrepute. That complaint was the subject of preliminary assessment by the Monitoring Officer, acting in consultation with the Independent Person. He concluded that if proven the allegation would not amount to a breach of the Code. The parties were notified of the outcome and as a result that complaint is also at an end.

5. **SOCIAL MEDIA PROTOCOL FOR MEMBERS**

5.1 **The Social Media Protocol for Members**

This Protocol aims to facilitate members' use of social media by providing clear guidance on how members may use it to assist them in discharging their public duties and generally, this in such a way that they remain within the rules which govern councillor conduct. The Social Media Protocol is intended to be read alongside the practice note on [Publicity and the Use of Council Facilities](#). It provides guidance on how members may use social media in such a way that they abide by the [Code of Conduct for Members](#).

5.2 The above Protocol was last reviewed in early 2016 by a cross party group and a revised version of it was approved by this Committee on 8th March 2016. Since then, in February of this year while determining a breach which had been referred to it, the Council's Standards Panel made a decision which included the following recommendation:

‘The Panel recommends that the Social Media Protocol for members be reviewed to include the importance of enabling a right to reply, for example through tagging.’

5.2 In light of the decision of the Standards Panel, further amends to the Protocol are proposed. The version appended here as Appendix 1 incorporates those proposals as tracked changes. They have additionally been reviewed both by the Council’s two Independent Persons and by the Head of Communications.

5.3 This Committee is invited to consider the proposed amendments and – if minded to do so – to approve them.

6. ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS

6.1 The Council is obliged under the Localism Act to make arrangements for maintaining high standards of conduct among members and to make arrangements for the investigation of complaints. The current arrangements and the proposals in this Report reflect this. No alternative proposals are suggested.

7. COMMUNITY ENGAGEMENT & CONSULTATION

7.1 No need to consult with the local community has been identified.

8. CONCLUSION

8.1 Members are asked to note the contents of this Report, which aims to assist the Committee in discharging its responsibilities for overseeing that high standards of conduct which are compliant with local requirements are maintained.

9. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

9.1 There are no additional financial implications arising from the recommendation in this Report. All activity referred to has been, or will be, met from existing budgets.

Finance Officer Consulted: James Hengeveld

Date: 21/06/17.

Legal Implications:

9.2 These are covered in the body of the Report.

Lawyer Consulted: Victoria Simpson

Date: 20.6.17

Equalities Implications:

9.3 There are no equalities implications arising from this Report

Sustainability Implications:

9.4 There are no sustainability implications arising from this Report

Any Other Significant Implications:

9.5 None

SUPPORTING DOCUMENTATION

Appendices:

1. The Council's Social Media Protocol for Members, showing suggested amendments as tracked changes

Documents in Members' Rooms:

None.

Background Documents:

None

SOCIAL MEDIA PROTOCOL FOR MEMBERS

Purpose of this protocol:

Social media is an increasingly important means of communication for individuals and businesses. The Council welcomes Members' increasing use of social media and aims to facilitate it by providing guidance regarding what is and is not acceptable. This protocol is intended to be read alongside the practice note on [Publicity and the Use of Council Facilities](#) and complements the general rules under [the Code of Conduct for Members](#). As members might expect, **the fundamental principle is that the same standards of behaviour and conduct apply online as are required offline.**

What is social media?

'Social media' is the term to describe websites and online tools which allow people to interact with each other by creating their own content, for example blogs, videos or short messages, including tweets.

On social media sites, users may share information, discuss opinions and/or create interest groups or pages: all means of building online communities and networks which encourage participation and engagement.

It is not a requirement that members have a Facebook or Twitter account or use other forms of social media. However if you are already using or planning to use social media in connection with your work as a Councillor, or are already using such media in your private capacity, these guidelines will be relevant.

Social Media can be used:

- To support councillors in performing their community leadership role
- To keep in touch with local views and opinions
- For political campaigning
- For campaigning on local issues

Types of Social Media:

- Blogging and microblogging on online journals. Twitter is an example of microblogging, where entries are limited to 140 characters
- Online Forums involve people with similar interests sharing information and opinions. Social networking sites facilitate connections between those who already know each other, often in a social context, but are increasingly used by businesses to promote their products or services- Facebook is an example
- Video and photo publishing involve sharing videos and photographs worldwide – Youtube and Flickr are examples.

Be mindful that:

- The use of social media does not impose any legal or ethical burdens additional to those which govern all of your behaviour as a councillor.
- However while any form of communication is capable of being misunderstood, the rapidity and immediacy of social media exchanges can lend itself to problems.
- “Misfiring”, or being misunderstood, particularly where comments are perceived as being more controversial than intended, may lead to rapid and wide broadcasting of the seemingly controversial comment.
- Although social media lends itself to a conversational tone, posting comments is still publishing in the sense of creating a written record. Most pitfalls will be avoided if your online content is accurate, informative, balanced and objective.
- While councillors are free to communicate politically in appropriate contexts, you should be careful not to say anything that you wouldn't be comfortable justifying at a public meeting.
- If you do use social media to make comment (whether political or otherwise) about an individual or organisation, it is recommended that you alert that person to your comment by 'tagging' them (or otherwise alerting them) so that they are aware of your post. This ensures that you identify them correctly as well as giving them the opportunity to respond.

Legal issues:

- **Libel** – If you publish an untrue statement about a person which is damaging to their reputation, they may take a libel action against you. The same thing may happen if, for example, someone else publishes something libellous on your website, you know about it and don't take swift action to remove it. A successful libel claim could result in the award of damages against you.
- **Copyright** – Placing images or text on your site from a copyrighted source (for example extracts from publications or photos), without obtaining permission, is likely to breach copyright laws. Therefore don't publish anything you are unsure about, or obtain prior permission. Again, a successful claim for breach of copyright would be likely to lead to an award of damages against you.
- **Data Protection** – Do not publish the personal data of individuals unless you have their express permission.
- **Bias and Predetermination** – if you are involved in making planning, licensing or other quasi-judicial decisions, do not say anything through social media (or indeed anywhere) that suggests you have completely and irrevocably made your mind up on an issue that is due to be formally decided upon. While your likely view on a particular application may be well known, you need to be able to show that you attended the

committee or hearing prepared to take on board and weigh all the evidence and arguments, and were genuinely persuadable to a different view. If you weren't, the decision may be later challenged as invalid. If a person has suffered some sort of detriment as a result of such an invalid decision, they may have a claim against the council for damages.

Social Media and the Code of Conduct for Members:

- Aspects of the Code of Conduct for Members will apply to your online activity in the same way as they do to any other written or verbal communication you may engage in. The key to whether your online activity is subject to the Code is whether you are, or even just appear to be, acting in your capacity as a councillor rather than as a private individual.
- Councillors can have “blurred identities”. This can happen where you have a social media account where you comment both as a councillor and as an individual. Although you may be clear in your mind that you are acting in a private capacity it may be less clear to others. This can also mean that your views can be taken as being those of your organisation or party (rather than you personally) when this may not be the case.
- One way of avoiding blurring the lines between your personal and councillor life, and avoiding some of the potential problems related to the Code of Conduct, may be to consider keeping your online accounts as a councillor separate from those where you communicate in a personal capacity. This is a decision for each member and some Members may find the convenience of having one account outweighs the advantages of separate accounts. The council's Communications Section, in particular the Social Media Officer, can help you with more specific advice if needed.
- **You must treat others with respect** - do not use social media to make personal attacks or indulge in rude, disrespectful or offensive comments.
- **You must comply with equality laws** – do not publish anything that might be seen as racist, sexist, disableist, ageist, homophobic or anti-faith.
- **You must not bully or intimidate anyone** – do not say anything, particularly if it is part of a series of similar comments about a person or on a theme that might be construed as bullying or intimidation, whether the comments relate to a council employee, a fellow-councillor or anyone else.

- **You must not bring the council into disrepute** – you should not publish anything that could reasonably be perceived as bringing yourself as a councillor, or the council in general, into disrepute.
- **You must not disclose confidential information** - you must not, in your usage of social media, just as in any other circumstances, disclose information given to you in confidence by anyone, or information acquired by you which you believe, or ought reasonably to be aware, is of a confidential nature.

Members are referred to paragraph 4 of the Members' Code of Conduct for a fuller exposition on non-disclosure of confidential information. There is a perception that inadvertent leaks of the council's confidential information are more likely to take place when a councillor is using social media, rather than, say, when they are carefully drafting a letter for publication in the local paper. This may be because of the more immediate, conversational, off-the-cuff nature of much social media communication. Whether this is true or not, members must be careful to apply exactly the same Code of Conduct standards to their social media communications as they would to statements made in a more formal context.

While it is important that the Council conduct its business with openness, it is essential that councillors and employees are clear about what is confidential and ensure that relevant items remain confidential.

There is separate more detailed guidance on confidential information available on the Wave or from the Monitoring Officer. If in any doubt, Members should seek advice.

Staying out of Trouble - Some Do's and Don'ts

Some Do's

- set appropriate privacy settings for your blog or networking site – especially if you have a private, non-political blog
- keep an eye out for defamatory or obscene posts from others on your blog or page and remove them as soon as possible to avoid the perception that you condone such views
- be mindful of the potential for misunderstanding and miscommunication.
- if you feel it necessary to 'block' an individual from communicating with you, be mindful of the need to be clear and transparent in your actions. This will normally involve communicating directly with them your decision and the reasons for it
- be aware that the higher your profile as an elected member, the more likely it is you will be seen as acting in your official capacity when you blog or network

- consider keeping your personal and elected member profile on social networking sites separate as a means of maintaining appropriate professional boundaries
- ensure you use council facilities appropriately; if you use a council provided blog site or social networking area, any posts you make will be viewed as made in your official capacity
- be aware that you will be seen as acting in your official capacity if you publish information that you could only have accessed by being an elected member
- feel able to make political points, but be careful about being too specific or personal if referring to individuals. An attack on individuals may be seen as disrespectful, whereas general comments about another party or genuine comments on policy are less likely to be viewed as disrespect.
- if you do make a personal or a political comment about an individual or organisation on social media, it is recommended that you 'tag' them in your post. As well as ensuring that you identify the correct person, this practice alerts them to the fact you have made a comment about them and gives them the opportunity to reply to it.

Some Don'ts

- Blog in haste, particularly in circumstances where your judgement might be impaired; for example if you are tired or have consumed alcohol
- make unguarded statements which could lead to potential liability, or fail to take care when reporting or copying the comments of others
- post comments that you would not be prepared to make on paper or face to face
- use council facilities for personal or political blogs
- request or accept a Brighton & Hove City Council employee or contractor providing services to the council as a "friend" on a social networking site where this suggests close personal association. For the avoidance of doubt, this does not apply to sites which are intended as a neutral, professional connections registry (such as LinkedIn.)
- use social media in any way to attack, insult, abuse, defame or otherwise make negative, offensive or discriminatory comments about council staff, service users, their family or friends, colleagues, other professionals, other organisations, or the council
- publish confidential information that you may have learned or had access to as part of your role as an elected member. This includes personal information about service users, their families or friends or others e.g. contractors, council staff as well as City Council related information
- represent your personal views, or those of any political party or interest group you belong to, as being those of the council, on any social medium

- browse, download, upload or distribute any material that could be considered inappropriate, offensive, defamatory, illegal or discriminatory

Use of social media and mobile devices at meetings:

- Use mobile devices sparingly, discreetly and with common sense at meetings, being mindful of the impression you may be giving to others of proceedings.
- There may be occasions when texting or emailing between Councillors during meetings on matters relevant to the debate at hand may be valuable on the same basis as circulating paper notes to other Councillors. Mobile devices also enable Councillors to manage their busy lives when time is at a premium. However frequent use of these devices during meetings may give the public the impression that the councillor is not paying full attention to an item that is being discussed in a debate on a decision that is to be made.

Examples of the acceptable use of devices:

- reading and annotating meeting papers and background information relevant to that meeting;
- communicating with others at the meeting on matters relevant to the debate at hand; and
- sending and receiving urgent communications to/from home relating to domestic circumstances (e.g. childcare arrangements)

Avoid the following:

- (a) using social media during quasi-judicial meetings or during the consideration of confidential or exempt items of business at meetings; and
- (b) frequently checking emails and messages that are not related to the meeting; and
- (c) extended periods of use which may suggest that insufficient attention is being paid to the meeting.

.....

The Council wishes to encourage Members to use social media where doing so may assist you in performing your function. This guidance is intended to help Members avoid the legal and reputational risks inherent in this mode of communication. The Monitoring Officer and the Social Media Officer in the Communications Team are happy to help Members by providing additional advice and guidance as appropriate. Training is also available to individual Members or Groups on the use of social media.

Abraham Ghebre-Ghiorghis

Monitoring Officer

Revised June 2017~~March 2016~~

Subject:	Human Resources & Organisational Development Annual Report		
Date of Meeting:	25 July 2017		
Report of:	Executive Director, Finance & Resources		
Contact Officer:	Name:	Alison Mcmanamon	Tel: 01273 293629
	Email:	Alison.mcmanamon@brighton-hove.gov.uk	
Ward(s) affected:	All		

FOR GENERAL RELEASE**1. PURPOSE OF REPORT AND POLICY CONTEXT**

- 1.1 The Human Resources & Organisational Development (HROD) service comprises Human Resources, Health and Safety and Workforce and Organisational Development.
- 1.2 The purpose of the annual report is to highlight the contribution the service has made in supporting the organisation over the last 12 months and set out the focus of our activity this year.

2. RECOMMENDATIONS:

- 2.1 That the Committee note the annual report of activity, assurance and business plan priorities from the Human Resources & Organisational Development (HROD) Service.

3. CONTEXT/ BACKGROUND INFORMATION**3.1 General Background**

- 3.2 HR&OD's contribution to the organisation has to be defined by providing a good payroll and administration service and having well defined policies, advice, assurance frameworks and training and development on workforce issues. Furthermore the service is a key enabler for delivery of the modernisation programme in delivering a modern council.
- 3.3 It is important that HR/OD has a visible role in the organisation and is able to add challenge, provide solutions and define activities that will enable the council to meet its priorities. The challenging landscape for the council in delivering services against restricted budgets means that HR/OD needs to add value to the planning and options.
- 3.4 The annual report provides an overview of the broad range of activities undertaken by the HROD service including information on:

- Training and Development
- The Culture Change programme
- How we have supported managers with complex casework
- An outline of the strategic HR support provided particularly in relation to workforce planning
- Recruitment activity
- Provision of Occupational Health support
- Health and Safety advice and assurance
- Payroll and pension activities
- Policy and project work
- Partnership and engagement activity and impact including the first Community Initiatives Partnership annual report

3.5 It includes many achievements as well as the challenges faced. In addition, it sets out the current Business Plan priorities and how people can get involved by providing feedback on their experiences and help to influence how we shape our service for the future.

3.6 The Council's workforce is the greatest resource it has and the report provides context and assurance on what is done to support this resource.

4. ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS

4.1 Not applicable

5. COMMUNITY ENGAGEMENT & CONSULTATION

5.1 Not applicable

6. CONCLUSION

6.1 No decision is sought

7. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

7.1 There are no direct implications arising from the recommendations in this report. Workstreams for 2017/18 including culture change and preparation for Orbis are expected to met by existing resources.

Finance Officer Consulted: Peter Francis

Date: 7/07/17

Legal Implications:

7.2 This annual report provides assurance regarding the control mechanisms which are maintained in order to ensure that the council's employment and health and

safety practices remain compliant in a changing legislative context. There are no other legal implications arising from this report.

Lawyer Consulted: Victoria Simpson

Date: 10/07/17

SUPPORTING DOCUMENTATION

Appendices:

1. HR&OD Annual report for 2016/17
2. Health & Safety Annual report 2016/17
3. Health & Safety Annual Incident Report 2016/17
4. Community Initiatives Annual Report 2016/17

Human Resources and Organisational Development

Annual Report 2016-17



Brighton & Hove
City Council

Human Resources & Organisational Development

Annual Report 2016 - 2017

Report of: Head of Human Resources and Organisational
Development (HROD)

Committee: Audit & Standards Committee

Subject: HROD Annual Report
April 2016 to March 2017

Date: June 2017

Contents

- 1. Introduction..... 1**
- 2. Our Workforce Profile 2**
- 3. The Management and Performance of HR & OD 4**
- 4. Policy and Assurance 7**
- 5. Supporting Service Planning and Performance Improvement 11**
- 6. Partnership Activity 26**
- 7. Service Focus for 2017/18..... 28**
- 8. Transitioning to the Orbis partnership..... 28**
- 9. Help us to help you..... 30**

1. Introduction

The Human Resources and Organisational Development (HROD) annual report highlights the contribution and achievements the service has made in supporting the organisation over the last 12 months. It provides an outline of how the service is organised, detailing the focus of the service and how it has continued to support modernisation of the council.

The report details the council's workforce profile and gives an overview of the partnerships that help to ensure the HROD service continues to provide a responsive and effective service.

Whilst highlights from the health and safety annual report are included within this document, a separate health and safety annual report sets out in greater detail the range of assurance activities undertaken and the current assurance status for the council.

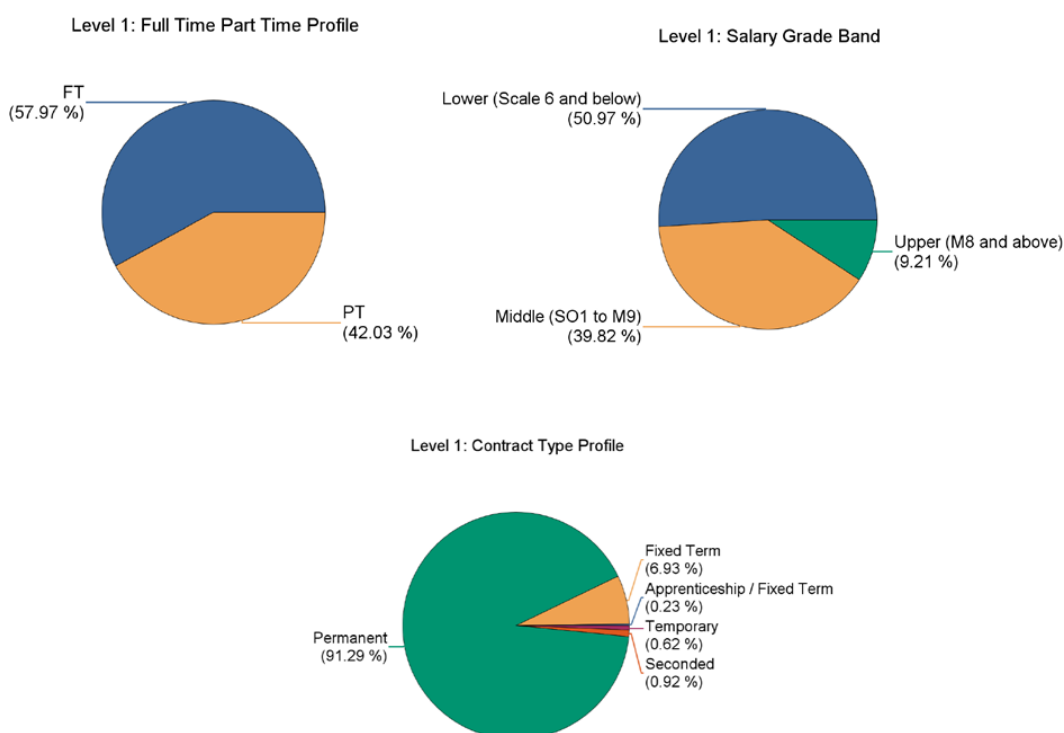
2. Our Workforce Profile

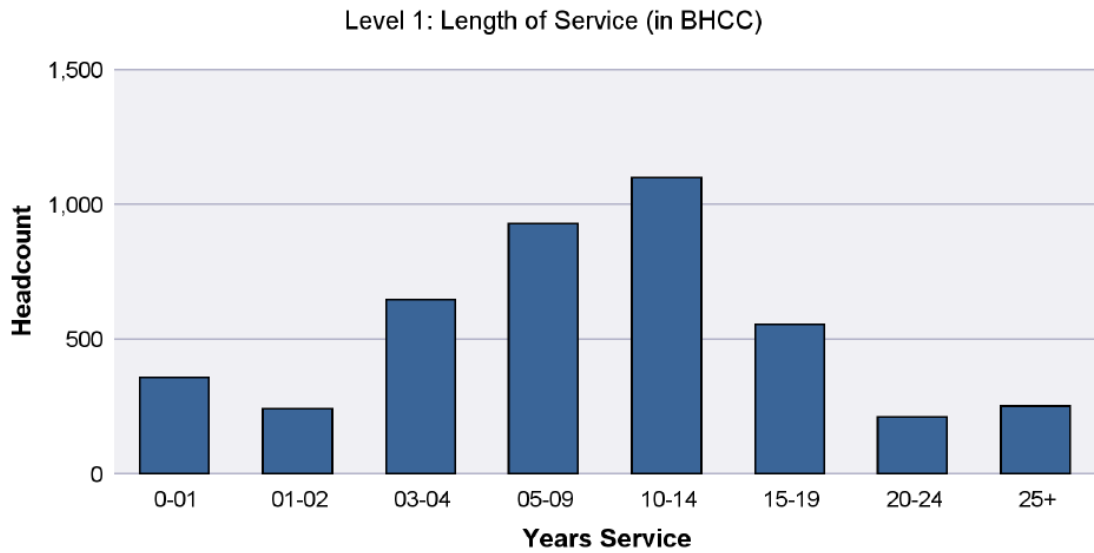
Our workforce is an essential resource in supporting the delivery of high quality services to our citizens. The following data provides an outline of the composition and turnover of the council's workforce, excluding schools.

Organisational Level	Full Time Equivalent (FTE)	Head Count	Turnover (Rolling Year)
Whole Council (Level 1) (excludes schools)	3,676.19 (3880.89)	4,284 (4541)	13% (15%)
Health & Adult Social Care	579.49	711	16%
Families, Children & Learning	1,037.12	1,305	14%
Economy, Environment & Culture	895.64	978	13%
Neighbourhoods, Communities & Housing	495.03	555	13%
Finance & Resources	501.21	553	11%
Strategy, Governance & Law	165.71	189	12%

Please note that due to significant organisational re-structuring during 2016/17, workforce numbers and turnover figures for 2015/16 are provided at a council-wide level only.

The data shows that there has been a decrease within the workforce over the past year of 257 people, which reflects the reduction in services in line with budget reductions. Turnover within the organisation as a whole has shown a slight fall compared with last year.



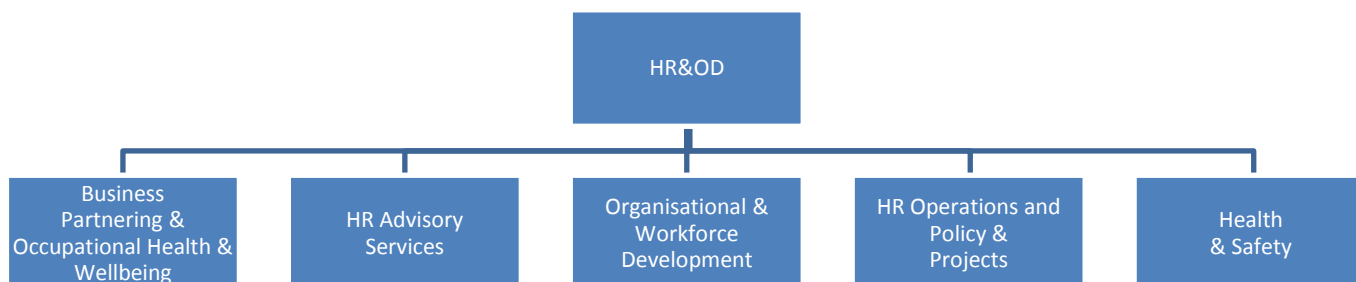


We also provide a HROD service (including health and safety) to schools in Brighton & Hove, through a traded service, and have maintained a 100% buyback from maintained schools. We have separate agreements to provide services to two academies and one free school in the city. The contracted school workforce headcount is 4833 (4841), which equates to 3486 (3433) full time equivalent (FTE).

3. The Management and Performance of HR & OD

Structure and Accountability

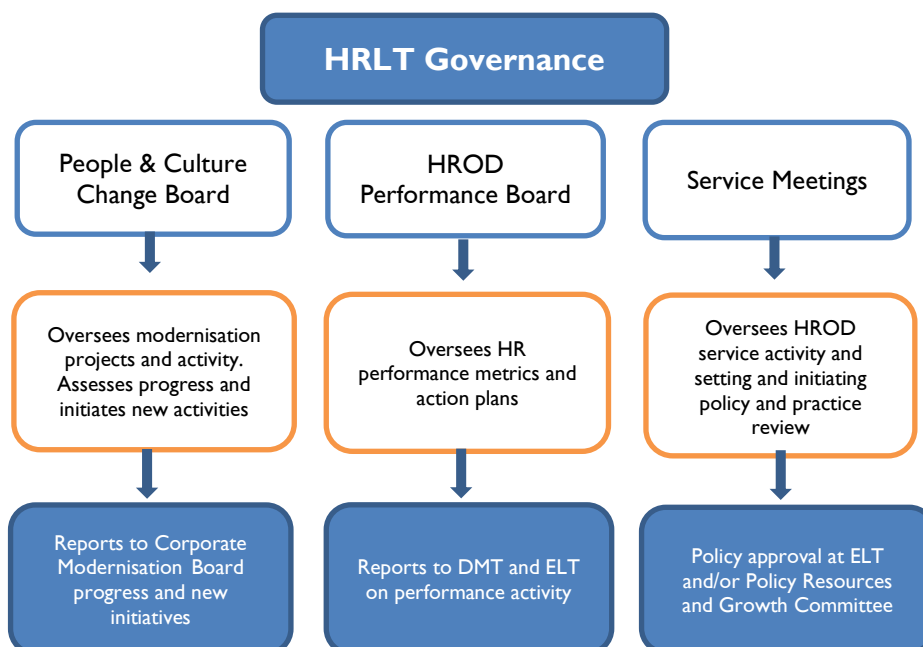
The HROD function is structured on key areas of service accountability under the Head of HROD, who is the lead professional for the Council. The service areas each have a Head of Service and these plus the Head of HROD form the HR Leadership Team, with accountability for setting service direction and leadership for the HROD function.



Decision-making and Governance

The HR Leadership Team is the key decision maker for HR and Health and Safety policy and practice. Management of governance and risk happens through a defined meeting structure focussing on service activity, modernisation activity and service performance and standards.

Through the defined focus of meetings, clear oversight, escalation and assurance of service standards and performance is maintained.



Financial management

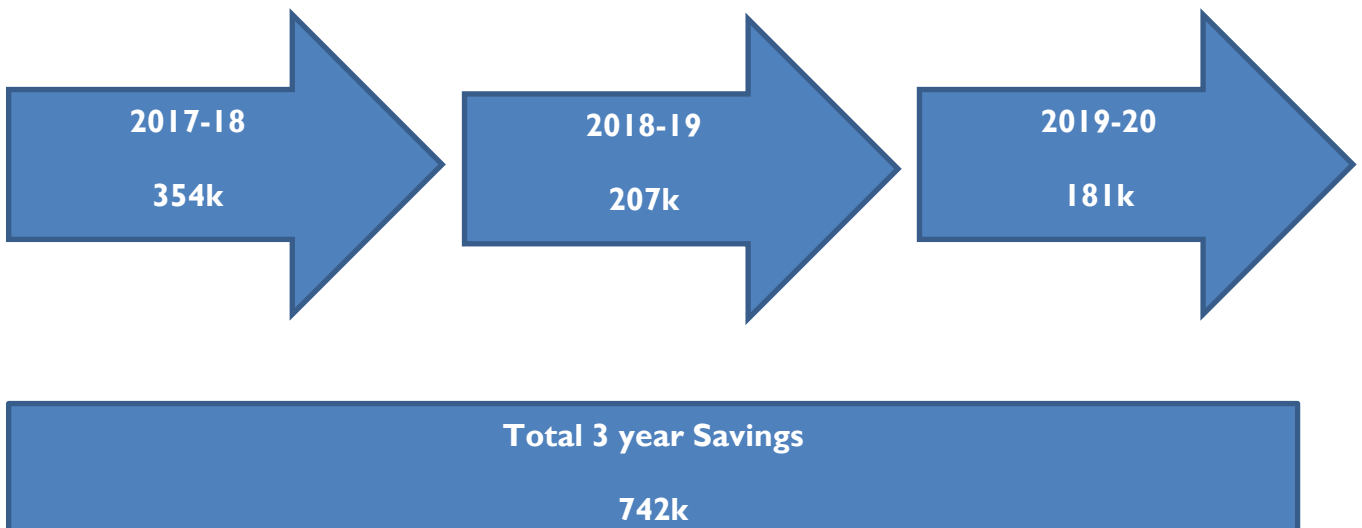
The HROD team has delivered efficiency gains and cashable savings over the span of the spending review. Our budget contribution towards the 2016/17 budget was £335k and this was delivered in full. The function has worked hard identify where savings may be made whilst ensuring to minimise disruption to services. The savings were achieved last year through a combination of rationalising supervision and management posts, and maximising income and commissioning efficiency from health and safety and workforce development training budgets.

We continue to have challenging targets to achieve and joining the Orbis partnership will provide different opportunities to deliver these savings to 2020 along with more resilience for our service.

Savings achieved in 2016/17



Planned savings to 2020



Customer Satisfaction

The annual Finance & Resources Customer Survey was undertaken between 1 December 2016 and 6 January 2017 and this included feedback on HROD services. The results detailed below, show improved customer satisfaction across the service. This is a significant achievement in the context of reduced budgets and resourcing.

Service	Number of Responses	Ease of access % of positive responses		Ease Change %	Quality of service % of positive responses		Quality Change %
		2015-16	2016-17		2015-16	2016-17	
HR	311	51%	71%	+39%	57%	69%	+21%
OD	148	78%	86%	+10%	79%	88%	+11%
H&S	148	86%	90%	+5%	92%	87%	-5%

Service & Survey Totals

HROD (inc.H&S)	607	66%	79%	+19%	71%	78%	+10%
BHCC Support Services Overall	4696	73%	82%	+12%	78%	82%	+5%

The feedback received via the survey will be used to continue to inform our service planning.

4. Policy and Assurance

We continue to ensure the council is legally compliant and operating responsible employment practices. To ensure robust mechanisms of control are in place we:

- maintain policies and guidance to enable the council to comply with employment and health and safety law
- provide access to competent advice and support
- manage the council's recruitment, payroll and pension functions
- support the council's corporate audit approach
- track developing employment and health & safety law

To ensure compliance and continuous improvement in our service delivery, governance is monitored via an HR Performance Board which continues to monitor organisational workforce performance indicators as well as our internal HR performance.

People management and health and safety management are 2 elements of the councils performance management framework which can be seen in the model below:



A separate Health & Safety annual report has been prepared which provides information on compliance and assurance activities. A few of the highlights from which are included in this report.

Governance

HROD contributes to core corporate governance activity supporting and reporting via a number of oversight and scrutiny committees including:

- the Officer's Governance Board chaired by the s151 officer and the Information Governance Board
- Policy & Resources and Growth committee
- Audit & Standards when issues relating to workforce or health and safety are debated
- Health & Safety performance is monitored via the Corporate Health & Safety committee
- Oversight of Workforce performance is via Executive Leadership Team & Policy & Resources committee.

Internal Audit

There have been four audits this year relating to HROD services:

Audit	Assurance Level achieved	Status
Annual Payroll Audit	Substantial	Achieved for the third year meaning effective controls are in place and being maintained
Pension Administration	Reasonable	Follow up from previous limited assurance audit
Agency	Limited	Four recommendations resulted, 3 were addressed during the audit and a detailed plan to address the fourth implemented
Declaration of Interests, Gifts & Hospitality	Reasonable	HROD contributed to this audit which resulted in 14 recommendations. Seven of these allocated to HROD and all have been implemented

Supporting financial assurance

Our **HR/Payroll** system enables us to administer salary, overtime and other employment related payments to approximately 9,000 employees (including schools). The average monthly value of payments is £13.6m. This comprises of £6.5m for schools staff and £7.1m for all other staff.

We have processed 1643 new starters (730 non-schools and 913 schools) and 1129 staff amendments and 1594 staff leavers (747 non schools and 847 schools).

The total value of payments administered by our **Pensions** team to each pension fund is approximately:

- £31 million (Local Government Pension Scheme)
- £18 million (Teachers Pension Scheme)
- £249k (NHS)

HR has played a key governance role in supporting in year financial control through vacancy management, agency bookings and provision of training.

We produced the council’s annual **Pay Policy Statement** for 2017/18 in accordance with requirements set out in the Localism Act 2011. This was approved by Full Council and published on the website together with a range of data on pay as a public document.

We coordinate the council’s **compensation panel** which comprises a representative from HR, legal and finance and is responsible for oversight of business cases relating to decisions on voluntary severance, compromise agreements and market supplements.

Within the past year HR have developed and gained approval, following union consultation for the following **new policies**; pay protection, re-deployment and market supplements to enable the council to secure skills and support existing employees affected by change.

The health and safety team work closely with the insurance team and the council’s insurers to investigate **personal injury claims**. Through this partnership working we ensure appropriate remedial action is taken where failings can be attributed to the council including compensating any losses.

We also ensure claims are robustly defended where the council has discharged its duties in accordance with relevant legislation and standards.

Over the past 5 years the council has successfully defended over £4 million of personal injury claims. A summary of the claims history is detailed below.

Year	First Estimate	Total Paid	Successfully Defended
2012	£1,717,373	£376,030	£1,341,343
2013	£1,724,198	£217,001	£1,507,197
2014	£1,180,535	£113,165	£1,067,370
2015	£525,739	£11,630	£514,109
2016	£11,448	£2,646	£8,802
Total	£5,159,293	£720,472	£4,438,821

£4.4m personal injury claims successfully defended over 5 years

Insurance claims paid by year (the final total of claims paid from 2014 onwards may change as the statute of limitations for making a civil claim for compensation is 3 years (and for children 3 years after reaching 21 years)

Job Evaluation

We continue to operate job evaluation panels to establish the grading of new or revised posts. This, together with our local Brighton & Hove City Council allowance scheme, provides a robust and transparent framework for employees’ pay.

Health & Safety Assurance

We are proud to report that again **no enforcement action** has been taken against the council in the last 12 months. In the context of reducing resource the council and our delivery partners have to accept and manage more risks. The effective risk management approaches, governance and oversight in place has continued to ensure informed decision making.

Pre-employment Checking

The recruitment team ensures the relevant checks are undertaken for all new recruits prior to confirming job offers. These include right to work, health, referencing and disclosure and barring checks.

A review of the policy and process for undertaking rechecks of existing employees has been undertaken and in March 2017 ELT agreed to increase the frequency of rechecking key roles where the postholders work directly with children and vulnerable adults from 4 to 3 years (in line with the existing policy for Fostering and Adoption and Children's Residential staff).

2,850 DBS checks for new staff and volunteers

Over 1,750 Disclosure and Barring Service checks were undertaken during 2016/7 for new staff and existing staff (at a cost of £44 per check) and 1100 DBS checks for volunteers (there is no charge for volunteer DBS checks).

5. Supporting Service Planning and Performance Improvement

➤ Workforce planning and organisational design activity

Workforce planning – We have been working closely with services to understand the workforce implications of the 4 year integrated service and financial plans to enable better planning for changes to staffing levels. Workforce planning conversations have been facilitated by the HR Business Partners and will support our work to redeploy, re-skill and reduce our workforce in line with our changing organisation.

Budget Planning – Support was provided to a successful budget consultation exercise with staff and unions. Consultation processes were planned at a corporate and service level to ensure that an extremely challenging budget process was managed in the most effective way possible, with early engagement of those impacted. The equality impacts of the budget were assessed and management of change processes were implemented.

158 staff left the Council on Voluntary Severance. HR Business Partner and HR Advisory Services have supported 41 consultation or communication exercises. These vary in size and impact from communication on changes affecting individual posts to full scale service redesigns such as:

- Early Help Services achieving a **saving of £440k**.
- Tenancy Services in Housing carried out a whole service redesign, which contributed towards **savings of £355k** for the HRA, achieved through redeploying existing staff to alternative roles in the new structure.

Supporting New Models of Delivery – We have worked with management teams to assess options for moving services into different models of delivery. This has involved supporting a wide range of options such as:

- plans for the management and operation of the Royal Pavilion and Museums to move into a new Trust
- advising services on proposals to TUPE transfer services to external providers, particularly in Health & Adult Social Care
- 11 staff have been TUPE transferred to a new employer as a result of a service being outsourced and advice to services on this type of work continues.

The Business Partner team have continually updated the **TUPE toolkit** to support managers and HR colleagues in progressing with transfers of services that are covered by TUPE and knowledge of pensions issues in this area of work has increased.

We agreed a new process with our procurement team to work more closely with our Trade Union colleagues during tender processes, and to support the consideration during evaluation of tenders of Trade Union recognition and / or how new providers engage and consult with their staff. This approach was agreed at Policy, Resources and Growth Committee in December.

Service Redesign – The Business Partner team have supported a number of fundamental service redesigns using the Service Redesign toolkit which ensures structures are designed around desired outcomes, and early engagement with staff and stakeholders means change is more effectively managed.

Case Study – Property & Design Service Redesign

To achieve savings of £2.75m in Property & Design between 2016/20, a service redesign of the Facilities & Building Services took place. The services were reviewed with a main focus on the Customer Service Centre services in collaboration with the Business Improvement (BPI) team. Following extensive consultation with staff and stakeholders the final proposals implemented delivered savings of over £500k. The majority of staff were redeployed to either new posts within the structure or alternative roles across the Council keeping Voluntary Severance costs low.

➤ People & Culture Change

We continue to have a key enabling role in the modernisation programme for the council. Following a series of reviews on the future operating environment for the Council to 2020 and what the workforce enabling activities need to be, the current structure of the People & Culture Change programme is defined against 3 priorities:

1. **Pay & Reward**
2. **Behaviour Framework**
3. **HR Data and Insight**

Pay & Reward – ensuring the council’s pay and terms and conditions framework connects with the business and service needs of the council and supports the operating principles of the council.

We:

- lead the implementation and review of the voluntary Living Wage. In April 2017 the new rate of £8.45 was implemented across the council and all schools.
- introduced a new pay protection policy, a revised re-deployment policy and a new market supplement policy. All with the aim retaining existing employees at risk and attracting high calibre staff where skills are scarce.
- ran job evaluation panels and grading appeals with the participation of management and trade unions to support service redesign and creation of new roles
- supported colleagues and managers engaged in redesigning their services through provision of professional advice on design of jobs and departmental structures.
- designed a job family framework and started work on creating role profiles covering 1500 current jobs engaged in broadly similar activities, to achieve a range of benefits, such as clearer career pathways, improved recruitment outcomes, more consistent performance management, and simpler, flatter structures.

34 Job evaluation & appeals panels

222 Jobs evaluated

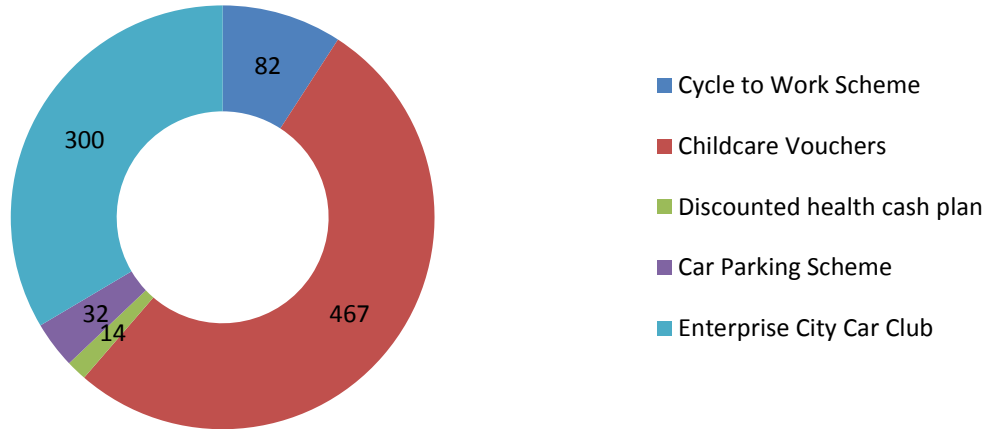
27 Grading appeals

A Leadership Job Family has been established, covering the top 4 tiers of the organisation in order to:

- Be clear about what we expect from senior managers and what they are accountable for
- Achieve common standards of performance across Leadership roles, with consequences where standards are not met
- Incorporate the council’s Behaviours Framework – integrating what we do with how we do it
- Enable senior leaders to role-model best practice to their teams and services

Staff Benefits

We operate and develop the council’s staff benefit offer, which includes flexible working and Employee support and assistance programmes. Other benefits include the following schemes (and take-up):



The aim of these schemes is to ensure our staff and potential staff view the council as an employer of choice.

We have revamped the council’s recruitment pages to ensure these schemes are as visible as possible for potential applicants..

Priorities for 2017 – 2018

- working with our Orbis partners in a joint procurement exercise to introduce a more extensive staff benefit offer, which will improve our ability to attract and retain staff in the future.
- influence the national direction of pay awards for NJC staff for the foreseeable future.
- publishing gender pay calculations showing the pay gap between male and female employees. 2017 will be the first year of reporting this figure and work is well under way to ensure publication of this data by March 2018.

Behaviour framework

– ensuring the council has a defined performance and skills framework to underpin its workforce strategy. This consists of 3 projects:

Project A	Behaviour Framework: delivery of an agreed framework
Project B	Integration with organisational policies & procedures
Project C	Training – alignment of existing programmes and development of new support materials, e.g. workshops, toolkit

We:

- co-created the behaviour framework with the help of an occupational psychologist and nearly 200 people including staff, partners and community groups.
- formed a Working Group made up of key stakeholders from across the council to evaluate and give feedback on an ongoing basis as the programme develops.
- implemented our revised approach to performance management.
- provided training to the Leadership family to enable them to start using the new approach and framework for 2017/2018 objective setting and throughout the performance review cycle.
- Started delivery of the new Leadership Development Programme for senior managers

Priorities for 2017 – 2018

- work with a few pilot groups to implement the revised performance management approach and behaviour framework beyond the Leadership team
- agree and deliver further modules of the Leadership Development Programme
- implement a 360 degree feedback review for the Leadership team as part of their mid year reviews.
- Co-create our approach to rated performance and moderation.
- Integrate the behaviour framework into existing HR & OD policies and procedures.
- Align our existing council-wide learning programme to the behaviour framework and commission new learning solutions as required.

Data Insight

- ensuring the council uses key management data in a way that enhances decision making and future planning.

We:

- Continued to report Data Insight results.
- Created a Data Insight action plan to form part of the performance management process.
- Agreed a mandatory PDP objective for the Leadership Team to achieve their Data Insight targets:

Priorities for 2017 – 2018

- We will be producing further data insight information to inform the appraisal process and support rated and moderated appraisal discussions.
- Using information from our latest staff survey we have created a management effectiveness indicator that will be included in the data insight information.

Planning for the 2017 Staff Survey

Positive staff engagement and communication is crucial to the work on the employment and cultural experience of our workforce. The Internal Communications team, the Performance & Improvement team and senior managers all work to ensure regular, open and consistent messaging across the organisation.

The last staff survey took place in November 2015 and results were discussed with staff in teams throughout 2016/17. Action plans were included in department service plans to encourage action and improve staff confidence that their feedback is being listened to and acted on.

A CMT task and finish review group was set up to develop the 2017 survey to check that the defined purpose of the survey was still valid. Adjustments were made to the question set themes and individual questions to better reflect the different modernisation journeys that the council has been making over the last year.



Staff survey results link into a number of key pieces of work around performance and activity:

- Annual service planning – Staff Survey action plans should be part of yearly planning in all department and teams
- Behaviour Framework - staff survey results will be used as a indicator as to how the behaviours are being embedded within the organisation
- Data Insight piece – the dashboard of information that brings together key performance data for all teams in the Council.
- Monitoring linked to HSE Stress Indicator questions – the staff survey questions were developed with these mind and in partnership with Health & Safety.
- Equalities information - staff survey results linked to equalities monitoring help to understand the experience of employees with protected characteristics

We have received our results for the 2017 survey and there are many areas of improvement. There was an increase on positive responses related to staff engagement (up 6%), and a significant increase on the number of staff who felt there was a clear sense of direction for the Council (up 14%). The full results have been broken down to team level to provide detailed information which will support us in reviewing activity and planning for the future.

➤ Recruitment and resourcing activity

All council vacancies are advertised on the councils job site. www.brighton-hove.gov.uk/jobs Job board space is used for specialist roles through our advertising contract.

Last year we recruited **849 staff** (excluding schools)

Breakdown by quarter	Number of Appointments
Q1	321
Q2	161
Q3	137
Q4	230
Grand Total	849

Total Number of posts advertised

Schools	504
Non Schools	504
Total	1008

Social Work Campaigns

- we ran a Newly qualified Social Worker campaign and recruited 21 NQSW

We have successfully supported senior management recruitment including the appointments of 3 Executive Directors.

We led the procurement of a new recruitment and public notice advertising contract in partnership with East Sussex County Council, Surrey County Council and Sussex and Surrey Police Authority. The new contract started in January 2017.

Agency & Interim Staff

Human Resources manage the contract for the provision of agency and interim workers through our managed service provider. The council continues to utilise this contract to meet its staffing requirements during a time of significant change. Agency spend last year was £7.5m compared to £7.7m the previous year.

All agency bookings continue to be authorised through an automated online system by senior managers and no assignment can exceed 12 weeks without further approval.

Recruitment Agency Re-Tender

Work took place to identify requirements of services across the council and ensure this was reflected in the specification used for the procurement of a new contract. The competition was launched at the end of March 2017 A panel of stakeholders was involved in the evaluation of the bids and scoring of the presentations and system demonstrations. The new contract commences in October 2017. The current contractor was successful in winning the new contract.

Casual Workers

Our casual workforce is kept under review and all casual workers are monitored to ensure that their employment status is correctly recognised, we facilitated the transfer of 50 casual workers from casual employment to contractual employment.

We supported 608 casual workers across the council (NB: this figure does not include schools or those who have a contracted role as well). And have recently supported Adult Social Care on the recruitment of a large number (50) of Care Crew workers.

Supporting Apprenticeships

The apprenticeships co-ordinator transferred from HR to the newly formed apprenticeships team in Families, Children and Learning who now manage the councils apprenticeships programme as part of future skills and employment planning for the city. HROD provide specialist commissioning support working with further and higher education to ensure we have access to the best apprenticeship providers locally.

Employee casework activity

We analysed customer feedback to tailor our support and ensure a more consistent level of advice. We have developed a data sharing process in relation to case work and general queries we receive.

Learning from case reviews records equalities implications and is shared (anonymously) with the Corporate Equalities team and /or the Workforce Equalities Group (WEG).

Employment casework:

	Open cases as at 31/3/16	Cases open in 16/17
Disciplinary	60	141
Performance/Capability	20	16
Grievance	41	31
Probationary	1	13
Sickness	75	136
Total	197	337

(Schools accounted for 35% of cases)

We provided support to **154 formal hearings**

36 staff were dismissed (25 in non schools / 11 in schools). Of these:

- 12 were due to misconduct (8 in non schools / 4 in schools),
- 3 was due to performance capability (all 3 in non schools) and
- 5 staff were dismissed as they failed to successfully complete their probation period (4 in non schools/ 1 in schools).
- 18 were due to sickness-related capability (12 in non schools / 6 in schools)

27 of the disciplinary cases were related to bullying and harassment. The council takes any allegations of this nature seriously and investigates them in line with the disciplinary procedure to ensure its duty of care to the employee raising the concern is paramount.

Mediation

We are developing an in-house mediation service as we are keen to develop the offer of mediation across the organisation, and reduce the need to rely so heavily on formal processes. Mediation can be a very useful tool, in resolving workplace conflict and helping to build working relationships.

We intend to develop a mixed-model mediation offer within BHCC, which means we will be able to offer mediation through a pool of 12 employees, at different levels of the organisation who will be accredited workplace mediators. We will also offer external mediation where the circumstances support it.

HR workshops

The HR advisory team offer a range of workshops and short sessions on courses. These include:

Disciplinary Investigation and Hearing workshop: enables managers to competently undertake disciplinary investigations and both present and chair in hearings.

4 workshops have been delivered and attended by over 40 delegates

Change management: we developed a workshop focusing on service re design and restructures.

2 workshops have been delivered and attended by 20 delegates

How to effectively manage attendance management: develops and increases confidence in managing sickness under the attendance management procedure.

5 workshops have been delivered and attended by over 50 delegates

Redeployment

We have a dedicated redeployment coordinator to ensure consistency in the application of the new redeployment policy following an increasing level of organisational change activity, and feedback from parties involved in the process.

Templates & Toolkits

Since the release of the Service Redesign toolkit we have produced a restructure checklist for both Council and School restructures.

A suspension checklist has also been developed to ensure guidance is followed and consistency of approach particularly in relation to access to buildings and systems.

➤ Workforce Equalities Action Plan

Human Resources lead on the Workforce Equalities Action Plan now in year 4.

We continue to have a positive contribution from the trade unions and workers forums, through the **Workforce Equalities Group (WEG)**. This group which meets quarterly plays a key part in developing the action plan and also monitoring and challenging progress.

A report was presented to P,R&G Committee in June 2016 updating on progress against the year 3 action plan and proposed areas of focus for work in year 4.

“The Joint Fora is committed to working with Brighton and Hove City Council to support the organisation in making real and sustainable improvements as it undertakes the necessary changes to bring about full equality in its recruitment and selection, education and service delivery. We are concerned that since the Global HPO report, the council have not delivered on the recommendations fully.

The Joint Fora believe that more robust and evidence based monitoring and reporting of performance on a quarterly basis needs to be in place and that this should be embedded in future policies to ensure that it is implemented consistently through all levels of the Council.”

Workforce Equalities Group June 2016

This year’s work has had two primary areas of focus. The first on trying to improve our ability

to attract and recruit a greater diversity of employees, particularly from those groups that are under-represented within our workforce.

We re-designed our jobs site to make it more attractive and easier for applicants to navigate. We have improved our diversity messaging and guidance to help candidates complete their application forms effectively, in particular the knowledge, skills and abilities section.

We are regularly using positive action statements in our recruitment campaigns with some success and have worked collaboratively with our communications team and recruitment consultants, to develop and launch a new diversity recruitment campaign.

We have introduced a process for reviewing the length of person specifications for jobs as we identified that overly-long specifications poses a barrier to employment. In addition, to complement the council's new recruitment and selection policy, we have reviewed and improved the recruitment and selection e-learning module and skills workshops.

We participated in the assessment against the LGA's Equality Framework for Local Government. The council was rated as "Achieving" and the recommendations made by the assessors have been incorporated into the Workforce Equalities Action Plan's work programme together with the areas of focus identified from our second Annual Workforce Equalities Report covering 2015/16.

➤ Attendance Management & Well-being Activity

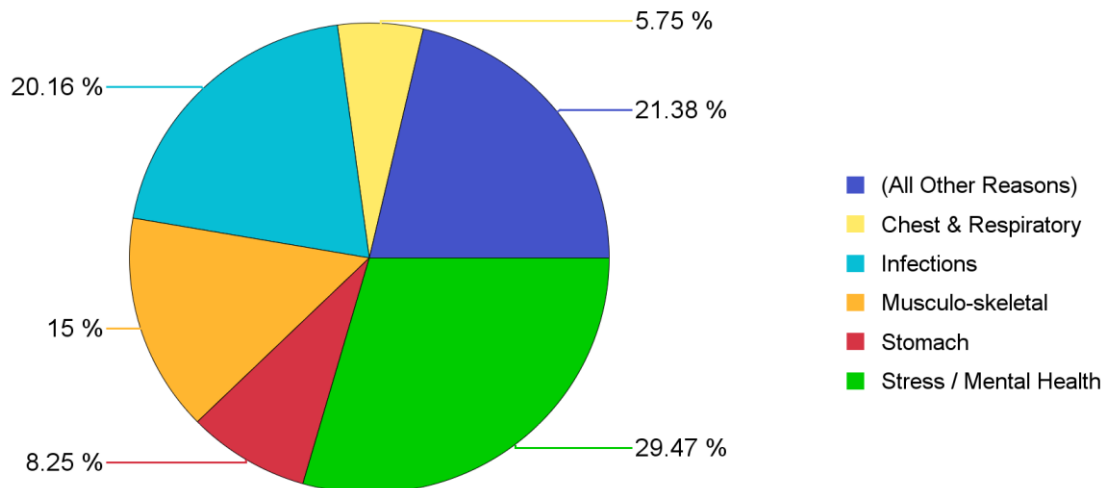
In November 2016 a report was agreed which recommended that the Attendance Management Procedure should be reviewed, that mandatory e-learning should be undertaken by all managers on attendance management and that a full business case on introducing an occupational health nurse-led sickness reporting service and new attendance management system should be considered.

It is anticipated that following recent approval an occupational health nurse-led sickness reporting service a new attendance management system for the whole Council will be introduced in the autumn of 2017. As a result, the above work is continuing on attendance management and a project plan has been developed.

Management information has been improved through the introduction of the Data Insight Reports for Directorates which have been provided since September 2016 and provide information by teams on return-to work interview compliance and level of sickness absence by service area.

The final sickness outturn and cumulative days lost during the year 2016/17 is 10.59 days which is below last year's outturn result of 11.05 days, but above the council target of 9.7 days.

Top 5 Reasons by Days Lost - Level 1



Actions supporting sickness management

- Business Partners continue to present the quarterly Our People Data (OPD) reports to DMT's, highlighting areas of concern around absence levels and reasons for absence.
- Directorates are provided with a monthly sickness report at Corporate Management Team (CMT) level, which shows absences that have started or ended in the preceding month, and can be used to monitor absence management. The reports highlight when an employee has reached an absence concern level, as well as when a referral to Occupational Health should be considered. All Heads of Service have met with the sickness lead for their directorate and are able to set performance objectives in relation to sickness absence management.
- A project plan has been developed to cover the review of the attendance management procedure, mandatory e-learning for managers and the implementation of an occupational health nurse led sickness reporting service and new attendance management system.
- Co-ordination of the Health & Wellbeing Group meetings which have been held over the past 12 months with unions, managers and HR staff looking at how the current attendance management procedure could be improved. The results of this will feed into the review of the attendance management procedure, which is scheduled for the new financial year.
- The lead HR advisers for sickness have worked closely with managers to improve the management of sickness by providing the following support:
 - Providing guidance to senior managers to ensure that monthly sickness data can be used effectively to monitor action on sickness;
 - Support directorates / divisions to agree strategies for managing performance in relation to sickness including setting objectives in relation to the management of sickness absence;
 - Identify outstanding areas where sickness absence training needs to be provided;
 - Provide targeted support to areas with high sickness levels, such as running sickness surgeries to coach managers to seek creative solutions to absence issues.

➤ Occupational Health & Wellbeing

The Council commissions the provision of an occupational health service and employee **assistance programme which provides;**

- a secure occupational health online portal for management to submit & receive occupational health information.
- a new staff counselling service, which provides unlimited freephone telephone access, **24 hours a day, 365 days a year**, including information & advice.
- Management support is also available on the freephone line, to help managers when handling difficult & sensitive conversations with staff.
- formalised contract review and improvement meetings

Authorisation to engage the market on the procurement of Occupational Health and Staff Counselling Services (to commence from 1st April 2017) was given at the Council's Policy, Resources and Growth Committee on the 13th October 2016.

Approval was given by the Committee for the recommendation to procure and award two contracts under the Surrey County Council SCC RN Employee Health and Well Being Framework (the "Surrey Framework Agreement") for the continuation of the occupational health and staff counselling services when the existing contracts ended. These will be 4 years in duration and will run from April 2017 to March 2021.

Access to the Surrey Framework Agreement facilitates collaborative working with our Orbis partners. A value for money exercise concluded it would be advantageous for the Council to access the Surrey Framework Agreement and benefit from the savings generated from economies of scale. The Council will benefit from the transfer of the current occupational health contract to the same provider, enabling a smooth transition to the new contract and incurring no additional implementation costs for the service.

Through our **Occupational Health service** we have:

- Provided occupational health appointments to 888 members of staff.
- Undertaken analysis of the top three reasons for referral which were; mental health issues (41%), all other reasons (32%) and musculoskeletal disorders, injury and fracture (27%).
- Ensured appropriate triage of Occupational Health referrals to the relevant specialist, i.e. physiotherapist, mental health nurse.
- Provided early intervention support for staff referred to occupational health at an early stage; i.e. still at work or where absence is less than a month.
- Provided guidance to management and staff on the provision of occupational health telephone consultations.
- Focused on raising awareness to management and schools, ensuring appropriate referral to Occupational Health (OH). This provides assurance the process is of value and provides useful and timely advice. This is achieved through attendance management training and OH/Attendance Management discussion sessions, focusing on ensuring managers understand why they are referring to OH, and an emphasis on considering what recommendations have or haven't worked if referring a member of staff in further times to OH, for the same condition.

Employee Assistance Programme

759 contacts were made to the service as shown below

All Contacts by Type	Qtr. 1	Qtr. 2	Qtr. 3	Qtr. 4	YTD	
Telephone Information	7	12	9	16	44	6%
Telephone Counselling	88	116	143	129	476	63%
Face to Face Counselling	55	50	60	58	223	29%
Online Counselling	9	3	4	-	16	2%
TOTAL	159	181	216	203	759	

Communications on Staff Support



Stress and resilience



Staff counselling



Mental health



Health & wellbeing resources



Reasonable adjustments



Staff forums



Trade unions



HR support



Health & safety



Sport and physical activities



Career guidance



Learning & development

Information outlining support available to staff has been updated on the Wave which includes internal support and a selection of external support resources.

Stress Prevention/Management/Time to Change



let's end mental health discrimination

The Council are supporting Time to Change, England's biggest campaign to end stigma and discrimination faced by people with mental health problems.

Signing up to the Time to Change pledge in 2016 was part of a joint strategy by the council and NHS Brighton & Hove: *Happiness: Brighton & Hove Mental Health and Wellbeing strategy*

(2014-17). <http://www.brighton-hove.gov.uk/content/health/mental-health-and-wellbeing/our-mental-health-and-wellbeing-strategy>

As part of the Council's plan to demonstrate action will be taken to tackle stigma and discrimination, a survey was developed for staff completion, to assess how well the Council is meeting employee mental health needs. This survey was developed as part of a research project reviewing stress and mental health policies, training and tools for managers, raising awareness and reviewing support provided to staff.

Health & Wellbeing Group

This group was formed to ensure greater consistency in the application of the 'Attendance Management Procedure'. Attendees included management representing services across the Council, HR, Disabled Workers and Carers Network representation and unions. The groups remit was also to review the equality impact assessment recently developed for the 'Attendance Management Procedure'. An outcome report and recommendations were produced which will be used to shape the review of the sickness procedure and policy that is currently being re-written.

Health & Wellbeing Activity

A targeted plan of NHS health checks and wellbeing assessments have been arranged to commence in July 2017. The health checks and wellbeing assessments will be carried out by 2 nurses from the Council's Healthy Lifestyles Team, in service areas across the Council, identified from a variety of data; 2017 staff survey results, data insight reports and sickness absence data. The results obtained from the nurses will capture information regarding staff needs in relation to physical and emotional wellbeing. This will inform the Council's approach to employee health and wellbeing, and be used to target relevant interventions/signposting to appropriate support.

➤ Workforce Development Activity

New Learning Management System



The new learning management system - the [Brighton and Hove Learning Gateway](#) is now live and working largely as commissioned. The Gateway provides 24/7 access to courses and elearning to 10102 registered users.

The Gateway was commissioned to improve customer service and help automate previously many manual tasks. Over 106,000 transactions – bookings, cancellations and other associated tasks have been managed through self service.

This year the council allocated training and budgets of £1.009m to all council services. Of this the central Workforce Development Team manages around £593,000; the majority of this budget supports adult and children's services.

To supplement the above budgets the workforce development team generated income through various bids in partnership with other local authorities. Last year this was approx. **£688,000** to support social worker recruitment, development and practice. See partnership activity in section 7 below.

Training Courses

The total numbers of people attending training has increased to 11,891 and the total number of courses delivered was 998.

Health and Safety training programme Over 24 different courses have been delivered through 92 training events to 997 delegates. This includes bespoke training events which have been tailored to meet the specific needs of teams and services.

Large scale regional events are also supported by the Workforce Development Team – the annual social care conference attracted over 1000 people with smaller numbers attending the adults safeguarding conference. Over 300 people attended a children's social work conference.

Online Learning We increased the number of live elearning courses from 104 to over 120. Elearning course enrolments totalled 5,980 over the year, 3,388 enrolments by council staff.

Qualification support completed across children's, adults and housing services including:

- 50 Qualifications and Credit Framework Diplomas
- 62 SW Continuing Professional development modules
- 5 Bursary qualifications
- 54 Deprivation of Liberty refreshers
- 24 AMHP Refreshers

External CPD Funding numbers supported:

- 3 Adults
- 14 Children's (plus a number of places on group relations conference but I don't have the numbers)

We have again maximised the use of internal training rooms, **saving an estimated annual expenditure of £145,650** on external room hire costs based on a city wide average day rate of £150.



The new system is great by the way. So simple. No forms and chasing busy managers for signatures and cost codes. Makes life so much easier!

**Jimmy Hollingworth,
Business Manager, Longhill School**

The new learning management system - the 'Brighton and Hove Learning Gateway' is now live and working largely as commissioned. The Gateway was commissioned to improve customer service and help automate previously many manual tasks.

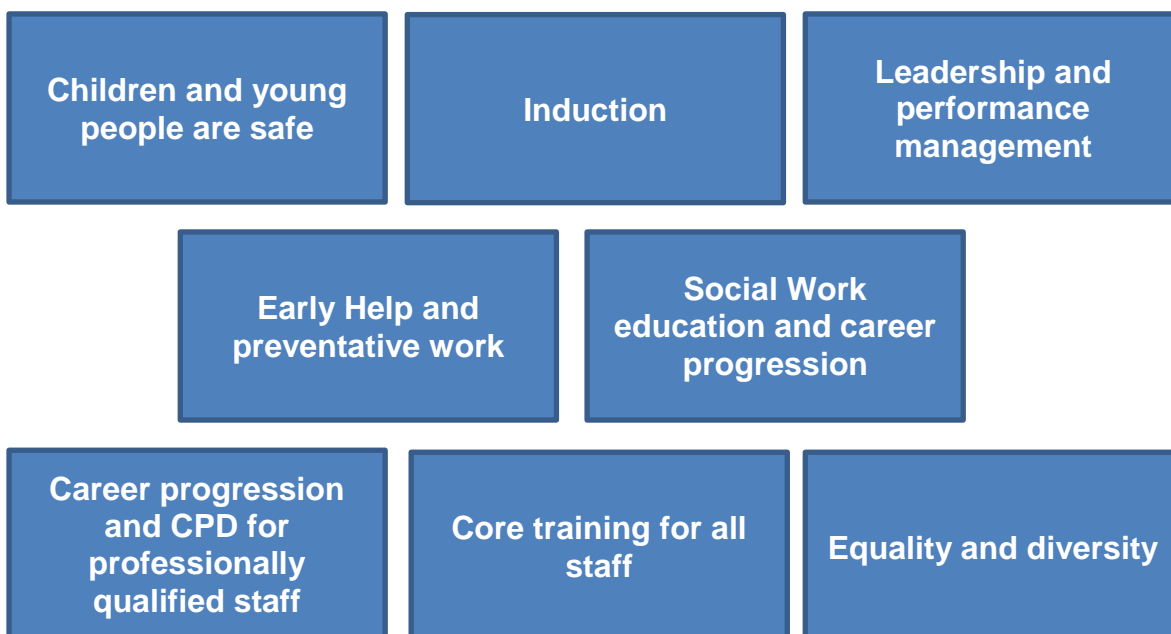
24/7 access to course booking and elearning
10,102 people registered on the Learning Gateway
106,000 transactions

We provide a range of courses to all council staff and some partner organisations in Brighton & Hove including:

- A council wide development programme
- An adult social care development programme. Supporting services to meet statutory requirements and deliver services that are safe, responsive, caring and well led.
- A children's workforce development programme
- Elelearning and technology enabled learning

Thank you so much for the training, it was just what the team needed and my team are already telling me how useful they have found it and how it will support them with writing clearer assessments and support plans which reflect the outcomes the carer wishes to achieve. This in turn will make it much easier for me to scrutinise any funding applications they submit to help the carers to achieve their outcomes. Thanks very much again for planning such a great, interactive session!
Katy Razavi: Operations Manager.

We have introduced a Workforce Strategy for Families, Children and Learning. The strategy sets out the broad areas for workforce development in Families, Children and Learning. It explains how we work with the service to develop a high performing, fully engaged workforce with the right skills and how leaders across the service will have the capabilities to deliver priorities. There are eight workforce development areas outlined in the strategy:



6. Partnership Activity

We continue to work collaboratively and in partnership with a range of **City and Regional Partnership Networks**, within the council and externally. This is an important area given the budgetary constraints across the public sector:

South East ADASS Workforce Development Group – this group which represents 18 local authorities in the region, identifies and collaborates on projects of joint interest to support the region’s adult social care workforce. The group has developed a regional workforce plan.

Development pathway for social work

The Workforce Development Team has worked closely with Principal Social Workers in adults’ and children’s services and partners to create and deliver a coherent development pathway for social work, including:



South Coast Regional Centre for Social Work (SCRC) Teaching Partnership

- Brings together Brighton & Hove and East Sussex County Councils and the Universities of Brighton and Sussex.
- Running until end March 2018 this represents a £208k investment in social work education in Brighton & Hove from DfE funding secured to deliver on the key workstreams under the SCRC; Student Learning Hubs, Professional Practice Development Hub, Practice Research Hub.



Continuous Learning & Assessment Model (CLAM)

- The Workforce Development Team has worked closely with the Principal Social Workers in adults’ and children’s services to develop a model for social work CPD and career progression that brings together regulatory, CPD and emergent national accreditation requirements into a ‘one stop shop’.
- The [CLAM](#) is a live model that will respond to local and national agendas. East Sussex County Council has recently confirmed it will be adopting the CLAM.



Step Up to social work

- The Workforce Development Team led a successful bid to the DfE in January 2017 securing £480k to support a qualifying route to children’s social work called ‘Step Up to social work’; fast-track, 14 month post-graduate qualifying route delivered in the workplace.
- Funding supports trainee salaries, course fees and administration within Brighton & Hove and East Sussex County Councils; trainees will be selected in July 2017 and commence the programme in April 2018.

Sussex Collaborative Workforce Integration Group – includes representatives from adult social care and health across the county working on workforce issues common to the health and adult social care sectors.

Schools Partnerships

We work in partnership with schools and academies in the city to provide a range of traded services including HR advice, Payroll and Pensions, Health & Safety and Occupational Health & Wellbeing. During 2016/17 HR retained 100% buy back from LA-maintained and voluntary aided schools.

Following the success of the separate HR Advisory and Payroll customer focus groups last year, we have merged the groups to carry on the continuous improvement of services to our schools and academies. The merged Schools/HR Customer Engagement Group is formed of a number of schools representatives, including Business Managers and Headteachers, as well as staff from HR. It provides an opportunity for members to feedback and contribute to service improvements and share this with their schools and others in their partnership groups.

Work in 2016/17 has included:

- Re-design and re-launch of the Schools HR pages of the Wave: these were redesigned in liaison with the Customer Engagement Group, who appreciate the resulting improved user friendly access to key HR information
- Re-design and streamlining of HR Payroll processes including improved electronic reporting systems from schools to payroll, saving time for both parties
- New toolkits have been developed on Organisational Change and Disciplinary Processes and these are now available and used by school via the Wave
- The 2016/17 Teacher Pay & Appraisal Model policy and guidance documents were published following detailed consultation with headteachers and teacher unions.
- Schools have received 'live' updates on HR issues via weekly School Bulletins (37 issued), termly Heads HR Briefings (3 issued) and twice termly Business Manager & Bursar Briefings (6 issued);
- Work has continued in providing schools with workforce equalities monitoring information and pursuing joined up initiatives with Education & Inclusion & the Council Workforce Equalities plan;
- Continuing liaison with BHCC Education & Inclusion colleagues to provide specialist HR support for governors and school leaders to help school improvement.
- Regular attendance at School Partnership Groups to develop a better understanding of current issues faced by schools to ensure appropriate support.

HR are part of the **Brighton & Hove Education & Enterprise Market Place** (BEEM) online portal to extend opportunities for communications with school colleagues.

We also provide HR payroll support services to:

- City Academy Whitehawk
- The Bilingual Primary School
- Citizens' Advice
- South Downs National Park

7. Service Focus for 2017/18

This report has highlighted the broad range of achievements and challenges over the last year for the HROD service.

We review our performance against our service plan through the year and undertake a final review in March each year to assist our service planning for the future year. Our key areas of focus relate to activity that will support the council's overall objectives.



8. Transitioning to the Orbis partnership

Brighton & Hove City Council has become a founding partner of the Orbis shared service partnership with East Sussex and Surrey County Councils. This partnership offers an alternative delivery model for support services including Human Resources, Health & Safety, Workforce Development, ICT, Finance and Property services and the business case for joining has been progressed as part of the council's modernisation programme and was agreed at Policy, Resources & Growth Committee in October 2016.

Orbis is committed to a people-centred approach with a focus on developing staff and building resilient shared services that are delivered by the public sector but also have the ability to

grow by providing services to others. It achieves economies by creating scale, increasing standardisation where possible, and minimising duplication. There is a strong rationale for integration including added resilience for a function that is at the heart of supporting change

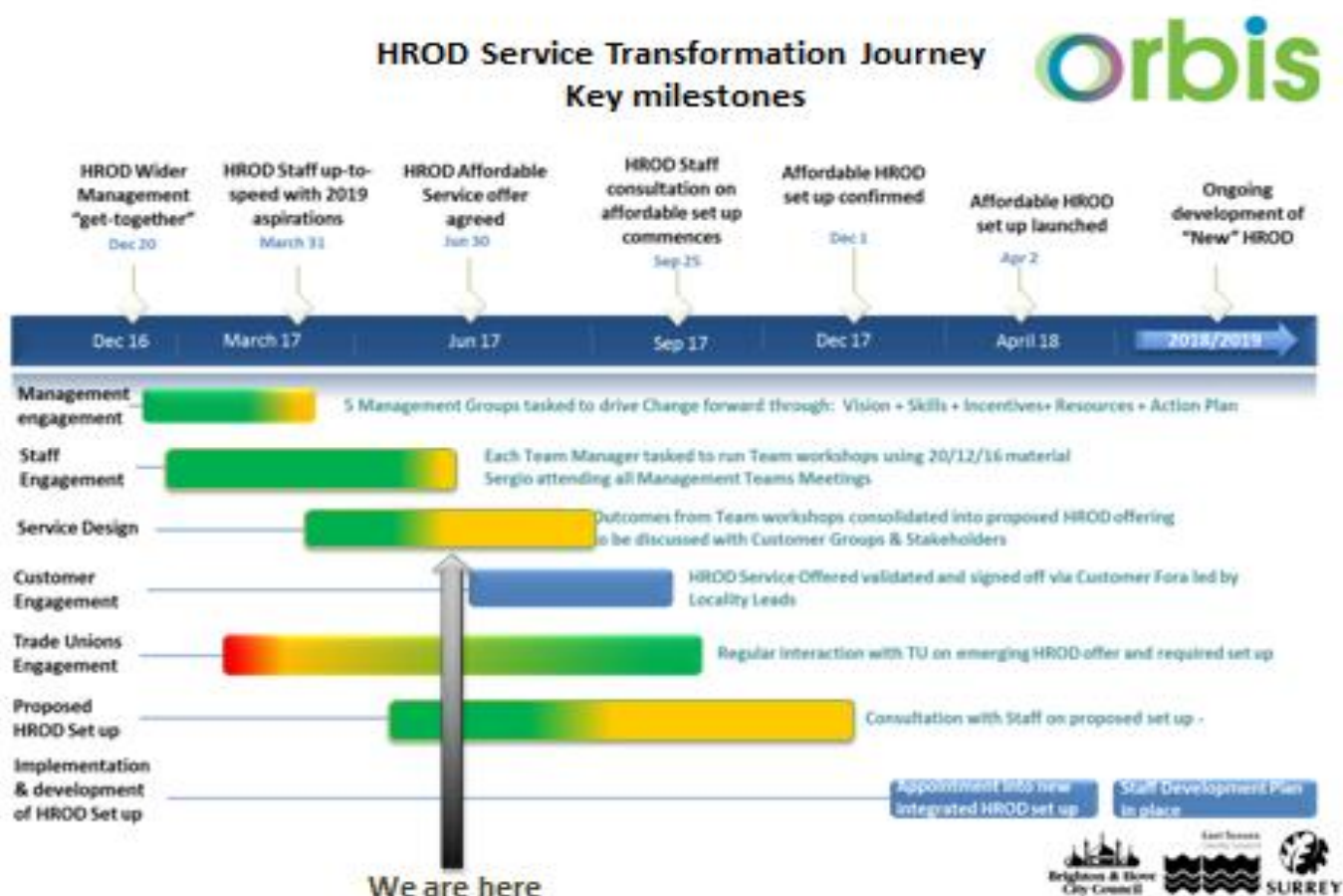
Benefits and opportunities

- Pooled knowledge and expertise
- Smarter use of resources
- Shared professional reference
- Procurement/ commissioning
- Enhanced service offer
- Economies of scale

Work has already started to create an integrated HROD service offer across the partnership. This has been through an ethos of co-creation with the HR team and planned customer engagement to ensure the service offer is sustainable, affordable and meets the needs of its partner organisations.

It is planned to undertake a period of stakeholder engagement over the summer of 2017 and start formal consultation in the autumn, with a new service offer in place from April 2018.

The stages of change are set out below:-



9. Help us to help you

Delivering the best services for our city relies on ensuring we have the right people in the right roles doing the right things at the right time. HR&OD play a key role in supporting the organisation to achieve this. We need to ensure our service responds to the changing needs of the organisation.

You should be able to find all the information you need on the [HR section of the Wave](#), or talk to your manager.

How can you help? Tell us what you think we do well and when things haven't met your expectations. Email: HRODCustomerFeedback@brighton-hove.gov.uk.

Report of: **Head of Health & Safety**

Committee: **Corporate (Whole Council) Health & Safety Committee**

Subject: **Health & Safety Team Annual Report
April 2016 to March 2017**

Date: **June 2017**

Table of Contents

		Page
	<u>Executive Summary</u>	3
1.	<u>Introduction</u>	5
2.	<u>The Management of Health & Safety</u>	5
2.1	<u>Health & Safety Assurance</u>	6
3.	<u>Safety Management Systems</u>	7
3.1	<u>Team Safety</u>	7
3.2	<u>Incident Reporting System & Clients of Concern Register</u>	7
4.	<u>Access to Competent Advice</u>	7
5.	<u>Accident / Incident Overview</u>	8
5.1	<u>Responding to Liability Claims</u>	8
6.	<u>Training and Development – Competent Workforce</u>	9
7.	<u>Policy & Project Work</u>	10
7.1	<u>Health & Safety Policy</u>	10
7.2	<u>Health & Safety Standards</u>	11
8.	<u>Audit, Assurance & Compliance</u>	11
8.1	<u>Audit</u>	11
8.2	<u>Asbestos Management</u>	11
8.3	<u>Fire Risk Management</u>	12
8.4	<u>Contractor Management</u>	13
8.5	<u>HSE National Waste Intervention Inspection</u>	13
9.	<u>Consultation and Committee Structure</u>	13
10.	<u>Communications</u>	14
11.	<u>Partnership Working / Service Level Agreements</u>	14
11.1	<u>Partnership Working</u>	14
11.2	<u>Service Level Agreements</u>	15
12.	<u>Conclusion</u>	15

Appendices

- [Appendix 1 Feedback on our service](#)
- [Appendix 2 Enforcement / Regulatory Services Activity](#)
- [Appendix 3 Accident / Incident Summary Data](#)
- [Appendix 4 Health and Safety Training Data](#)
- [Appendix 5 Policies and Standards](#)
- [Appendix 6 Health & Safety Audit](#)
- [Appendix 7 Fire](#)
- [Appendix 8 Contractor Management](#)
- [Appendix 9 Health and Safety Plan](#)

Executive Summary

This Health and Safety Annual Report covers the period of 1st April 2016 – 31st March 2017 and sets out the Council's management arrangements for health, safety and welfare. It outlines what has been achieved in the last year and also sets out the priorities for 2017-18.

The Council continues to redesign how services are delivered and in the challenging economic climate, new approaches to risk management have to be adopted. The management of change continues to have the potential for exposure for the council which heightens the need for robust governance and assurance controls.

New sentencing guidelines introduced by the Sentencing Council in February 2016 have seen a dramatic shift in sentencing of health & safety offences by the courts. More custodial sentences and significantly higher fines reinforce the need for robust risk management. Brighton and Hove city council's commitment to high standards of health and safety management continues to ensure a proportionate approach to risk management.

The Corporate Health & Safety team (H&S Team) continue to support organisational change and have delivered £50k service savings in the last 12 months. Work has started to plan integration into Orbis, the shared services partnership with East Sussex County Council and Surrey County Council.

Achievements in the past year include:

- Embedded community initiatives partnerships through partner agencies and the community and voluntary sector to join our resources to protect vulnerable groups in the city
- Successful delivery of match funded fire safety initiatives with East Sussex Fire & Rescue service
- Maintaining high customer satisfaction levels
- Continued delivery of service level agreements achieving 100% services to schools buy back
- Effective joint working to investigate all health and safety incidents and successfully defending over £4million pounds of personal injury claims (since 2012)

We can again report that no formal health and safety enforcement action has been taken against the council.

Priorities for the coming year include:

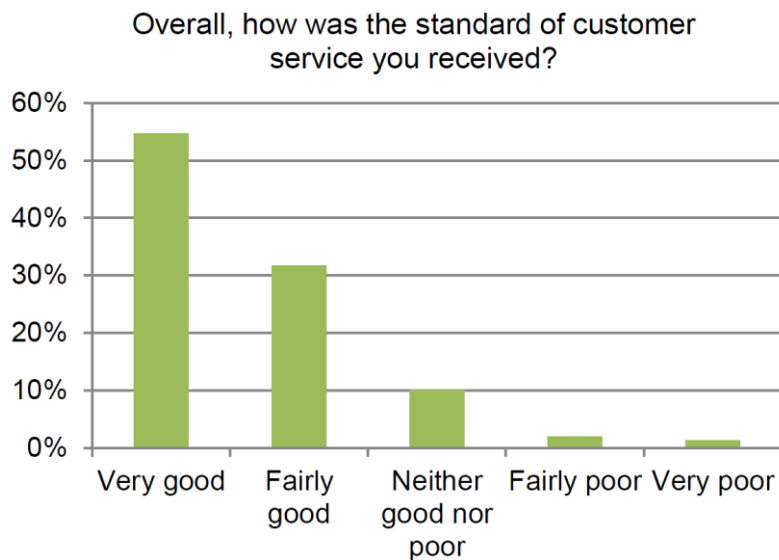
- Plan the transition of the health and safety service into the Orbis Partnership
- Continue to support the organisation through change to ensure health and safety management arrangements remain effective
- Deliver assurance activities outlined in the Team Plan to ensure the council remains compliant
- Explore and grow commercial opportunities and manage the delivery of H&S Service Level Agreements
- Participation in risk management partnerships supporting effective collaboration and resource allocation

Feedback on our service

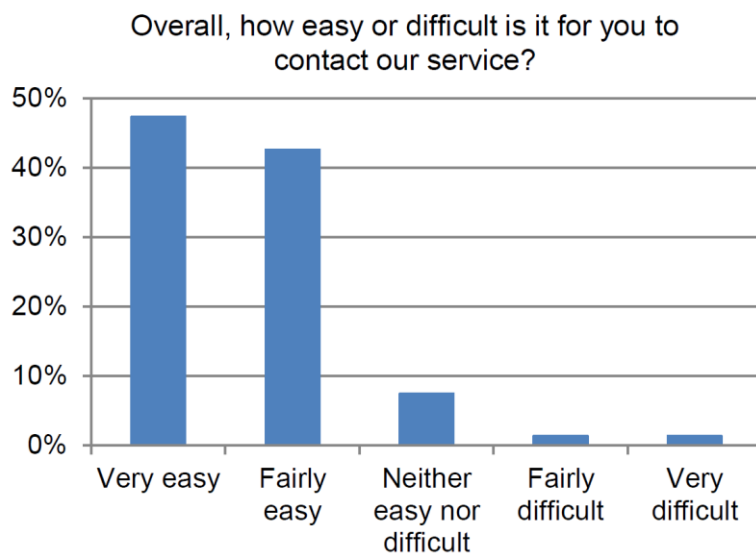
The second council wide Finance & Resources Customer Survey was undertaken between 1st December 2016 and 6th January 2017. The survey was completed by 12% (514 responses) of an estimated 4,387 staff headcount and included written feedback about services as part of the survey.

A summary of the results with regard to the Health & Safety service is provided below:

Q. Overall, how was the standard of customer service you received?



Q. Overall, how easy or difficult is it for you to contact our service?



90% of respondents reported our service was 'Very Easy' or 'Fairly easy' to contact. Feedback within the survey showed that our customers valued the ease of access of our service through the Duty Officer System. It is particularly pleasing to note the high customer service ratings in the context of reducing budgets and growing demand.

Examples of feedback for our service is included at appendix 1

1. Introduction

The Government's 'Revitalising Health and Safety' strategy recommends that public bodies summarise their health and safety performance in an Annual Report. The council as a unitary authority is involved in a wide range of work activities, delivering some services directly and others in partnership or through commissioned providers. This creates a diverse risk profile that requires tailored approaches to ensure appropriate assurance is given on the Health and Safety management arrangements.

This report details activity provided by the H&S Team during the period 1 April 2016 – 31 March 2017 and includes the Health and Safety Plan in Appendix 9, detailing priorities for 2017/18.

2. The Management of Health & Safety

Health & safety is a key component of the council's performance management framework, which can be seen in the model below. Performance management and monitoring against each of these elements ensures continuous improvement.



The council's commitment to health and safety is expressed as a 'statement of intent' within the health & safety policy and management standard. The council continues to use 'Team Safety' as its safety management framework which enables services to tailor their risk management arrangements based on service hazards.

The safety management framework is supported by health and safety standards and supporting documentation which help to ensure compliance with relevant legislation. A framework is in place to monitor safety performance via Departmental Consultative Committees which are chaired by Directors, and via the Corporate Health and Safety committee chaired by the Chief Executive.

The H&S Team provide competent advice and undertake a range of assurance activities such as; audits, inspections and incident investigations and are the first point of contact with enforcement and regulatory agencies.

The H&S Team continue to maintain the legal register which ensures any changes to health and safety legislation are identified, assessed in terms of potential impact on the council and communicated to appropriate duty holders.

2.1 Health & Safety Assurance

New sentencing guidelines introduced by the sentencing council in February 2016 have seen a dramatic shift in the sentencing for health & safety offences by the courts. They apply to organisations and individuals convicted of offences.

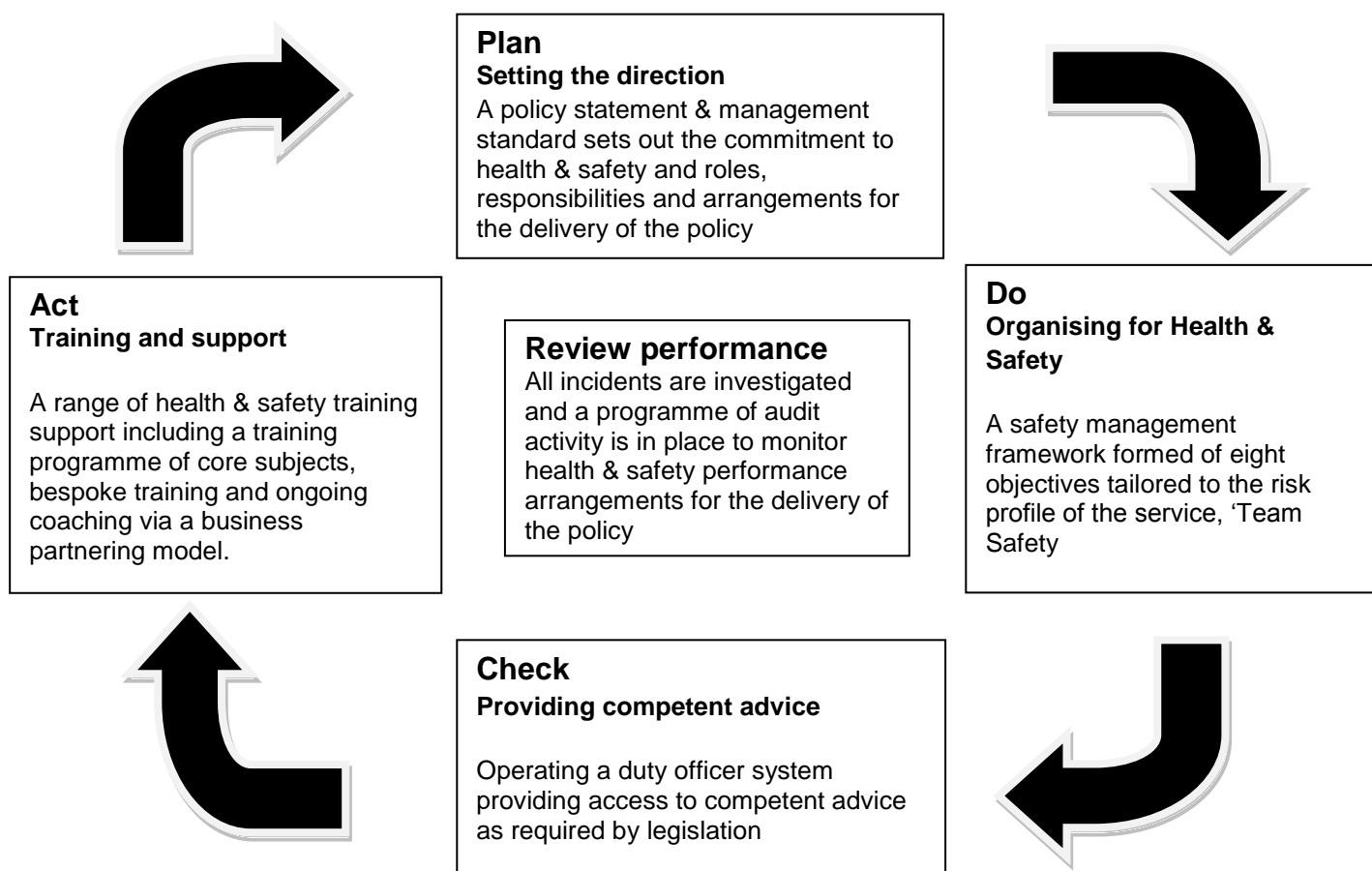
Key Changes:

- higher thresholds for fines linked to the financial position of organisations, (in the case of local authorities this will be based on the annual revenue budget, which includes government grants, council tax receipts and other income).
- the increased likelihood of custodial sentences
- the decision to prosecute now based on potential for harm as well as where harm has resulted

In their first six months there have been as many penalties of £1m as there were in the previous two decades combined. The major factor behind the increase are the instructions to courts to weigh the potential for harm rather than just the actual harm caused, therefore duty holders can be prosecuted for failings when no accident has occurred. The guidelines reinforce the need for robust assurance and governance of risk management arrangements.

The assurance framework adopted by the council aligns to Health and Safety Executive (HSE) guidance HSG 65 'Managing for Health and Safety'.

A key role for the H&S team is to ensure the council has a proportionate approach to risk management. We continue to maintain and review the safety management framework which incorporates:



3. Safety Management Systems

3.1 Team Safety

The council continues to use its well-established safety management framework 'Team Safety' to ensure legal compliance and proactively reduce risk and prevent accidents. Team Safety is fully modular, enabling services to tailor safety management arrangements proportionate to the risk profile of the service.

3.2 Incident Reporting System & Clients of Concern Register

The council continues to support a positive incident reporting culture to ensure all incidents are investigated and appropriate action taken. We have worked in partnership with ICT to make on line reporting easier. Future collaboration with ICT will determine what resource should be allocated to development. The pace of ongoing organisational change and capacity within ICT to undertake the work required to reflect these changes remains a challenge. This has led to incident data in the quarterly & annual reports not matching current organisational structures.

An enhanced Clients of Concern Register (CCR) and quick-search portal on the Wave was developed with ICT during 2015 to improve how client details were presented. There were system integration issues which caused unreliable search results to appear. During 2016/17 ICT created a replacement 'quick-search' on another platform which was reviewed and tested by H&S. The release of this portal has been approved by the ICT Change Board and is awaiting launch.

The absence of an annual CCR review process to review individuals on the Clients of Concern Register, noted by the Local Government Ombudsman, led to collaboration between H&S and ICT during 2016 which resulted in a CCR review process that enables the online review of over 300 listed individuals.

Due to the number of reviews required and the limited amount of reviewers in each directorate, the process is being controlled and monitored by the H&S Team:

112 reviews started	83 completed	41 entries removed from the CCR	42 clients retained
---------------------	--------------	---------------------------------	---------------------

The review of all entries will be completed by the end of June 2017. The next phase in development work to be agreed by ICT is to create a system automated process.

4. Access to Competent Advice

The corporate H&S Team provide competent advice whilst supporting organisational change. In the last 12 months the team has delivered £50k service savings through reduced staffing and reviewed training delivery. Work has started to plan integration into Orbis, the shared services partnership with East Sussex County Council and Surrey County Council which will continue to explore opportunities for building resilience.

The H&S team include technical specialists who provide advice and support. The team operate a duty officer scheme ensuring staff and managers have access to advice and guidance. H&S staff are members of the Major Incident Support Team, Safety Advisory Group and Risk Management Steering Group as well as being closely aligned to their business areas.

All members of the H&S team have NEBOSH qualifications. Three have the P405 Management of Asbestos in Buildings qualification. Members of the team also have Fire Risk Assessor qualifications and provide technical design and risk management fire safety advice. Trained team members act as the Radiation Protection Officer for our secondary schools and for Portslade Aldridge Community Academy.

5. Accident / Incident Overview

Quarterly and annual statistical information continues to be provided to the Corporate Health and Safety Committee and Directorate Consultative Groups to review safety performance, identify trends and implement appropriate remedial actions.

The overall number of reported incidents has increased this year and there has been a broadly equivalent increase in absence days as well. The level of HSE reportable incidents has fallen significantly and near miss reporting remains consistent with previous years. The top three causes of absence were:

Incident Cause	2016/17	2015/16	2014/15
Challenging behaviour	277	226	127
Slips, trips & falls	230	200	234
Violence and aggression	282	217	221

The cost of Occupational Sick Pay from 77 (78) incidents that resulted in absence was £66,561 (£66,476). This is not the total cost of the absence, it does not include costs of covering the member of staff, or liability claims, however the figure gives an indication of economic impact of the absence.

Incident reporting with our Chartered Institute of Public Finance & Accountancy (CIPFA) benchmarking partners for 2015/16 shows that BHCC has 5.1 (4.5)* RIDDOR reported incidents per 1000 FTE whilst the average rate of our benchmarking partners is 4.5 (6.9)*. BHCC has a positive incident reporting culture which ensures incidents are reported and investigated to learn any lessons. Incident reporting and outcomes directly impact on liability claims and the council's insurance premiums. The data for 2016/17 is currently being collated by CIPFA.

A summary of the incident data is included at appendix 3

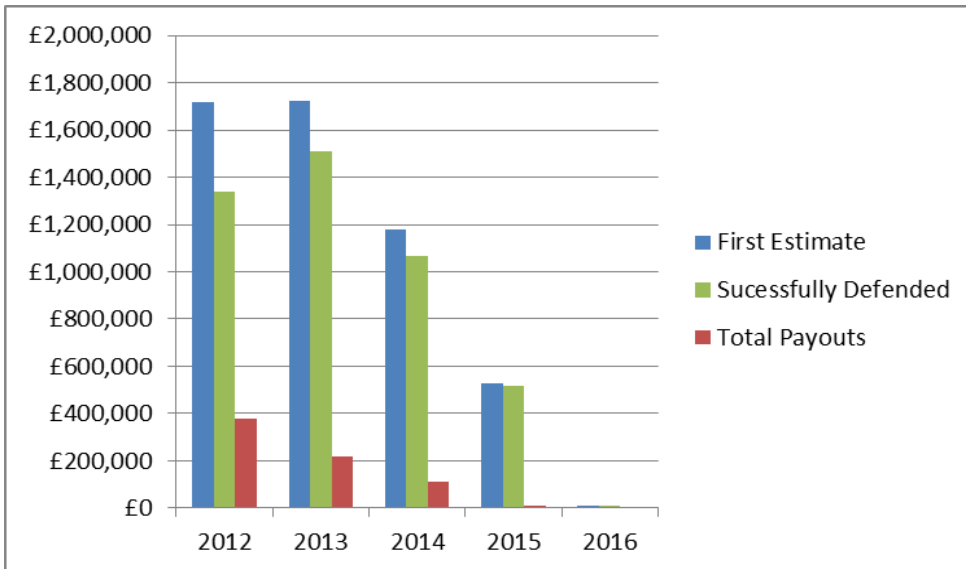
5.1 Responding to liability claims

The H&S Team work closely with the insurance team and the council's insurers to investigate personal injury. Through this partnership working we ensure appropriate remedial action is taken where failings can be attributed to the council including compensating any losses.

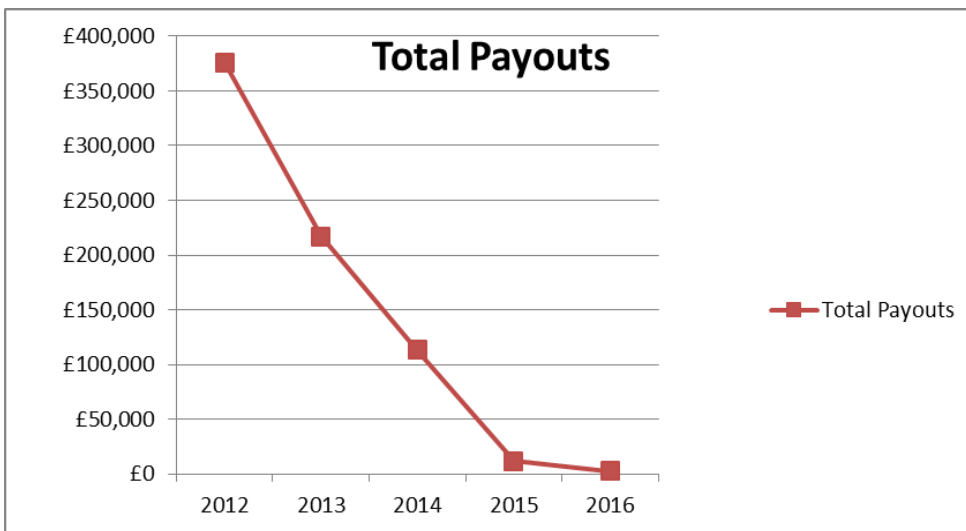
We also ensure claims are robustly defended where the council has discharged its duties in accordance with relevant legislation and standards. Over the past 5 years the council has successfully defended over £4 million of personal injury claims. A summary of the claims history is detailed below:

Year	First Estimate	Total Pay-outs	Successfully Defended
2012	£1,717,373	£376,030	£1,341,343
2013	£1,724,198	£217,001	£1,507,197
2014	£1,180,535	£113,165	£1,067,370
2015	£525,739	£11,630	£514,109
2016	£11,448	£2,646	£8,802
Total	£5,159,293	£720,472	£4,438,821

Personal injury claims by year



Graph 1: First Estimated, Defended and Total Personal Injury claims paid by year



Graph 2: Total Personal Injury claims paid by year

The final total of claims paid from 2014 onwards may change as the statute of limitations for making a civil claim is 3 years (and for children 3 years after reaching 21 years)

A summary of incidents is included at appendix 3

6. Training and Development – Competent Workforce

A wide range of health and safety training is provided to staff and external customers through a core programme, advertised as the 'Health and Safety Training Guide' through the Learning Gateway. The programme covers 19 different training subjects, 8 online learning modules and bespoke training upon request.

Training courses are delivered through a mix of externally commissioned trainers and by the H&S Team. All courses are quality assessed and delegate feedback is obtained electronically to ensure continual improvements are made.

92 training events delivered	997 delegates received training	Average course attendance: 88%.	718 staff completed online learning modules	14 staff completed IOSH Managing Safely Training
------------------------------	---------------------------------	---------------------------------	---	--

A review of the health & safety training programme was undertaken based on demand, delegate feedback and course attendance data which lead to the redesign of some courses. This has created savings by ensuring that the cost of training spaces is kept as low as possible, whilst maintaining an accessible and thorough training offer to meet the needs of the council and schools. A summary of changes is detailed below:

Management of Contractors (Works) and Management of Contractors (Services)	Courses were initially combined, and then re-launched as an online learning module
Personal Safety Training	The Personal Safety for Lone Workers and Personal Safety for Non Lone Workers courses were combined. There is also a bespoke team training option available to meet specific needs
Managing Health & Safety and Managing Health & Safety of Buildings	Courses were combined, redesigned and launched as 'Effective Health and Safety Management'. This course has a specific focus on Team Safety objectives and is aimed at staff responsible for managing the health and safety arrangements for a team or building.
Risk Assessment COSHH Effective Health & Safety Management	Commissioned to an external trainer, these courses have been redesigned with input from the Health & Safety Team to ensure they provide good value and high quality training with learning outcomes that meet the needs of attendees.
Fire Risk Assessment	Our Fire Safety specialist for schools refreshed this training to providing case studies for delegates to aid learning.

A summary of the work undertaken is included at appendix 4

7. Policy & Project Work

7.1 Health & Safety Policy

The council's health and safety policy comprises a single page 'Statement of Intent' identifying the council's commitment and aims and is supported by a management standard that sets out how the council organises for health and safety. This details; roles, responsibilities and arrangements for delivering the policy and reflects the council's values.

The policy was signed by the Chief Executive and endorsed by the Leader of the Council and the Elected Member Lead for Health and Safety on the 28rd October 2016.

7.2 Health & Safety Standards

Health and safety standards are reviewed as required to ensure they meet current best practice and any legislative changes. Newly implemented legislation is monitored and reviewed through the legal register to determine any relevance to council operations and services and where required health and safety standards are developed to meet them.

All health and safety policies, standards and associated guidance documents are ratified following consultation through the corporate Health and Safety committee and are published on the council's intranet. This year the team has reviewed and published 15 Standards and Policies, with others being close to completion.

A summary of the work undertaken is included at appendix 5

8. Audit, Assurance & Compliance

8.1 Audit

The approach for auditing changed from a 2 year Team Safety audit programme to focusing on themed audits and completion of manager's self-assessment checklists which are monitored by ELT via Data-Insight. The checklists give an overview of assurance status across all Team Safety objectives. Directorate specific audit priorities and hazard topics were identified and formalised within a directorate audit plan agreed at DCG/DMT. The following assurance activity undertaken:

18 internal audits completed	18 external care homes audited	162 managers' self-assessment checklists completed
------------------------------	--------------------------------	--

The results of the checklists help inform audit activity for 2017/18 and emerging themes related to:

- H&S updates were not reaching all teams
- Lack of awareness of the Threat Response process and Team Resilience assessments.
- The need to improve contractor management processes
- The need for improvement in some premises management arrangements
- Inconsistent completion of workplace inspections.

The H&S Team worked with the Internal Audit team to develop a SharePoint site to track medium and high priority audit recommendations. Close work with the internal audit team will continue through 2017/18 to provide a consistent audit model that reflects the ORBIS approach.

A summary of the work undertaken is included at appendix 6

Please refer to our Service Plan in Appendix 9 for details of our audit focus for 2017/18.

8.2 Asbestos Management

All council buildings have Asbestos surveys which include management action plans and the H&S team continues to provide assurance that these requirements are being met.

The H&S Team worked with Property and Design on the 'Asbestos and Fire precaution' element of a new data base 'Atrium'. Atrium acts as a comprehensive asbestos register which is the cornerstone of compliance with Control of Asbestos Regulations 2012. We will continue to assist in the future development of this database and monitor its use from a compliance perspective.

The H&S Team has continued to contribute to the Department for Education (DfE) Asbestos Steering Group. DfE issued a questionnaire during 2016-2017 aimed at identifying the level of compliance within all types of state school. Detailed data has not been released on the performance of particular schools. Part of DfE approach was to contact schools where they were concerned at the response and in the worse cases provide direct assistance to improve the level of compliance. No BHCC schools were contacted as part of this process. We are confident that all of our schools have both the information and management plans in place which we monitor through a system of targeted auditing.

Housing colleagues have completed a fundamental review of their policy and procedures. This review resulted in the “Asbestos Management Strategy for BHCC Homes and Communal Ways” which provides a strategy that clearly defines the requirements, roles, responsibilities and processes that Housing and their partners are required to follow to ensure compliance when managing asbestos within our housing stock. This is delivered in line with the Council’s Management of Asbestos standard.

As part of the project, the level of information, training and access to the asbestos register for Housing was increased. There is a clear survey/ resurvey and removal strategy and whole property surveys will be carried out as standard practice when undertaking works. Further awareness training is being delivered for housing staff and surveying staff are P405/P402 qualified in June 2017. This ensures tenants and staff are appropriately informed and protected from the risks associated with asbestos.

Asbestos management priorities for 2017-2018
Reviewing the Corporate Standard to encompass the changes reported above and to offer more detailed advice to colleagues working on sites not owned or occupied by BHCC.
Undertake an audit of the new Housing strategy.
Working with schools to roll out the new asbestos management plans and details stored on Atrium to ensure that schools have access to the information they need to maintain their current level of compliance.

8.3 Fire Risk Management

The H&S Team provides advice and undertakes assurance activity in relation to the management of fire safety required under the Regulatory Reform (Fire Safety) Order 2005 (RRO). The existing partnership with East Sussex Fire and Rescue Service (ESFRS) continues with regular meetings between the ESFRS Fire Safety Team and H&S Team. The council operates a tiered approach to fire risk assessment (FRA) whereby:

Stage 1 FRAs are undertaken by the H&S Team in Adults Services with sleeping risks (residential care & hostels), schools, travellers transit site and

Stage 2 FRAs are undertaken by local service managers in low risk settings / premises.

The H&S Team also undertake quality assurance of Housing & Corporate Landlord FRAs; key findings are reported to the Housing Fire, Health and Safety Board, chaired by the Head of Property and Investment.

The partnership with ESFRS Fire Safety Management has enabled a project to install residential sprinklers in certain high rise housing blocks. The pilot project at Somerset Point has been completed achieving enhanced safety for the residents. The project was instigated as a match funding initiative between ESFRS and Housing and has paved the way for further projects to be consulted and implemented subject to approval by the Housing and New Homes Committee.

Fire Assurance Activity

Sprinklers have been installed as part of the design in the new Extra-Care housing scheme 'Brookemead' and are being designed into the conversion of the Oxford Street Housing Office to temporary accommodation.

Fire safety audits of independent care homes where Council contracts are in place. These include audits on Fire Safety Provisions, where advice and mentoring can be offered to care providers.

Fire Safety audits of the American Express Community Stadium, on behalf of the Head of Building Control to fulfil the Local Authorities responsibility for enforcing the Legislation in sports stadiums.

Advising the Workstyles programme in the process of relocating staff to Hove Town Hall, liaising with third party Risk Assessors and completing the Fire Risk Assessment for the building

A summary of the fire work undertaken is included at appendix 7

8.4 Contractor Management

The Council engages a range of contractors to work on our behalf, to manage building works and provide a range of services across all departments. Management of contractors continues to represent a significant challenge for the council and the monitoring of their H&S arrangements remains a high priority for the H&S Team. Assurance activity included:

- inspections and audits
- incident investigations
- attendance in pre-start meetings to ensure standard setting in relation to health and safety and provide advice on compliance with legislation on a risk profile basis
- training for contracting officers

Monitoring visits to 18 independent care home and care support services was undertaken to help provide assurance to the Care Contracts Team about key H&S aspects as part of their care quality monitoring procedure. The programme of audit with the Adults Commissioning & Performance team was reviewed and an audit frequency of 4-6 homes/services visited each quarter was agreed.

The 'Management of Contracted Works and Services' training was combined in 2016/17 and concurrent activity was undertaken to develop the course into an eLearning module for 2017/18.

A summary of the work undertaken is included at appendix 8

8.5 Health & Safety Executive (HSE) National Waste Intervention Inspection

We supported CityClean during the HSE's Inspection as part of its' Nation Waste Intervention, this programme of inspections of LA waste and recycling collection activities assesses health and safety standards. The initiative aims to improve health and safety standards during collection of household waste and recycling and reduce the incidence of injury, ill health and days lost in the waste and recycling industry. The HSE Inspection team were satisfied with the safety management procedures in place.

9. Consultation and Committee Structure

The corporate Health and Safety Committee has continued throughout 2016/17, chaired by the Chief Executive and attended by senior management and appointed staff representatives. The committee meets quarterly and is a forum for identifying and discussing health and safety incidents, performance and actions to help address trends and emerging issues. New and reviewed H&S standards are presented and ratified. Departmental consultative groups are also held quarterly and are able to escalate service specific H&S issues for consideration at the H&S committee.

The Head of Health & Safety continues to meet regularly with the Chief Executive and the appointed health & safety trade union representatives to maintain effective consultation on health & safety issues. The H&S Team continue to work with staff representatives across the council in a commitment to joint working and achieving high standards of health & safety and a positive safety culture.

10. Communications

A dedicated health and safety page on the council’s intranet is maintained to provide information including: policies, procedures, templates, and minutes from health and safety committees, Team Safety information and training.

Schools access bespoke school’s policies, procedures and templates within a dedicated page on the Wave accessed via ‘Wave4Schools’. ‘Services to Schools’ information is communicated via ‘BEEM’, the council’s services to schools portal. Both the Wave and BEEM provide school training information.

We publish two health and safety newsletters; one for the whole council and the other specific to schools. These include any topics that require attention by teams and examples of best practice. The newsletter also details case studies of incidents investigated by the H&S Team or the HSE.

Urgent communications are issued via the ‘Daily Splash’ or ‘Announcement’ section on the Wave and school specific messages via the schools bulletin. 11 school bulletins were issued in 2016-17.

11. Partnership Working / Service Level Agreements

11.1 Partnership Working

The H&S Team continue to work in partnership with a range of services and teams, both within the council and externally. This is an important area given the budgetary constraints across the public sector. Listed below are some of these partnerships:

Partner	Partnership Working
Community Initiatives Partnership	Established in December 2014 to ensure vulnerable people are protected from coming to harm in their domestic environment. Members include ESFRS, Sussex Police, Voluntary Agencies and Health Partners. Its focus is embedding cross referral pathways and shared communication protocols and asset registers; and establishing a prioritised initiatives plan of ongoing and future initiatives including dementia, hoarding, fuel poverty and resettlement. A draft hoarding framework was presented at the Adults Safeguarding Board in June 17. A separate annual report outlining activity and the impact of the partnership is available.
Housing Fire, Health & Safety Board	Members are Housing, Corporate Health and Safety, East Sussex Fire and Rescue Service (ESFRS) and Mears. The board provides an assurance function and ensures that appropriate risk management controls are in place between the various duty holders involved in the management and maintenance of the Housing stock.
Property and Design	The H&S Team work in close partnership with Property and Design to provide advice to duty holders and assurance to the corporate H&S committee that management controls for its large property and land portfolio are suitably robust.

Partner	Partnership Working
Major Projects	We've supported Major Projects colleagues in relation to refurbishment works within Pavilions Estate portfolio; and advised on a fire strategy and safe roof access during refurbishment at the Corn Exchange which directly impacted on the operation of the Dome and its fire evacuation procedures.
School Support Services	We continue to work closely with internal partners to ensure a joined-up approach to specific health and safety issues. Partners include the Special Educational Needs (SEN) team; Education Capital Team; Behaviour & Attendance Partnership; School Workforce Development Team; the Outdoor Education Advisor and the Standards & Achievement Team.
Memberships	
Risk Management Steering Group	Working with leads from Emergencies and Resilience, Public Health, Insurance, Audit, Communities and Equalities and the Risk Manager. This group ensures co-ordination of risk management issues, resources and strategies.
Safety Advisory Group (SAG)	Deputy chairing responsibilities and working with city partners to advise on the potential impacts and to co-ordinate resources to support the calendar of events in the city. On occasions this has resulted in amendment, postponement or cancellation of events that could not provide sufficient assurance. Events requiring a significant resource input, planning advice and operational support included: opening of the i360, Pride, Brighton Speed Trials, Brighton Festival, Brighton Marathon and Triathlon.
Major Incident Support Team (MIST)	Support and give advice on contingency plans and incident management during incidents that may affect the safety of residents, public, visitors and our staff. This includes acting as Incident Liaison Officers in the event of a major incident.

11.2 Service Level Agreements

Service Level Agreements are in place to deliver enhanced health and safety support in:

- **Housing** - supporting with assurance arrangements on health and safety issues with a particular focus on asset risk management.
- **Schools and Academies**– providing specialist school specific advice (including radiation protection and physical education); undertaking fire risk assessments and asbestos management reviews; and offering training via the School Workforce Development Programme
- **Adults Services** – monitoring of independent care homes on behalf of the Commissioning & Performance Team. The SLA was revised in 2016 to include H&S inspections of independent care homes identified as higher risk by the Commissioning Team as well as H&S audits and Fire risk assessments for BHCC Adults Provider services.

12. Conclusion

The pace of change and increasing demand in the context of diminishing resource continues to be challenging for duty holders. The Councils performance management framework provides key governance and oversight ensuring health & safety accountability.

Planning is underway to align service structures within the Orbis partnership. This aims to provide greater resilience across each of the authorities. Health & safety assurance continues to be given on the effect of controls. The importance of robust management of safety management cannot be underestimated and it is clear that providing access to competent advice supported with active monitoring of performance is vital to ensure continued compliance.

The committee are asked to note the content of this report and the Health and Safety Plan for 2017/18 which is included at appendix 9.

Appendix 1 – Feedback on our service:

Nigel Watson - Deputy Head teacher Coldean Primary

I'm writing in response to your recent work with Coldean on our fire safety and compliance. The work undertaken was extremely professional, yet personable throughout the process; identifying our areas for improvement and impressing their urgency when required. The calm, measured approach and clear understanding of the pressures on schools made the whole process very supportive.

Steve Frost - Insurance Manager

The insurance team liaises closely with our colleagues in the Health and Safety Team on a regular basis.

Where incidents have occurred the Health and Safety team can provide additional records or information over and above the report provided by the relevant council department. These documents will sometimes help to inform the decision making process required in the early stages of a personal injury claim and make the difference between whether a claim is one to settle on best possible terms or one to defend vigorously.

The expertise and practical assistance provided to the Insurance Team by the Health and Safety Business Partners and advisors enables the Insurance Team to protect public funds whenever possible.

Brian Foley – Customer Experience Lead

The contact I have had with the H&S team has always been very positive and their approach is one of seeing it as an opportunity for improvement and shared learning. Their knowledge and advice is always really useful and was especially helpful when we were delivering training to councillors about dealing with difficult clients as there was a close link to previous work the H&S Team had done with them about personal safety. We are also really pleased to see the introduction of a review mechanism for Clients of Concern Register which was closely linked to two Ombudsman cases we dealt with.

Julie Nichols – Corporate Portfolio Lead

My experience of working with your team has always been positive. You helped me when I picked up responsibility for H&S and didn't know where to start(!), you've been very supportive through the two audits of my service, and very patient and responsive to my questions and requests for clarification. You're very pragmatic in your approach and very personable.

Appendix 2 – Enforcement / Regulatory Services Activity

East Sussex Fire and Rescue	
Number of Enforcement Notices Served	0
Number of Prohibition Notices Served	0
Prosecutions	0
Health & Safety Executive	
Number of Improvement Notices Served	0
Number of Prohibition Notices Served	0
Prosecutions	0

Appendix 3 – Accident / Incident Summary Data

Description	2015/16	2016/17
Total Incidents	1040	1222
Total Injuries to Staff	497	552
Total Injuries to Non Staff	415	516
RIDDOR	39	24
Near Misses	585	559
Total Days Lost	1489	1700

Appendix 4 – Health & Safety Training Data 2016/17

The **Health and Safety training programme** was developed to support the needs of staff across the organisation. Over **24** different courses have been delivered through **92** training events to **997** delegates. This includes bespoke training events which have been tailored to meet the specific needs of teams and services. In addition **718** staff completed online learning modules. The number of staff who attended the various training courses is listed below.

A summary of the training is provided below:

Course name	Provider	Number of Events	% Attendance	Number Attended
Core H&S Programme				
DSE Risk Assessor	H&S Team	4	89%	41
Management of Contractors	H&S Team	2	77%	17
Personal Safety Awareness	H&S Team	5	89%	56
Risk Assessment	External	5	94%	58
Fire Risk Assessment	External	4	95%	40
COSHH Risk Assessors	External	1	86%	12
Emergency First Aid at Work	External	7	85%	69
First Aid at Work (3 days)	External	9	86%	85
First Aid at Work Recertification (2 days)	External	5	90%	46
First Aid Annual Refresher (half day)	External	6	86%	62
Safer Lifting of loads	External	8	87%	86
Effective Health & Safety Management	External	2	88%	23
IOSH Managing Safely	External	1	100%	11
Legionella Awareness	External	4	89%	57
Totals for scheduled training events		63	88%	662
Bespoke Team Training				
Evac Chair	H&S Team	2	-	8
Personal Safety Awareness	H&S Team	6	-	50
Health & Safety Awareness	H&S Team	1	-	20
COSHH Awareness	H&S Team	1	-	9
Managing Contractors	H&S Team	1	-	19
Risk Assessment	H&S Team	6	-	93
Fire Risk Assessment	H&S Team	4	-	51
Fire Warden	H&S Team	2	-	9
Low Risk Work at Height	H&S Team	5	-	67
Educational Visits Coordinator Risk Asses.	H&S Team	1	-	9
Totals for bespoke events		29	-	335
H&S eLearning Modules		Number of courses completed		
Asbestos Awareness	Internal	21		
Asbestos Management Plan	Internal	6		
Management - Asbestos Remedial Works	Internal	0		
Management of Contractors	Internal	10		
Display Screen Equipment	Internal	339		
Fire Safety Awareness	Internal	95		
Health & Safety Awareness	Internal	184		
Stress Management & Wellbeing	Internal	63		
Total number H&S eLearning modules completed		718		

Appendix 5 – Policies and Standards

Policy/Standard	New or Review	Status
Asbestos Management Standard	Review	Draft
Control of Noise at Work Standard	Review	Ratified
COSHH Standard	Review	Ratified
Display Screen Equipment Standard	Review	Draft
Driving at Work Standard	Review	Ratified
First Aid Standard	Review	Ratified
H&S Policy Statement and Management Standard	Review	Ratified
Infection Control Standard	Review	Ratified
Lifting Operations & Lifting Equipment Standard	Review	Ratified
New & Expectant Mothers Standard	Review	Ratified
Personal Safety Standard	Review	Ratified
Risk Assessment Guidance & Form	Review	Ratified
Safe Working Height Standard	Review	Draft
Vibration Standard	New	Ratified
Work Equipment Standard	Review	Draft

Appendix 6 – Health & Safety Audits

Team / Service Audited	Audit topic	Assurance level	Updated Status for Limited Assurance
Craven Vale Resource Centre	Asbestos	Substantial	
Housing Programme Team	Management of Contractors / (CDM)	Limited	The 8 medium / high priority recommendations have now been addressed Reasonable
Internal Audit	Display Screen Equipment (DSE)	Reasonable	
Legal Services	DSE	Reasonable	
Wayfield Avenue	Fire	Substantial	
Electoral Services	Personal Safety	Reasonable	
Hangleton Primary School	Swimming Pool	Reasonable	
Dorothy Stringer	Swimming Pool	Reasonable	
Craven Vale Resource Centre	Team Safety	Reasonable	
Knoll House	Team Safety	Reasonable	
Ireland Lodge	Team Safety	Reasonable	
Cromwell Road	Team Safety	Reasonable	
Patcham Infant & Nursery School	Team Safety	Reasonable	
Moulsecoomb Primary School	Team Safety	Reasonable	
Drove Road	Team Safety	Reasonable	
Tudor House	Team Safety	Reasonable	
Cherry Tree Nursery	Team Safety	Reasonable	
Able & Willing	Team Safety	Reasonable	
Wayfield Avenue	Team Safety	Reasonable	
Bevendean Primary School	Team Safety	Reasonable	

Appendix 7 – Fire

Fire Assurance Activity	No.
Total Fire Risk Assessments (Stage 1 & reviews)	76
Review of FRA Management Action Plans	26
Coaching newly trained Fire Risk Assessors	Ongoing
Partnership meetings with East Sussex Fire and Rescue Service	12
Strategic Fire Safety Reporting <ul style="list-style-type: none"> • Head of Adults • Housing Committee • Housing Fire / Health and Safety Board 	15
Fire Safety Audits (BHCC enforcement responsibility in Sports Grounds - AMEX Stadium in partnership with Building Control)	1
Fire Safety Support & Deputy Chair <ul style="list-style-type: none"> • Safety Advisory Group • Major Incident Support Team 	15
Fire Incident Investigations	3
Fire visits (other than FRAs)	67
Fire training	15
Fire design meetings	12

Appendix 8 – Contractor Management

Independent Care Home Audits / Inspections (Services)	Contractor Inspections (Works)	
<ul style="list-style-type: none"> • Adelaide Nursing Home • Carlton House • Frances Taylor Foundation • Highbury House • Loxwood House • Marine View Rest Home • Oaklands • Princes Crescent • Seaways • Swanborough House • The Foyer • The Highviews • The Rookery • The Seagulls • The Yellow House • Vallance Gardens • Wavertree House • Westwood Care Home 	<ul style="list-style-type: none"> • Hollingdean Depot • Hove Town Hall • King Alfred Leisure Centre • St Andrews Primary School • Corn Exchange 	
Total	18	5

Appendix 9 – Health & Safety Plan 2017 - 2018

H&S Service Plan 2017 / 2018	Aim / Priority	Desired Outcomes	Action Required	Timescale
POLICY	Maintain a programme of Health & Safety policy review and ratification through the corporate health & safety committee.	<p>Legislative compliance and employee engagement through the consultation process</p> <p>Performance overseen by the Corporate Health & Safety Committee</p>	<p>Complete the annual review the Health and Safety policy statement and communicate the revised policy across the organisation</p> <p>Maintain a programme of Health & Safety policy and standards review, including the schools' model policy statement.</p> <p>Monitor changes in Health & Safety Legislation and update the legal register as necessary.</p> <p>Maintain consultation arrangements with employee representatives groups (i.e. trade unions, staff forums).</p> <p>Plan dates for and report health & safety performance to the quarterly corporate health and safety committee. Meeting dates are:</p> <ul style="list-style-type: none"> • 8 June • 25 September • 28 November • 13 March 2018 <p>Work with Orbis partners to identify where policies and standards can be integrated</p>	<p>March 18</p> <p>Ongoing with quarterly review</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>
ORGANISATION	Ensure H&S structure, policy and arrangements are aligned to meet the changing needs of the organisation.	Deliver a responsive Health & Safety service	<p>Continue to plan integration of the Health & Safety service into the Orbis partnership as part of the HROD service transformation and ensure the future service offer is sustainable, relevant to the Council and resilient in operation.</p> <p>Maintain access to competent health and safety advice through a duty officer service.</p> <p>Head of H&S to continue to have regular 121's with the Chief Executive, Directors, Head of Property and Design and Head of Internal Audit</p>	<p>March 18</p> <p>Ongoing</p> <p>Ongoing</p>

181

H&S Service Plan 2017 / 2018	Aim / Priority	Desired Outcomes	Action Required	Timescale
			<p>to ensure that roles, responsibilities and safety management arrangements remain effective.</p> <p>Ensure all members of the H&S team maintain professional skills to enable flexible deployment and greater resilience.</p> <p>Plan and deliver a team development session within the team Performance Review and Development days</p>	<p>Reviewed in 121's</p> <p>May & September 17</p>
MANAGEMENT ARRANGEMENTS	Gain assurance that effective safety management arrangements are in place to manage organisational health & safety risks.	<p>To ensure that safety management systems are implemented throughout the Council and provide assurance that all parts of the organisation are meeting their legal obligations in accordance with corporate policies and standards</p> <p>Provide the council with a means of demonstrating a strategic process for health and safety management</p> <p>Provide managers a framework for identifying, measuring and recording health and safety performance</p>	<p>Ensure all services are effectively managing health and safety and have evidence to demonstrate that arrangements are appropriate by:</p> <ol style="list-style-type: none"> 1. Undertaking audits in accordance with audit programme 2. Providing management information on audit findings to service managers 3. Delivering audit performance information to Corporate Health and Safety committee 4. Escalating matters which expose the council to unacceptable risk <p>Review all accidents and incidents to:</p> <ol style="list-style-type: none"> 1. Ensure an appropriate management investigation has been carried out 2. Identify and report to the HSE in accordance with RIDDOR 3. Assess level of health and safety follow-up investigation required and investigate accordingly. 4. Provide management information to the corporate H&S committee, DMTs and DCGs. 5. Identify aspects requiring additional H&S improvement. <p>Ensure contract management and monitoring</p>	<p><i>According to programme</i></p> <p><i>Ongoing</i></p>

182

H&S Service Plan 2017 / 2018	Aim / Priority	Desired Outcomes	Action Required	Timescale
			<p>arrangements are in place to:</p> <ol style="list-style-type: none"> 1. Prepare a schedule of contract monitoring inspections to be undertaken by Health & Safety team. <p>Support the Council's Emergencies and Resilience team by:</p> <ol style="list-style-type: none"> 1. Attend and deputy chair Safety Advisory Group Meetings and events as required 2. Attend and support Major Incident Support Team 3. Provide Incident Liaison Officer support to major incidents as required 4. Attend Risk Management Steering Group <p>Deliver ongoing contractual commitments and monitor performance of Health & Safety Service Level Agreements for:</p> <ul style="list-style-type: none"> ▪ Schools & Academies ▪ Adults Services ▪ Housing – including project management of match funded sprinkler initiatives in High Rise Housing Blocks <p>Carry out programmed Fire Risk Assessments (FRA) in high priority services and buildings. These will include Hostels, Residential Care facilities and Schools.</p> <p>Monitor that the Asbestos Containing Materials in all council buildings are being managed in accordance with the Asbestos Management Plans</p> <p>Provide advice to the Education Property & Design Team in relation to resource allocation for asbestos management / remedial work in school premises.</p>	<p><i>July 17</i></p> <p><i>Ongoing with programmed review meetings</i></p> <p><i>March 18</i></p> <p><i>Ongoing</i></p> <p><i>Ongoing</i></p> <p><i>Ongoing</i></p>

H&S Service Plan 2017 / 2018	Aim / Priority	Desired Outcomes	Action Required	Timescale
			Provide support to the Head of Property & Design in the development of the annual Legionella Assurance Report.	December 2017
INFORMATION SYSTEMS	Review health and safety information systems to ensure relevant and effective integration with other sources.	<p>To ensure legal compliance (RIDDOR) and Data Protection requirements.</p> <p>To ensure ease of access to information which is and that information is accessible.</p> <p>To ensure efficient transition of new asset management systems.</p>	<p>Monitor the use and reliability of the Clients of Concern register and work with users/gatekeepers / ICT to address issues.</p> <p>Following the development of the annual review process for the Clients of Concern register in 2016, support ICT in building an automated process.</p> <p>Incident Reporting System:</p> <ul style="list-style-type: none"> • Continue to develop the Incident report form and associated templates • Ongoing work with ICT to ensure timely transition to a new incident reporting platform to replace Achieve • Work with ICT to finalise and agree implementation plan for the replacement Clients of Concern quick search portal <p>WAVE Pages: Review health & safety information on all platforms with a particular focus on ensuring information aligns with Team Safety objectives & exploring opportunities for integration through Orbis</p> <p>Review all Team Safety (health & safety management framework) documentation</p> <p>Monitor and review the content of the Health and Safety pages within the services to schools BEEM system.</p> <p>Work with Orbis partners to identify where information systems may be integrated or replaced</p>	<p>Ongoing</p> <p>November 17</p> <p>Ongoing</p> <p>Ongoing</p> <p>October 17</p> <p>Ongoing</p> <p>Sept 17</p> <p>Dec 17</p> <p>Ongoing</p>

H&S Service Plan 2017 / 2018	Aim / Priority	Desired Outcomes	Action Required	Timescale
AUDIT	Deliver an audit programme that reflects the revised organisational structure and provides assurance on the effectiveness of health and safety management arrangements	Provide assurance to the council on legal compliance and meet statutory requirements for monitoring of health and safety performance.	<p>Prepare and deliver the 2017-18 audit programme ensuring it remains proportionate to the hazard and risk profile of the organisation.</p> <p>The focus of the programme include:</p> <ul style="list-style-type: none"> • Annual distribution of the Team Safety managers self-checklist • Analysis of returns by H&S team and follow up assurance action as appropriate • Independent Care Homes • Radiation in schools • Schools Team Safety audits of all phases • Contractor management <p>Collaborating with Orbis partners to develop the audit framework</p>	<p>May 17</p> <p>Dec 17 / Jan 18</p> <p>Feb / March 17</p> <p>According to programme</p> <p>Ongoing</p>
TRAINING	Ensure that all people involved in delivery of the council services have the appropriate levels of competence to address their health and safety responsibilities.	All workers and others involved in the delivery of Council services are competent to undertake their health and safety responsibilities.	<p>Produce and deliver the 2017-2018 health & safety core training programme.</p> <p>Evaluate the effectiveness of the Health and Safety training programme through assessing feedback and identifying how well skills have been applied in the workplace.</p> <p>Monitor and report on training attendance to identify reasons for non-attendance and ensure a cost effective training service is provided.</p> <p>Undertake quality assurance assessments of internal and external training providers and monitor performance against KPI's.</p>	<p>April 17 & Ongoing</p> <p>March 2018</p> <p>Ongoing / Quarterly</p> <p>Ongoing</p>
CHANGE MANAGEMENT	Support change management and modernisation activity.	Ensure health & safety issues are considered through all stages of change management processes	<p>Continued involvement in the Workstyles project Programme including:</p> <ol style="list-style-type: none"> 1. Attendance at workstyles board and project group meetings 2. Providing ongoing advice during 	Phase 4 Ongoing

H&S Service Plan 2017 / 2018	Aim / Priority	Desired Outcomes	Action Required	Timescale
			<p>development and implementation stages</p> <p>3. Conducting monitoring visits at all stages of the process</p> <p>Provide technical / specialist support to assist in change management and modernisation activity including:</p> <ul style="list-style-type: none"> • Supporting tender evaluation processes with significant health & safety implications 	Ongoing
JOINT WORKING & INITIATIVES	Maintain an awareness of Local / National Campaigns to identify best practice and plan targeted initiatives	<p>To identify best practice and support the Council priorities and city initiatives</p> <p>Identify opportunities for collaboration and efficiencies through joint working that continues to ensure an effective approach to risk management</p>	<p>Continue working with partners to maximise opportunities for joint working on risk management solutions</p> <p>External:</p> <ul style="list-style-type: none"> • East Sussex Fire & Rescue Service • Sussex Police • Health Partners • Department for Education (National Asbestos Steering Group) <p>Internal:</p> <ul style="list-style-type: none"> • Internal audit team • Major Incident Support Team (MIST) • Safety Advisory Group (SAG) • Risk Management Steering group (RMSG) • Property & Design / Building Control & Housing • Occupational Health Provider (Team Prevent) <p>Attend Sussex Local Authority Safety Officers Group (SLASOG) and South East Employers (SEE)</p>	<p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>

Health & Safety

REPORT OF: Head of Health & Safety

COMMITTEE: Corporate (Whole Council) Health & Safety Committee

DATE: 3rd July 2017

SUBJECT: Annual Health & Safety Report

This report sets out information regarding incidents reported to Brighton & Hove City Council's Health & Safety Team for the 2016 - 2017 financial year - from 1st April 2016 to the 31st March 2017.

Incident Data Summary

Total incidents	1222 (1040)	RIDDOR reported incidents	24 (39)
Total injuries to staff	552 (497)	Near misses	559 (585)
Total injuries to non-staff	516 (415)	Total days lost*	1700 (1489)

Average Accident Frequency Rate: (AFR) **3.92** (3.40) Incidents occur every 100,000 hours worked

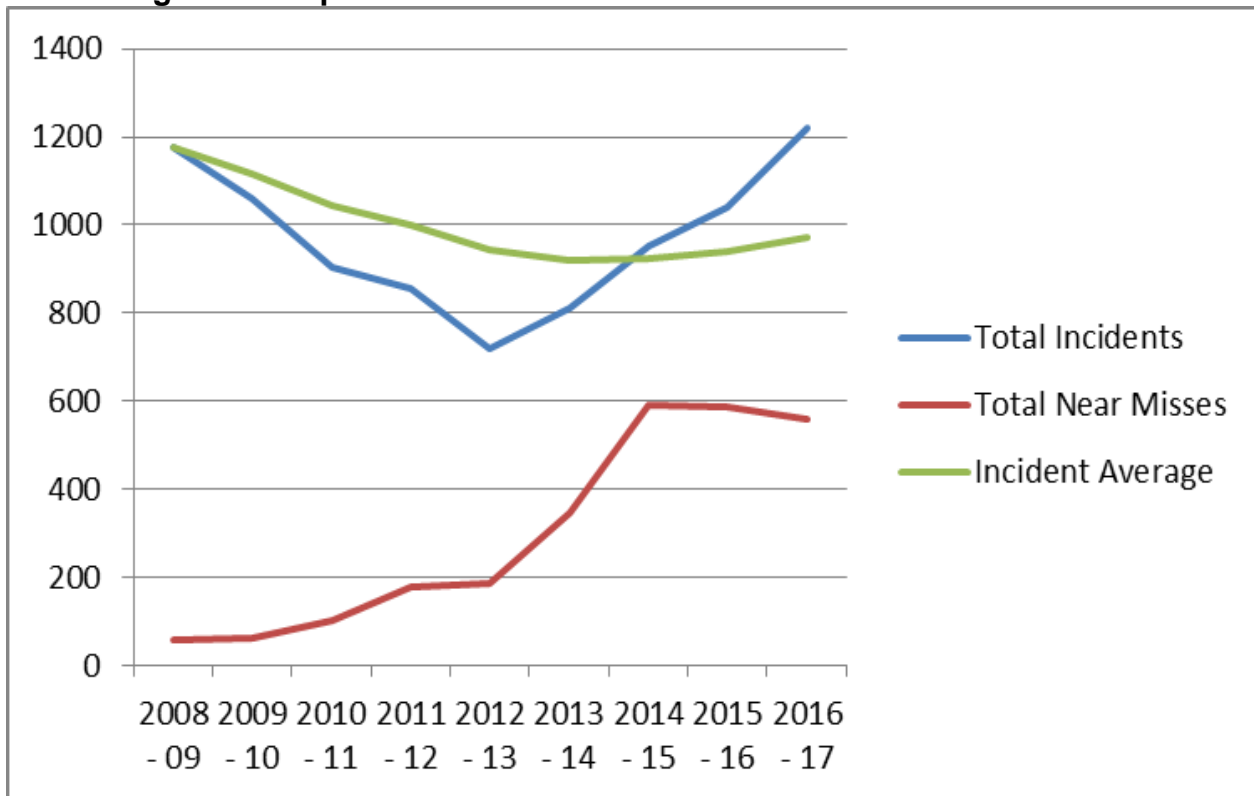
Average Accident Incidence Rate: (AIR) **18.82** (11.1) Incidents per 1000 staff

Average RIDDOR Reportable incidents AFR **0.14** (0.25) RIDDOR Reportable Incidents AIR **0.68** (0.89)

*Includes days staff would not normally work

**Numbers in brackets are from the previous year's annual report

Annual Figures Comparison:



Health & Safety

Cost of Absence:

Included in the report is a cost for Occupational Sick Pay resulting from incidents reported throughout the year. In 2016/17 this cost was £66,561. The cost for 2015/16 was £66,476.

This is not the total cost of the absence as it does not include any expense incurred in covering the member of staff however the figure is useful as it gives an indication of economic impact of the absence.

How do we compare?

Incident reporting with our Chartered Institute of Public Finance & Accountancy (CIPFA) benchmarking partners for 2015/16 shows that BHCC has 5.1 (4.5)* RIDDOR reported incidents per 1000 FTE whilst the average rate of our benchmarking partners is 4.5 (6.9)* reported incidents - **figures in brackets show the previous year's results*

BHCC has a positive incident reporting culture which ensures incidents are reported and investigated to learn any lessons. Incident reporting mechanisms and outcomes directly impact on liability claims and the council's insurance premiums.

The data for 2016/17 is currently being collated by CIPFA.

AFR & AIR Definitions:

Accident Frequency Rate (AFR)*

This calculation identifies the number of incidents that occur for every 100,000 hours of work undertaken by the council's staff.

$$\text{Accident frequency rate} = \frac{100,000}{\text{Total hours worked}} \times \text{Total number of incidents}$$

Accident Incidence Rate (AIR)*

This calculation identifies the number of incidents that occur for every 1000 council staff.

$$\text{Accident incident rate} = \frac{\text{Number of Accidents}}{\text{Number of Employees}} \times 1000$$

*These figures are calculated using incidents to staff only.

The RIDDOR rates are based on the same calculations but use total number of staff related reportable incidents.

Health & Safety

Reported incidents – There were **1222** (1040) reported incidents throughout the year. A complete outline of the incidents reported during the year is provided in Appendix 1:

The highest cause of incident was ‘Violence and Aggression’ which accounted for **282** (217) of the total incidents reported, The incidents break down as follows:

Violent or Aggressive incident, 282		Number of Injured Parties Staff	Number of Injured Parties Non-Staff	Number of Incidents
Adult Services	Adults Assessment	2	3	21
Adult Services	Adults Provider	25	8	69
Adult Services	Public Health	0	0	1
Chief Executive	Chief Executive	0	0	2
Economy Environment & Culture	Transport	0	0	1
Economy Environment & Culture	Royal Pavilion & Museums	2	1	4
Economy Environment & Culture	Sports & Leisure	0	0	1
Economy Environment & Culture	City Infrastructure	3	0	11
Families Children & Learning	Early Years & Family Support	0	0	1
Families Children & Learning	Children's Health Safeguarding & Care	3	0	14
Families Children & Learning	Stronger Families Youth & Communities	0	0	2
Finance & Resources	City Services	12	3	34
Finance & Resources	HR&OD	1	0	1
Neighbourhoods Communities & Housing	Housing	8	0	76
Neighbourhoods Communities & Housing	Libraries & Information Services	10	1	29
Neighbourhoods Communities & Housing	Regulatory Services	2	0	6
Strategy Governance & Law	Life Events	0	0	1
Strategy Governance & Law	Legal Services	0	0	1
Schools	Primary School	2	0	2
Schools	Secondary School	1	0	1
Schools	Special School	9	3	4
Total		80	19	282

The second highest cause of incident was ‘Challenging Behaviour’ which accounted for **277** (226) of the total incidents reported. The incidents break down as follows:

Challenging behaviour, 277		Number of Injured Parties Staff	Number of Injured Parties Non-Staff	Number of Incidents
Adult Services	Adults Provider	36	9	46
Children's Services	SEN & Disability Services	110	36	136
Children's Services	Stronger Families Youth & Communities	5	0	5
Schools	Infant School	11	1	11
Schools	Primary School	50	5	40
Schools	Secondary School	2	1	2
Schools	Special School	35	2	37
Total		249	54	277



Health & Safety

The third highest cause of incident was Slips, Trips & Falls' which accounted for **230** (200) of the total incidents reported. The incidents break down as follows:

Slip/trip/fall, 230		Number of Injured Parties Staff	Number of Injured Parties Non-Staff	Number of Incidents
Adult Services	Adults Assessment	2	0	2
Adult Services	Adults Provider	11	83	96
Economy Environment & Culture	Sports & Leisure	0	1	1
Economy Environment & Culture	Property & Design	2	0	2
Economy Environment & Culture	Transport	0	1	1
Economy Environment & Culture	City Infrastructure	10	5	15
Families Children & Learning	Children's Health Safeguarding & Care	1	2	2
Families Children & Learning	Education & Inclusion	1	0	1
Families Children & Learning	SEN & Disability Services	2	1	3
Families Children & Learning	Stronger Families Youth & Communities	2	9	11
Finance & Resources	City Services	1	1	2
Finance & Resources	ICT	1	0	1
Neighbourhoods Communities & Housing	Housing	5	5	10
Neighbourhoods Communities & Housing	Libraries & Information Services	1	2	3
Strategy Governance & Law	Life Events	0	1	1
Schools	Infant School	3	6	9
Schools	Junior School	2	2	4
Schools	Primary School	6	41	47
Schools	Secondary School	5	12	17
Schools	Special School	1	0	1
Total		56	172	230

Health & Safety

Breakdown of incidents by service area (not including near misses)

Nb. The reporting system is not currently keeping up with the ongoing organisational change and the reports it produces are linked to directorates and teams that do not reflect current organisational structures. As a result the reports have to be corrected manually.

Work continues to correct alignments of the reporting structures between the Incident Reporting and HR systems.

Health & Adult Social Care	Number of Injured Parties	Number of Incidents	Number of RIDDORS	Absence Days
Assessment Services Adults	2	8	0	0
Hospital Assessment	3	5	0	2
Housing (AA)	8	15	0	0
Integrated Learning Disability Services	79	90	1	121
Provider Services	158	186	3	204
SPFT (S75)	1	1	0	316
Public Health	5	7	0	0
Care Crew	2	2	0	0

Economy, Environment & Culture	Number of Injured Parties	Number of Incidents	Number of RIDDORS	Absence Days
Cityclean	50	54	4	237
Parking & Network Operations	2	3	0	0
Parks	27	31	3	287
Libraries & Information Services	17	34	1	4
Operations & Conservation	10	11	0	0
Seafront	2	3	0	0
Venues	1	1	0	0
Property & Design	3	3	0	2

Chief Executive	Number of Injured Parties	Number of Incidents	Number of RIDDORS	Absence Days
Chief Executive	0	2	0	0

Families, Children & Learning	Number of Injured Parties	Number of Incidents	Number of RIDDORS	Absence Days
Childcare Quality	2	2	0	0
Clermont Family Assessment Centre	1	1	0	0
Integrated Children's Development & Disability Service	159	148	1	154
Integrated Team for Families	1	1	0	2
PRESENS	1	1	0	0
Social Work & Young People's Services	3	6	0	0
Standards & Achievement	1	1	0	0
Sure Start	19	20	0	2
Employability	0	1	0	0
Youth Offending Service	0	1	0	0

Health & Safety

Neighbourhoods, Communities & Housing	Number of Injured Parties	Number of Incidents	Number of RIDDORS	Absence Days
Applications (P and BC)	2	2	0	2
Housing	1	5	0	0
Housing (AA)	0	1	0	0
Housing Management - North Area	12	17	0	0
Housing Needs	0	8	0	0
Housing Strategy & Development	0	1	0	0
Income Involvement & Improvement	7	40	0	0
Temporary Accommodation & Allocations	6	9	0	0
Tenancy Services	3	11	0	19
Travellers Services	1	1	0	0

Finance & Resources	Number of Injured Parties	Number of Incidents	Number of RIDDORS	Absence Days
Customer Services (ICT)	1	1	0	4
Health Safety & Wellbeing	1	1	0	0
HR Operations	0	0	0	0
Internal Auditing Services	2	2	0	0
Revenues & Benefits	6	11	0	4

Strategy, Governance & Law	Number of Injured Parties	Number of Incidents	Number of RIDDORS	Absence Days
Housing & Litigation	0	1	0	0
Communications	1	1	0	3
Life Events	12	26	0	0

Schools	Number of Injured Parties	Number of Incidents	Number of RIDDORS	Absence Days
Infant School	49	47	1	33
Junior School	27	27	0	192
Nursery School	3	3	0	1
Primary School	185	167	3	75
Secondary School	100	99	2	22
Special School	65	57	2	53

Health & Safety

Incidents reported to the Health & Safety Executive

A total of **24** (39) incidents were reported to the HSE under RIDDOR Legislation (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) as follows:

RIDDOR	Number of Injured Parties Staff	Number of Injured Parties Non-Staff	Incidents Total
Dangerous Occurrence	0	0	0
Major Injury	3	0	3
Member of public taken to hospital	0	2	2
More than 7 days absence	19	0	19
Reportable Disease	0	0	0
Total	22	2	24

RIDDOR Cause & Location:

Major Injury	Incidents Total
Junior School	1
Libraries & Information Services	1
Primary School	1
Member of public taken to hospital	Incidents Total
Adults Provider	1
Special School	1
More than 7 days absence	Incidents Total
Adults Provider	3
City Infrastructure	8
Infant School	1
Junior School	1
Primary School	2
Secondary School	2
SEN & Disability Services	1
Special School	1

Health & Safety

Details of particular RIDDOR reports have been provided in each quarter's Corporate H&S Committee report. However, incidents of particular note are shown below:

Over-seven-day incapacitation of a worker

City Infrastructure - City Parks member of staff was trying to start a strimmer by pulling the pull cord starter with right hand, felt a sharp pain in right elbow. He sustained a torn muscle in his right arm which resulted in **108 days** absence.

Brunswick Primary School – A Teaching Assistant was walking past the i360 along Brighton lower promenade as part as an offsite visit with a group of pupils. As she was walking, she fell over a piece of street furniture within the 1360 grounds and fell, hitting her face and head. She sustained a broken nose, concussion and has had ongoing issues in relation to her vision, hearing, memory and psychological health. The i360 Board have been advised to review the design of the street furniture to make it stand out (it is the same colour as the surroundings). **184 Days** absence.

City Infrastructure – City Clean member of staff sustained a torn arm muscle when he tried to move a 360 ltr refuse bin. This resulted in **172 days** absence.

City Infrastructure – A member of City Parks staff received a crush injury to his right thumb while loading a ride on grass mower onto the rear of a flatbed vehicle. The member of staff had a total absence of **28 days**.

City Infrastructure – A member of City Parks staff sustained a sprained ankle when he stood off a vehicle tail lift as it was descending. This resulted in **90 days** absence.

City Infrastructure – A member of City Clean staff was removing graffiti. He placed some of the graffiti remover solution down on the ground. As he walked, he slipped on the solution he had put down and fell. This caused some of the solution in the container he was carrying to splash into his face and eyes. The member of staff sustained chemical burns to his face and eyes and resulted in **19 days** absence

Major injury

A pupil at St Barts CE primary school threw a small lump of concrete which hit a Learning Mentor's foot causing a fracture & nerve damage. This was reported as a major injury and resulted in **5 days absence**.

Rottingdean Library. The former facilities manager was installing CCTV surveillance signs and was standing in the children's area of the library looking upwards to determine the best placing. She took a step towards the area, still looking upwards and tripped over a box of picture books, falling and injuring her wrist. The accident resulted in a broken wrist and **1 day's** absence. Injured party feels that incident was due to her concentrating on sign placement and no specific failing was identified.

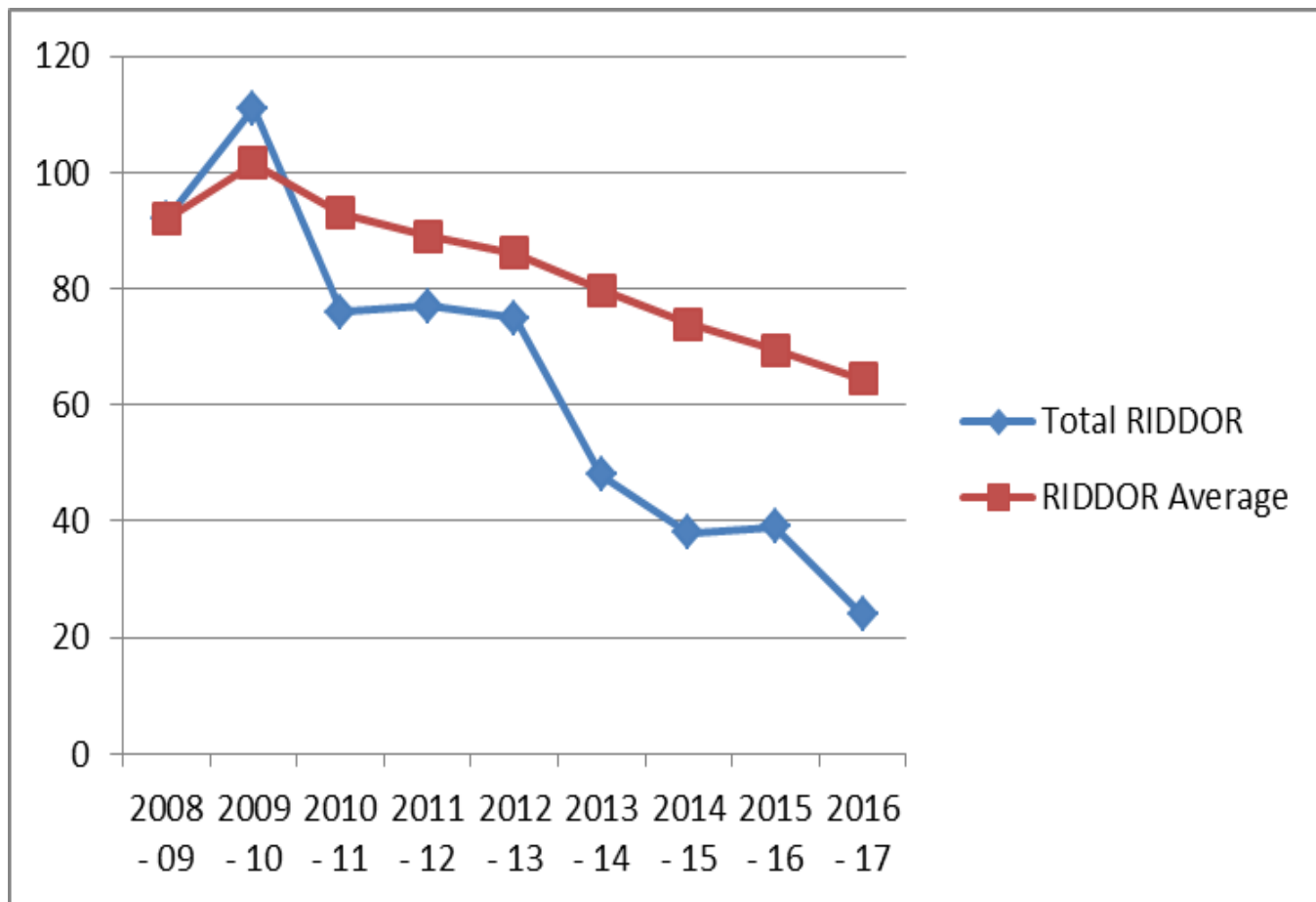
Members of Public Taken to Hospital

A pupil with severe learning disabilities broke away from his carers and climbed out of a first floor window at Downs View School. He fell onto a bench and sustained a small cut to the back of his head. He was taken to hospital for treatment. The pupil was being kept away from school whilst alterations are being made to the building and walkways to help ensure pupil and staff safety. During the works there was close liaison between the school, parents, H&S, Architects and Education Property Management.

A Service User at Ireland Lodge had been mobilising in the corridor when he tripped over another resident's zimmer frame in a doorway. He fell and fractured his hip (neck of femur) and was taken directly to hospital for treatment. Management are reviewing how best to keep equipment accessible to SUs in their rooms, but kept in a way that does not pose a hazard to others.

Health & Safety

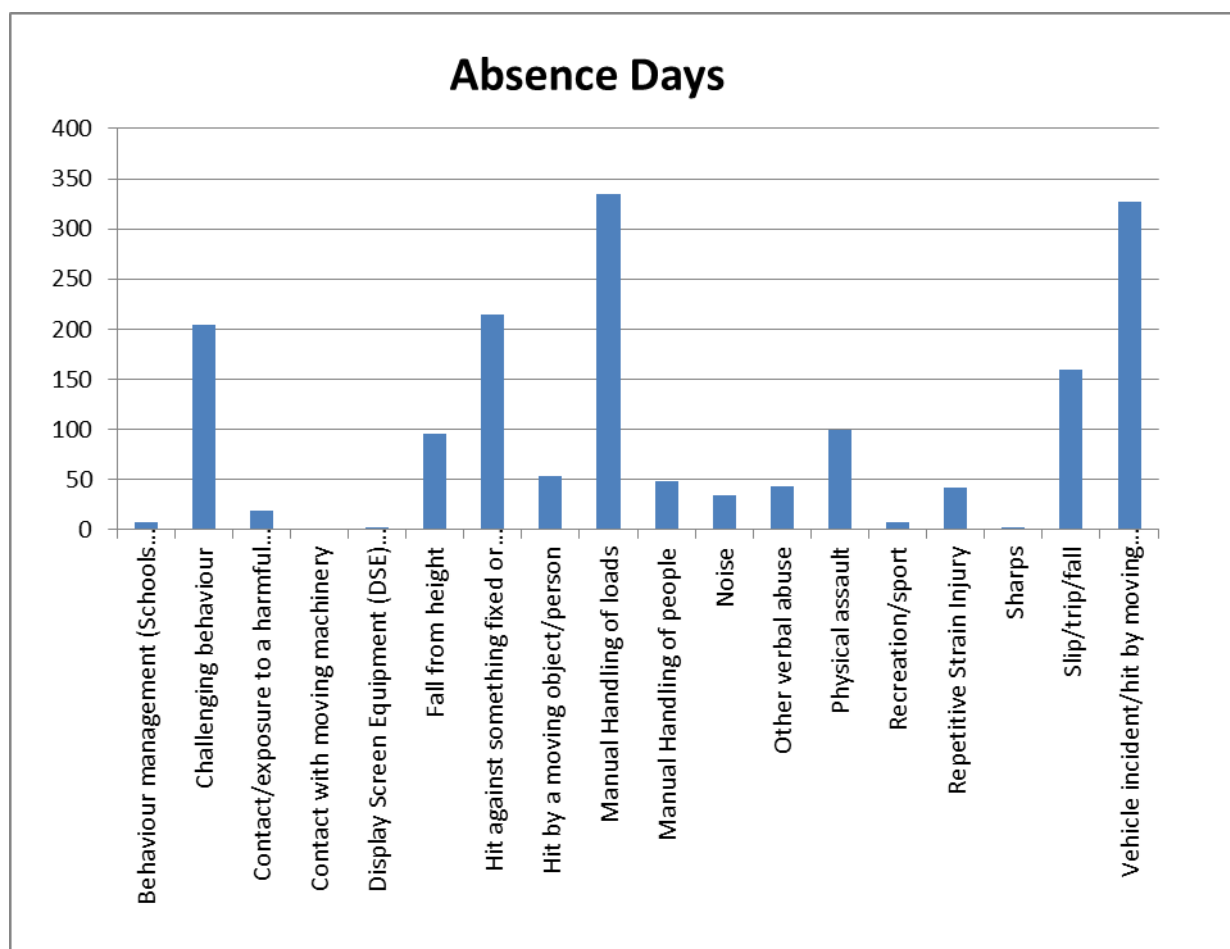
Graph showing the trend line for total number of RIDDORs:



Health & Safety

Lost Time Incidents: A total of **1700** (1498) days were lost due to **77** (78) separate incidents. The causes of incidents resulting in lost time are as follows:

Incident Cause	Number of Injured Parties	Number of Incidents	Absence Days
Behaviour management (Schools only)	2	2	7
Challenging behaviour	15	15	204
Contact/exposure to a harmful substance	1	1	19
Contact with moving machinery	1	1	1
Display Screen Equipment (DSE) related ill health	1	1	3
Fall from height	3	3	96
Hit against something fixed or stationary	4	4	215
Hit by a moving object/person	5	5	54
Manual Handling of loads	12	12	335
Manual Handling of people	5	5	49
Noise	1	1	34
Other verbal abuse	1	1	44
Physical assault	1	1	100
Recreation/sport	1	1	8
Repetitive Strain Injury	2	2	42
Sharps	1	1	2
Slip/trip/fall	18	18	160
Vehicle incident/hit by moving vehicle	3	3	327
Total	77	77	1700



Health & Safety

Significant Events: Of the 77 staff absence incidents some key reports are noteworthy:

A Social Worker from **SPT S75** staff was involved in a major Road Traffic Collision whilst driving back from a meeting in Bedfordshire. She sustained significant injuries that resulted in long term sickness absence. This has highlighted some issues with SPT access to PIER personnel management tools and also the need to raise awareness of driving at work standards/expectations. Not a **RIDDOR** as this is a Road Traffic Collision - This incident resulted in **316 days** absence.

Adults Provider – Whilst providing care to an adult with challenging behaviour, a Home Care Support Worker was subject to Verbal Abuse. This had a severe emotional impact on the staff member and she was absent from work for **44 days**. The service user has a long history with CST/IAH, with 15 H&S incident reports in 2016, and he is on the clients of concern register. Actions continue to manage staff contact with this person and his behaviour is being addressed by senior care managers. A formal letter was sent by ASC senior management following a multi-disciplinary meeting to explain to the SU about acceptable behaviour and consequences if actions continue.

A care worker at 83 Beaconsfield Villas tripped over a colleague's foot whilst dealing with an altercation between a Service User and staff (challenging behaviour). This was not reported under RIDDOR as there was no direct link to the Service Users actions or failure in work procedures. This worker was absent for **110 days** and has since been reassigned to another unit in relation to emotional distress.

A member of City Parks staff had a bicycle horn sounded in his ear by a work colleague while he was driving. This startled him and caused a temporary hearing impairment. The member of staff went off sick with work related stress. This resulted in a **34 day** absence.

Health & Safety

Management Information - H&S Training Courses

The **Health and Safety training programme** was developed to support the needs of staff across the organisation. Over **24** different courses have been delivered through **92** training events to **997** delegates. This includes bespoke training events which have been tailored to meet the specific needs of teams and services. In addition **718** staff completed online learning modules. The number of staff who attended the various training courses is listed below.

Course name	Provider	Number of Events	% Attendance	Number Attended
Core H&S Programme				
DSE Risk Assessor	H&S Team	4	89%	41
Management of Contractors	H&S Team	2	77%	17
Personal Safety Awareness	H&S Team	5	89%	56
Risk Assessment	External	5	94%	58
Fire Risk Assessment	External	4	95%	40
COSHH Risk Assessors	External	1	86%	12
Emergency First Aid at Work	External	7	85%	69
First Aid at Work (3 days)	External	9	86%	85
First Aid at Work Recertification (2 days)	External	5	90%	46
First Aid Annual Refresher (half day)	External	6	86%	62
Safer Lifting of loads	External	8	87%	86
Effective Health & Safety Management	External	2	88%	23
IOSH Managing Safely	External	1	100%	11
Legionella Awareness	External	4	89%	57
Totals for scheduled training events		63	88%	662
Bespoke Team Training				
Evac Chair	H&S Team	2	-	8
Personal Safety Awareness	H&S Team	6	-	50
Health & Safety Awareness	H&S Team	1	-	20
COSHH Awareness	H&S Team	1	-	9
Managing Contractors	H&S Team	1	-	19
Risk Assessment	H&S Team	6	-	93
Fire Risk Assessment	H&S Team	4	-	51
Fire Warden	H&S Team	2	-	9
Low Risk Work at Height	H&S Team	5	-	67
Educational Visits Coordinator Risk Asses.	H&S Team	1	-	9
Totals for bespoke events		29	-	335
H&S eLearning Modules		Number of courses completed		
Asbestos Awareness	Internal	21		
Asbestos Management Plan	Internal	6		
Management - Asbestos Remedial Works	Internal	0		
Management of Contractors	Internal	10		
Display Screen Equipment	Internal	339		
Fire Safety Awareness	Internal	95		
Health & Safety Awareness	Internal	184		
Stress Management & Wellbeing	Internal	63		
Total number H&S eLearning modules completed		718		

Health & Safety

Appendix 1: SUMMARY INFORMATION: Annual Report for year 2016/2017

Highlighted areas indicate top 3 incident causes.

Cause of Incident	Injured Parties	Injured Parties	Injured Parties	Injured Parties Total	Number of Near Misses	Number of Incidents
	Staff	Non-Staff	N/A			
Administration of medication	0	4	0	4	172	5
Behaviour management (Schools only)	12	11	0	23	1	23
Challenging behaviour	249	54	2	305	96	277
Contact/exposure to a harmful substance	1	3	0	4	5	4
Contact with electricity	0	0	0	0	5	0
Contact with extreme temperature	3	6	0	9	1	9
Contact with moving machinery	2	2	0	4	1	4
Display Screen Equipment (DSE) related ill health	3	0	0	3	0	2
Drowned/Asphyxiation/Choking	0	1	0	1	9	1
Existing medical condition	5	12	0	17	6	18
Explosion	0	0	0	0	1	0
Exposure to event causing emotional/psychological harm	1	1	0	2	2	2
Fall from height	6	22	0	28	8	28
Fatality/Major Incident	0	2	0	2	0	2
Fire	0	1	0	1	13	1
Hit against something fixed or stationary	22	50	0	72	10	72
Hit by a moving object/person	22	44	0	66	5	63
Injured by animal	4	1	0	5	1	5
Local environmental conditions	1	1	0	2	7	2
Manual Handling of loads	36	4	0	40	1	41
Manual Handling of people	15	1	0	16	4	16
Noise	1	0	0	1	0	1
Recreation/sport	2	77	0	79	0	77
Repetitive Strain Injury	3	0	0	3	0	3
Sharps	9	10	0	19	5	19
Slip/trip/fall	56	172	0	228	169	230
Trapped by something collapsing	0	0	0	0	0	0
Use/failure of equipment	9	12	0	21	14	21
Vehicle incident/hit by moving vehicle	10	6	0	16	23	14
Violence & Aggression	80	19	-	99	-	282
- Homophobic harassment	0	0	0	0	0	1
- Other emotional abuse	7	1	0	8	0	21
- Other verbal abuse	30	4	0	34	0	129
- Physical assault	23	11	0	34	0	38
- Racial harassment	0	0	0	0	0	3
- Sexual harassment	2	0	0	2	0	3
- Verbal threats of a serious nature	12	0	0	12	0	56
- Violent behaviour resulting in damage to property	2	1	0	3	0	18
- Violent behaviour resulting in damage to self	0	2	0	2	0	4
- Written abuse or threats	4	0	0	4	0	9
Total	552	516	2	1070	559	1222



Community Initiatives Partnership Annual Report



EAST SUSSEX FIRE AND RESCUE SERVICE

Meeting Corporate Management Team

Date June 2017

Title of Report Community Initiatives Partnership

By Nigel Cusack, Borough Commander

Lead Officer Nigel Cusack, Borough Commander

Implications (please tick ✓ and attach to report)

Any implications affecting this report should be noted within the final paragraphs of the report

CORPORATE RISK		LEGAL	
ENVIRONMENTAL		POLICY	
FINANCIAL	x	POLITICAL	x
HEALTH & SAFETY		OTHER (please specify)	
HUMAN RESOURCES		CORE BRIEF	
EQUALITY IMPACT ASSESSMENT <i>For reports requiring an EIA, the appropriate template can be accessed in Word, via the Templates Key within the Shared tab or via this link file:///j:\msoffice\Templates\Shared\14_04%20Equality%20Impact%20Assessment.dot</i>			

PURPOSE OF REPORT To demonstrate the outcomes and benefits of the City Community Initiatives Partnership (chaired by ESFRS) to CMT, and how this supports the reduction of fire risk, alongside the wider partnership work and outcomes within the City.

EXECUTIVE SUMMARY The Community Initiatives Partnership (CIP) formed in 2014 with the mission statement “*to Prevent Vulnerable People from Coming to harm in their living Environment*”. Chaired by ESFRS, the Partnership brings together a range of partners including Police, Housing, Adult Social Care, Clinical Commissioning Group and voluntary services to develop joined up working on a range of themes ensuring services reach those in our City in need of them to reduce risk. The first initiative, the Carelink Pilot, developed a new

direct referral mechanism between Carelink and ESFRS leading to a significant increase in referrals. The Partnership subsequently focused on hoarding creating the Hoarding sub-group and drafting the Citywide Hoarding Framework including a range resources and referral mechanisms for working with hoarders. The Partnership is currently focusing on protection and prevention in hi-rise buildings and for those moving from prison or hostels into independent living, and on referrals and support for those with dementia. This work supports the wider strategic aims of Citywide partners including safeguarding and is well placed to support work under the Neighbourhoods and Communities Portfolio.

RECOMMENDATION

It is recommended that CMT consider progressing the CIP structure across the Service, tactically deploying the intervention mechanisms to meet the specific objectives of reducing fire risk, tailored as appropriate for risk and demographics across the Service area

1. INTRODUCTION

- 1.1 The Community Initiatives Partnership (CIP) was formed in late 2014 as a gap was identified for an operational group to drive forwards activity in line with the Home Safety agenda. The Partnership reports to, and seeks to deliver strategic aims of the Health Protection Forum, but also has a clear agenda to support the strategic work of Health and Safety, Safeguarding, and Neighbourhoods and Communities.
- 1.2 The mission statement of the CIP is “*To Prevent Vulnerable People from Coming to harm in their living Environment*”, partners are united by the shared commitment to make a real difference to our communities. The meetings focus on sharing knowledge, information and learning between partners, and on developing new joint working initiatives to identify vulnerable people in Brighton and Hove and ensure appropriate services reach these people to reduce risk and increase their safety.
- 1.3 Membership has grown in strength since 2015 and now includes ESFRS, Sussex Police, Clinical Commissioning Group (CCG), Carelink, Action on Elder Abuse, Brighton and Hove City Council (BHCC) Health and Safety, BHCC Private Sector Housing, BHCC Head of Tenancy, BHCC Seniors’ Housing, Adult Social Care (ASC), Public Health and Brighton and Sussex University Hospitals (BSUH) Admiral Nurses. Meetings are themed and additional partners attend as appropriate for each theme – for example Alzheimer’s Organisation for the Dementia topic, Primary and Secondary Mental Health Partners for Hoarding, and Probation for the resettlement sub-group.

- 1.4 Initially the group focussed on developing a shared understanding of the nature of vulnerability within the City (“*who do we need to reach*”), an asset register of services (“*what is available to help them*”), and the Carelink initiative developing a new direct referral pathway (“*how can we ensure the services reach the people who would benefit from them*”). Over 2015-2016 the group has developed to undertake more detailed pieces of work on specific themes through delivery sub-groups as outlined below on issues prioritised by members as needing a multi-agency approach to meet the core aim of keeping people safe in their living environment.
- 1.5 **Governance** – The CIP is a multi-agency collaboration between partners to make best use of existing resources and create more joined-up ways of working. Attendees representing their organisation are of the appropriate level to make decisions within meetings. The CIP reports annually to the Health Protection and screening Forum.

“Since being established in December 2014, the Community Initiatives Partnership has continued to ensure vulnerable people are protected from coming to harm in their domestic environment. The group membership includes ESFRS, BHCC, Voluntary Agencies and Health Partners. This partnership approach continues to deliver initiatives such as cross referral pathways, and the development of risk management protocols including a Hoarding Framework. The pooling of resources in this way to ensure safeguards are in place for vulnerable people is vital in the context of increasing demand on our diminishing resources” – Janice Percy, BHCC Head of Health and Safety

2. Initiative Summary and Outcomes

2.1 Carelink initiative

Background

- Both Carelink and ESFRS are seeking to reach a similar cohort of people with their services. The services are complimentary, ESFRS offer specialist alarms and ESFRS offer specialist home safety advice. However referrals between the two services for 2014-15 were low (3 referrals each way). Through discussion it was noted that there was a lack of awareness regarding each other’s service.
- Citywide Connect Referral guidelines promote close local working relations, knowing who to pick up the phone to, awareness for frontline staff and feedback on referrals as building trust between partners and important factors in ensuring appropriate referrals.

Outcomes

- Carelink awareness held with all 12 ESFRS City Crews, giving crews knowledge about Carelink equipment and building direct relations.
- Carelink Tip sheet and direct referral form on all Fire appliances
- New direct referral pathway created whereby Carelink referrals are sent directly to station (rather than ESFRS) Headquarters each Friday allowing clear monitoring and any issues to be dealt with in a timely manner, direct relationship and feedback between agencies, agencies attending case conferences together on complex cases and mutual sharing of advice and expertise
- Referrals increased to

- 2015/16 Total ESFRS to Carelink : **22**
Carelink to ESFRS : **66**
- 2016/17 Total ESFRS to Carelink : **23**
Carelink to ESFRS : **64**
- Direct Referral Model replicated for British Red Cross hospital discharge referrals into ESFRS, leading to **75** referrals for 2017/17
- Senior Housing Scheme referrals now added to the Carelink referral spreadsheet into ESFRS. In addition ESFRS awareness sessions held with Senior Housing Scheme Managers and each ESFRS City crew has been allocated a set of Seniors Housing Scheme to build direct links and set engagement plan for reaching vulnerable residents with Scheme Managers

Future plans

- Continue with Carelink Direct Referral Mechanism which is now an established project and maintain the relationship between both organisations to ensure continued success of the project
- Consider roll out of mechanism to further appropriate agencies
- Monitor and evaluate ESFRS crew engagement with allocated senior housing.
- ESFRS to progress the role of responder to linked Carelink CO alarms, linking with the fuel poverty strategy

2.2 Hoarding Sub-group



Background

- Nationally it is estimated between 2-5% of the population hoards, approximately 1.2 million people, and each hoarding case can cost up to £60,000
- Level of hoarding in Brighton and Hove unknown but several partners reporting a high volume of cases, with cases becoming more prevalent, complex to deal with, at times bouncing between partners or partners attempting repeated interventions which are not working and not knowing who to refer on to
- Potential of Hoarding to impact on ability of Landlords to carry out statutory duties; fire risk to occupant, neighbours and firefighters; environmental health implications; safeguarding referrals; tenancy implications; physical and mental health impact to the individual

- Merseyside Fatal Fire Review relating to Hoarding recommends “Agencies develop, renew or refresh their hoarding strategy and protocols to ensure a framework of accountable and collaborative multi-agency working is established”
- Several areas developing a multi-agency Hoarding Framework e.g. Nottinghamshire, Westminster, West Sussex.

Outcomes

- Brighton and Hove Multi-Agency Hoarding Framework written in consultation with partners including background information, assessment tool, resources and referral contact information. Framework gives a consistent approach to working with hoarding.
- Commitment to joint-working and adopting the Framework approach gained from ESFRS, BHCC Housing, Carelink, CCG, Wellbeing, Environmental Health, Sussex Partnership Foundation Trust (SPFT), ASC, RSPCA, Sussex Police, Pavilions, Age UK, Elder abuse Recovery Service
- Information sharing agreement written with input from BHCC Legal Services to ensure that information sharing is not a barrier to reducing risk for high risk clients
- Data gained from services on number of hoarders currently being worked with and increased referrals between partners to reduce risk (EG Carelink working with 4/5 clients per month , Wellbeing working with 8 hoarding clients for mental health support, 21 hoarding clients flagged on ESFRS system, List of 30 further Hoarding Home Safety Visit (HSV) referrals received by ESFRS from TSOs)
- ESFRS support for the Sussex Recovery College Hoarding Course promoting self-help for people who are hoarding and safety advice for hoarders (approx. 40 students annually)
- Hoarding panel set up, learning and best-practice shared, and 2 cases discussed at first panel meeting
- ESFRS attended two hoarding ASC Multi-disciplinary team meetings.
- ESFRS Roedean White Watch Hoarding theme, supported two high risk hoarding cases.

Future Plans

- Autumn Sussex Recovery Hoarding Courses to be held at Hove Fire Station to further promote safety messaging, engagement with services, and Home Safety Visits
- Hoarding Multi-Agency Framework to be signed off at Safeguarding Adults Board to give ownership and oversight
- Information sharing agreement to be signed off, high risk cases to be referred in and discussed at the City Hoarding Panels and action plans set to manage risk.
- Work with partners on the potential to fill the gap around free/low-cost person centred hoarding support and decluttering services, consideration potential bid to BHCC Collaboration Fund
- Develop a preventative self-help pack which can be given by frontline workers to low-risk hoarders as appropriate
- Develop an evaluation tool based on WSCC online tool to gain data on number of hoarders being worked with in the City and feedback on the Multi-Agency Framework

- Develop a Tip sheet and tools to embed Framework with frontline workers (e.g. Hoarding picture assessment tool on Fire appliances)
- Hoarding and mental health awareness sessions to be rolled out for all City Firefighters.
- Linking to the Hi Rise sub-group, a hoarding sprinkler task force being established to assess installation in high risk hoarding properties, 6 properties have been identified and will now be assessed

The 'Practical Approaches to Hoarding' workshop provided by the Recovery College is facilitated by a Peer Trainer from Southdowns, and a clinician from Sussex Partnership NHS Foundation Trust. There is a lack of resources available in the City for hoarders and therefore the Workshop provides a unique opportunity to hoarders, their friends/family and professionals to learn about a broad range of perspectives and opinions of how to declutter. Since making a link via the CIP Hoarding sub-group, a representative from the Fire Service also now joins the session to give important safety awareness to hoarders and the course will be run from Hove Fire Station in the Autumn to build further trust and engagement with these residents. – Jeremy Rowe, Psychologist, Sussex Recovery College

“The CIP has provided the space for likeminded individuals to come together to tackle city issues, innovate and work together with the aim of increasing safety for vulnerable people living in the city. There has been a focus on collaboration and achieving tangible results. By working together, ESFR and CareLink Plus have seen a significant increase in referrals for Home safety Visits and CareLink Plus equipment. In collaboration, a new hoarding framework has been produced which promotes good person-centred working and a multi-agency approach. Many thanks to ESFR for co-ordinating the CIP and progressing this important partnership group” – Joel Caines, Operations Manager, Carelink

2.3 Hi-Rise prevention and protection



Background

- Hi-rise building present a particular challenge in terms of fire risk and safety due to the nature of the buildings and exit in case of incidents

- Following two serious fires at Essex Place in Brighton, a need for partners such as ESFRS and BHCC Housing to work together to promote increased fire safety and awareness to residents
- There are a number of hi-rise properties in the City with a range of residents who may have specific vulnerabilities and needs, some of these such as bariatric residents and hoarding present particular safety challenges and concerns in hi-rise buildings

Outcomes

- Hi-rise prevention and protection sub-group formed to progress joint working between ESFRS, BHCC and Sussex Police
- Joint working with BHCC Resident Involvement Team. Hi-rise engagement plan piloted with Essex Place including telephone calls to all residents to gain referrals for Home Safety Visits passed directly to ESFRS via piloted new local referral mechanism, **24** additional referrals received, family engagement event on site led by ESFRS Education Team
- Article including in BHCC Housing Newsletter raising awareness of the high-rise project amongst staff and promoting reporting of ASB.
- New BHCC Fire Safety Policy produced
- New BHCC mobility procedure introduced to deal with mobility scooters in blocks of flats causing a fire risk, meeting held with disabled tenants' forum to launch document.

Future plans

- Phased programme is being developed to roll out the Essex Place engagement model to all Hi-rise blocks, supported by the Resident Involvement Team. Data is currently being analysed to prioritise based on risk
- Hoarding sprinkler task force being established to assess installation in high risk hoarding properties, 6 properties have been identified and will now be assessed.
- Explore more agencies using ECINS (the Empowering Communities Inclusion and Neighbourhoods Management System) for safe information sharing across multiple agencies

"Seniors housing has benefited from our partnership with ESFRS and the CIP by us working in a more systematic way with the service on fire safety. Given the vulnerability of older people to fire, we were pleased to hold the fire awareness session with ESFRS in January and agreeing, via CareLink Plus, a new referral system for home visits. The joint work on stoveguards also looks very promising, bringing new safety devices into the kitchens at Brooke Mead reducing the risk of accidental cooking fires. We look forward to the new hoarding framework and it has been a pleasure working with ESFRS developing these. The CIP has been invaluable and we're proud to support it" – Peter Huntbach, BHCC Seniors Housing Manager

2.4 Resettlement

Background

- There is a significant amount of emergency and temporary accommodation in the City as well as those moving on from care, hostels or prison into independent living who may benefit from tailored advice and as a preventative

approach to take responsibility for their own home and fire safety

- CIP partners all identify chaotic lifestyle as a key vulnerability factor in the City
- 60% of accidental dwelling fires in the City for 2016-17 were in properties where all residents are below pensionable age, therefore a need for fire prevention work focussing on younger residents has been identified

Outcomes

- Resettlement sub-group created linking ESFRS, BHCC, Sussex Police and Probation to develop resettlement pack
- Home Safety Visits promoted via Sussex Police Community Messaging

Future Plans

- Develop a Resettlement Pack for those moving into independent living
- Secure Home Safety Visit referrals for those moving into independent living
- Build on links with Brighton Housing Trusted supported Housing and Community Connections

2.5

Dementia

Background

- There are an estimated **2,646** people in the city living with dementia.
- Impact on memory is a risk factor in relation to fire for example kitchen distraction (over 60% of fires in the City are kitchen fires).
- CIP partners have services which can benefit these clients e.g. ESFRS Home Safety Visits, Carelink equipment, and BHCC Housing (Brooke Mead)
- All partners may come across service users who are living with dementia and are keen to have appropriate awareness to provide tailored support. There are a range of services for those living with Dementia in the City for example increasing number of Dementia Cafes, and a wide range of services, the journey through services will be different for each individual, it is therefore important for partners to have an awareness of key contacts and partner agencies

Outcomes

- Carelink representatives attended the City Dementia Conference
- Presentations to CIP from the Alzheimers Society, BSUH Admiral Nurses and CCG Commissioner for Dementia to give an overview on services
- Feedback gained on language in ESFRS leaflets and referral forms relating to Dementia
- Stoveguard equipment to be placed in the new Brooke Mead extra care housing scheme jointly funded by ESFRS and BHCC.
- 6 additional Home Safety Visit Referrals received into ESFRS

Future Plans

- Roll out Dementia Awareness training for frontline workers of CIP partner organisations
- Link to the Memory Assessment Service for referrals, as the main gateway service for all clients.

2.6

Communications

Background

- CIP partners have identified the need by partnership agencies for joint

working in this area to better identify, support and engage the local community, thereby improving their safety and wellbeing and enhancing community resilience. The aim is to ensure that every contact counts, and that anyone coming into contact or working with someone who is vulnerable within in our City boundaries has knowledge and awareness of the tools and resources available to be able to offer help and support.

- CIP partners are often trying to engage with a similar cohort of people and it has been identified as vital to make best use of resources by issuing joint communications where appropriate and avoiding duplication

Outcomes

- ESFRS and Carelink promotion of each other's service in key communications and ESFRS input into Carelink newsletter
- CIP Communications Strategy written and signed off at CIP including development of CIP branding, timescale and structure for four key communications per year relating to key identified themes and messaging.
- CIP listed as a case study relating to good practice in the updated BHCC Collaboration Framework

Future Plans

- Embed the communications strategy ensuring key joint communications throughout the year
- Finalise CIP logo and branding
- Link Communications Representatives from partner organisations
- Ensure CIP partners are represented on local groups taking forward the Hub working under the Communities and Neighbourhoods portfolio and attend associated events and engagement opportunities.
- Ensure CIP links to the joint Local Safeguarding Children's Board / Safeguarding Adults Board Participation and Engagement sub-group as appropriate, for cross-learning and support, avoiding duplication
- All organisations to promote joint CIP messaging and any event they attend.
- Hoarding Partnership Framework to be launched during Safeguarding Adults Week in December.

3. Future Plans

- 3.1 To continue, fully develop above initiatives, ensuring joint working and to support the safeguarding of residents in our City. This will fully link with and support wider work of the Communities and Neighbourhoods Portfolio, City Management Board, and identified City priorities.
- 3.2 In addition to the above aims CIP will take Fuel Poverty as the next themed initiative assessing how CIP partners can support the City Fuel Poverty Strategy. Fuel poverty has been identified as a priority for partners following notable fire incidents in the City where candles have been the source of ignition including a serious fire at Essex Place. There is a concern that fuel poverty could be a factor in relation to increased use of candles. Likewise those in fuel poverty are by nature vulnerable and may benefit from services of CIP partners. ESFRS will work with those identified as in fuel poverty via the City Strategy to offer home safety visits to all of these residents.

- 3.3 Raise awareness of the work of CIP at the senior level considering links to appropriate Boards and potential of formalising links.
- 3.4 Building further links with Community and Voluntary Sector (CVS) partners and wider CVS representation at meetings.
- 3.4 Build links with the BHCC Communities and Neighbourhoods (CN) Portfolio, looking at how the approach of CIP (looking at Citywide vulnerabilities) can support the geographical hub-based approach of the CN Portfolio, how CIP partners can support priorities identified under the neighbourhood action plans, and how the remit of the Field Officer role may have outcomes relating to CIP initiatives.

“I joined the CIP last year when starting in post as Volunteer Co-ordinator for a new service – the Elder Abuse Recovery Service- covering East Sussex. The benefits of being a member of CIP already include building relationships with local colleagues and being able to get to know about their service, gaining awareness about key local strategic plans and the chance for real partnership work in mutually supporting clients. Additionally I think one significant achievement of the CIP is that it helps services deliver a more in-depth and good quality level of support to a wide range of clients in the local community”. – Gail Shanahan, Action on Elder Abuse

4. Any implications affecting this report should be noted within the final paragraphs of the report

4.1 Financial Impact

For CIP to function it a coordination role is necessary ESFRS Partnership and Engagement Coordinator (Grade 8). However there are also cost benefits of closer working and sharing cost and resources including joint communications.

4.2 Political Impact

The CIP has led to closer links developing with BHCC at the senior level including Chief Executive, Director of Communities and Neighbourhoods, and the City Management Board.

“The CIP is fundamentally a product of practitioners from a number of public and voluntary organisations who wanted to work more collaboratively in reducing suffering of those most vulnerable in the communities of Brighton & Hove. The basic principle was that every interaction should count and regardless of whether it was a social worker, council employee, firefighter or volunteer, the individual should be able to light up the network and secure resources and services that would swiftly and profoundly improve the lives of those suffering in the community” The initiatives have developed and the groups confidence has grown as case studies have shown how the efforts of the group demonstrated the real and positive effect the work was having on people's lives. Being part of what was a very dedicated and ethically driven collaborative team was a very rewarding and truly humbling experience” – Mark Matthews, ESFRS Assistant Director for Safer Communities and Founding Chair of the CIP.

